YOUTH SERVICES
POLICY

Title: Standard Operating Procedures for Female Intensive Residential Treatment Providers	**Type:** A. Administrative **Sub Type:** 4. Contract Management **Number:** A.4.3
	Page 1 **of** 2
References: U.S. DOJ PREA Standard 115.352 (e)(1); ACA Standards 2-CO-1B-10 and 2-CO-1C-17 (Administration of Correctional Agencies); YS Policy A.4.1 "Contract Process", Attachment (b) “OJJ Contracts Management And Procedures Manual”.	
Approved	
Approved By: *E. Dustin Bickham, JD, Interim Deputy Secretary*	**Date of Approval:** 06/04/2020

I. AUTHORITY:

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

II. PURPOSE:

To establish the Standard Operating Procedures (SOP) for providers of female residential treatment programs as a YS/OJJ Policy.

III. APPLICABILITY:

Deputy Secretary, Assistant Secretary, Undersecretary, Deputy Undersecretary, Chief of Operations, Executive Management Advisor, General Counsel, Regional Directors, Regional Managers and female intensive residential contract providers who provide treatment to females in the custody of YS/OJJ.

IV. DEFINITION:

Intensive Residential Treatment Program (IRT) - A structured behavioral treatment program which serves adolescent females who are adjudicated delinquent and placed into a secure program in a professionally staffed residential environment 24 hours per day. The purpose of the residential service is to provide a safe and restrictive environment for those youth requiring secure residential services and to provide them with the skills necessary to reenter society and function as productive citizens.

NOTE: Additional definitions may found in the attached SOP.

V. POLICY:

It is the Deputy Secretary's policy that all Intensive Residential Treatment Program providers abide by the provisions contained in the attached YS/OJJ Standard Operating Procedures for Providers of Female Residential Treatment Programs

Previous Regulation/Policy Number: A.4.3
Previous Effective Date: 04/26/2017
Attachments/References:

Attachment: A.4.3 (a) 2020 Standard Operating Procedures for Providers of Female Residential Treatment Programs - June 2020
A.4.3 (b) DNA Offense List – June 2020
A.4.3 (c) Youth Rights and Responsibilities – June 2020
A.4.3 (d) Group Counseling Assessment Form – June 2020
A.4.3 (e) DPSSP 6696 – December 26, 2018
A.4.3 (f) SCR-1LIC – January 2013
A.4.3 (g) Funds Balance/Withdrawal Request – June 2020
A.4.3 (h) DCFS/CW Form CPI-2 – January 2012
A.4.3 (i) Title 28 EDUCATION – October 2019

A.4.3 (a)

2020

Standard Operating Procedures for Female Intensive Residential Treatment Providers

OFFICE OF JUVENILE JUSTICE

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MISSION, VISION, GUIDING PRINCIPLES

MISSION

The Office of Juvenile Justice protects the public by providing safe, and effective individualized services to become productive, law abiding citizens.

VISION

The Office of Juvenile Justice 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

Honesty – To be honest; to do everything with integrity

Achievement – To be outcome-oriented in achieving results consistent with our mission

Versatility – To value, promote and support diversity and cultural competence

Ethical – To be ethical; to do the right thing, both legally and morally

Focused – To be focused on empowering people to succeed

Accountable – To be accountable for the effective and efficient management of our resources

Informed – To be informed and guided in our decisions by appropriate and valid data

Team Work – To be effective and efficient team of professionals

Harmonious – To be inclusive – involve all parties, both external and internal, who need to be part of the process.

Have Faith: Together we help change lives.

All Youth Services/Office of Juvenile Justice Policies referenced herein can be located on the Office of Juvenile Justice website. https://ojj.la.gov/policies-systems/ojj-policies/

SECTION 1: PHYSICAL PLANT

It shall be the responsibility of the contractor to 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; Requires Policies

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

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 terms of their contract.

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

The provider shall establish a drug-free work place policy.

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 serve exclusively youth referred by the Office of Juvenile Justice, the Office of Juvenile Justice reserves the right to approve the site, design and proposed floor plan for any new or relocated facility. The contractor shall be asked to produce:

A. Evidence that the site location is appropriate to the population to be served, program goals and access to essential services and individual needs of the youth.

B. A description of the way in which the facility physically harmonizes with the neighborhood in which it is located considering such issues as scale, appearance, density and population.

1.3 Accessibility, General Safety, and Maintenance of Buildings and 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; and
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 are maintained and available at all times to transport youth to and from their programs without causing disruption of program services.

1.4.1 Drivers

Designated drivers of program 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.

The driving records of staff operating program vehicles 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

2.1 Staff Qualifications

Individuals providing services to youth in the custody of YS/OJJ must possess all licenses and/or certificates required by statute or by the Department of Children and Family Services (DCFS), the Department of Health, Office of Health Standards or the program's accrediting body, as applicable.

Any individuals providing services must be qualified to do so by educational background and/or experience.

Copies of required degrees and/or transcripts showing educational hours shall be kept on file for review by the monitors.

These standards shall constitute in part the basis for determining the adequacy of program and professional services delivered under contractual agreement with YS/OJJ.

2.1.1 Position Descriptions and Qualification Criteria

Case Manager: A generic term used within a secure care facility to identify members of the counseling profession, e.g., Social Services Counselor, Clinical Social Worker, Program Manager, or a treatment team member assigned to manage a youth's case and assists the youth with their ITP/IIP.

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

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 must 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.

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.).

Recreational Specialist/Staff: 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/rehabilitative treatment services including individual, group and family counseling to youth participating in an intensive residential treatment program.

Individuals providing this function must possess, at a minimum, a master's degree from a fully accredited college or university in social work, psychology or counseling, and be supervised by a licensed mental health professional.

Teacher: An individual who provides basic educational services as required by state and federal statutes. This individual must hold a valid Louisiana teaching certificate in the appropriate instructional field.

Youth Care Worker: A member of the team responsible for developing and monitoring ITP/IIP's for youth in intensive residential treatment programs, conducting educational groups, developing and supervising day-to-day activities, implementing the behavioral management plan, monitoring telephone calls, television viewing and video game usage, providing transportation when required, participating in off-site activities and responding to crises.

2.2 Program Staffing Requirements

The contractor 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 that youth know the roles of each staff member.

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

A. After school, until bedtime (generally 3:00pm until 10:00pm);

B. On Saturdays, Sundays and holidays when administrative and support staff are generally not scheduled; and

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 contractor shall ensure that youth being transported are properly supervised.

The contractor 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 their 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 shall be conducted in accordance with a written program plan and coordinated by a designated staff member at the supervisory level.

Staff development includes formal classroom instruction, on-the-job staff development 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 use of videotapes, films and other audio/visual methods of staff development. Routine staff meetings and supervisory conferences shall not be considered staff development.

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

All youth care workers, teaching parents, supervisors, counselors and case managers (including all volunteers in these positions) shall receive a total of 56 hours of staff development during the first year of employment: 16 hours of pre-service and 40 hours

of in-service. An additional 40 total hours of staff development is required each subsequent year. (Programs required by contract terms to obtain ACA accreditation shall abide by ACA training standards.) **Providers, including employees, volunteers, and contract staff are required to participate in YS/OJJ sponsored staff development opportunities when appropriate and available.**

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 teaching. Training programs should 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 their individual work with youth;

C. Where available, involve the use of community resources;

D. Include in-service staff development in existing practices, procedures, and skills necessary for working with youth;

E. Include pre-service and in-service training on the Prison Rape Elimination Act (PREA); and

F. Include pre-service and in-service training on the program's drug-free work place policy.

2.3.1 Pre-Service Orientation

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

A. OJJ vision, mission and guiding principles and program philosophy;
B. Program procedures and programmatic goals (i.e., schedules, admission criteria, completion criteria, behavior management system, program progression);
C. Interventions employed by the program, including treatment curriculums, group/individual counseling, and behavior management;
D. Principles of Effective Intervention (i.e., What Works in Correctional Treatment, Assessment, Effective Treatment Interventions);

E. Job responsibilities;
F. Personnel policies;
G. Youth supervision;
H. Report writing;
I. Instruction in safety and emergency procedures including nonviolent crisis intervention;
J. Confidentiality issues;
K. Youth Rights and Grievance Procedure;
L. Activity Report-Unusual Occurrence Report;
M. Program's Standard Operating Procedures;
N. Communicable diseases;
O. Boundary issues;
P. PREA; and
Q. Drug-Free Work Place Policy.

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 must complete a 30-day internship. During their first 30 days on the job, they shall be under the supervision of an experienced youth care worker or direct care supervisor. They shall not qualify when computing staff to youth ratio.

2.3.2 In-Service Staff Development Requirements for Direct Care Workers, Counselors and Case Managers

Staff development course content must include the following:

A. Principles and practices of youth care and supervision (i.e., signs and symptoms of mental illness in children and adolescent's psychotropic medications: benefits and side effects);

B. Principles of Effective Intervention (i.e., What Works in Correctional Treatment, Assessment, Effective Treatment Interventions, curriculum-based group counseling refresher training);

C. Program procedures and programmatic goals (i.e., behavior management system);

D. Youth Rights and Grievance Procedures;

E. Procedures and legal requirements concerning the reporting of 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. Legal matters (i.e. Children's Code and Criminal Code);

K. Security procedures (i.e. key control, searches, and contraband);

L. Socio-cultural lifestyle of youth (i.e., diversity, human dignity, cultural competency);

L. Implementation of ITP/IIP's;

N. Instruction on documentation and communication procedures with fellow employees and Agency Staff;

O. Report writing (i.e., progress notes, ITP/IIP's, quarterly reports);

P. Emergency and safety procedures including medical;

Q. Current certification of CPR and First Aid;

R. Safe administration and handling of medication, including psychotropic drugs;

S. Activity Report-Unusual Occurrence Report;

T. Program's Standard Operating Procedures;

U. Universal precautions regarding injury and illness including communicable diseases;

V. PREA; and

W. Drug-free work place policy.

2.3.3 Documentation of Training

A. Staff development records shall be kept by a designated staff person. Separate staff development records shall be established for each staff member and volunteer and shall include the following:

1. Name;
2. Assignment category [position, type of employee (full-time/part-time/volunteer)];
3. Employment beginning date;
4. Annual staff development hours required; and
5. A current chronological listing of all staff development completed.

B. Staff development programs must be documented by the following:

1. Date and times staff development was conducted;
2. Topic of the staff development session;
3. Name and qualifications of the instructor; and
4. A roster with signatures of all participants including subject, date, trainer(s) name(s), and duration of staff development.

2.4 Volunteers

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

Programs serving youth shall solicit the involvement of volunteers to enhance and expand their services not to substitute for the activities and functions of program staff.

2.4.1 Volunteer Plan

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

A. Volunteer recruitment is conducted by the Facility Director or designee. Recruitment is encouraged from all cultural and socio-economic segments of the community.

B. Volunteers are at least 21 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 are licensed or certified as required by state statute or regulation.

F. Written job descriptions are provided for each volunteer position.

G. Volunteers must agree to background and criminal record checks as prescribed by state statutes, and licensing requirements.

H. Volunteers are adequately trained and the training is documented.

I. Volunteers shall be supervised by a paid employee of the program. This individual shall coordinate and direct the activities of the volunteer. Volunteer performance shall be evaluated periodically and evidence of this evaluation shall be made part of the volunteer's file.

J. A procedure shall be established for the termination of volunteers when substantial reasons for doing so exist.

2.5 Criminal Background 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.
C. 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 .

In accordance with RS 46:51.2 and RS 46:1414.1 [see YS Policy A.4.2, Attachments (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.

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. 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 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 Department of Children & Family Services/Child Welfare Regional Office on attachment (h), "DCFS Written Report Form for Mandated Reporters of Child Abuse/Neglect", and notify the regional YS/OJJ 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 program 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 program 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: GIRLS' PROGRAMMING

The contractor shall provide rehabilitative services designed to improve the youth's behavior, minimize the likelihood of continued delinquent offenses, and facilitate successful home/community reintegration.

3.1 Admission Procedures

Once a female has been adjudicated, a SAVRY is completed by the originating regional office to determine if the youth meets the criteria for an intensive residential treatment (IRT) program. Females meeting the criteria for IRT are classified as "pending secure" and are placed on the "pending secure" list in the YS/OJJ data system. The YS/OJJ office of origin shall forward a packet containing all pertinent information concerning the youth to the YS/OJJ Central Office Director of Treatment and Rehabilitative Services. Once the assessment is complete, the IRT program that is closest to the youth's home that has an available bed shall be notified of the pending transfer of the girl into the IRT program.

The following steps shall be taken when admitting a youth into an intensive residential treatment facility.

A. A copy of treatment recommendations shall be faxed by the YS/OJJ Central Office Director of Treatment and Rehabilitative Services to the provider, the placing Regional YS/OJJ and the supervising YS/OJJ offices prior to the youth's arrival at the facility except in the event of an emergency placement by the Court. The Facility Coordinator shall either mail or hand deliver a copy of all additional information relating to the youth following the youth's arrival to the facility.

B. Transportation arrangements shall be made with the placing Regional Office to transport the youth to the designated facility.

C. YS/OJJ shall schedule an appointment for DNA testing and fingerprinting for all youth admitted into the intensive residential program. Pursuant to La. R.S. 15:609, YS/OJJ staff shall schedule a DNA sample to be taken from youth who have been adjudicated delinquent for the commission of an attempt, conspiracy, criminal solicitation, or accessory after the fact of a

felony-grade delinquent act or other specified offense listed in La. R.S. 15:603 (10). [See Attachment (b)]

D. The program shall be responsible for the following upon the youth's arrival:

1. Conduct a mental status exam;
2. Complete a basic medical exam;
3. Distribute clothing to the youth;
4. Assign the youth a bed;
5. Discuss possessions allowed;
6. Begin integrating the youth into appropriate programs; and
7. Orient youth in the treatment program.

E. The provider shall give the youth a copy of the youth manual which describes the rules, level system, expectations, grievance procedures, phone use, mail, etc. Because youth may not be familiar with staff expectations and not understand what is expected of them, staff shall explain the steps taken during the orientation process, and assist the youth in notifying their families of the procedures to follow for mail, telephone and visiting. In addition, youth should be given an opportunity to express concerns and ask questions. Staff shall provide an explanation to youth as to the appropriate staff members to contact about particular concerns and/or problems while in the program (i.e. the role of treatment staff, medical staff, direct care staff and teachers).

F. Youth who do not understand English shall receive written orientation materials and/or translations in their own language. When a literacy problem exists, staff shall assist the youth in understanding the material.

G. As part of the admission/orientation process, youth shall receive written materials and view the YS/OJJ designed Prison Rape Elimination Act (PREA) power point presentation. Staff shall process the video and information with the youth in accordance with YS/OJJ Policy No. C.2.11 "Prison Rape Elimination Act (PREA)".

H. Completion of orientation shall be documented by a signed and dated statement by the youth, as well as all the youth receipts for correspondence during the admission process being dated, signed, and filed in the youths' record in accordance with YS/OJJ Policy No. B.3.1.

I. The provider shall develop a file for the youth which shall conform to YS/OJJ Policy No. B.3.1. "Secure Care Youth Records; Composition and Maintenance".

3.1.1 Admission Policy

A. Any change in the admission policy shall be considered a change in the contract requiring a formal contract amendment or waiver. This does not preclude temporary exceptions requested by YS/OJJ or approved for the provider by YS/OJJ.

B. Without authorization from YS/OJJ, a contractor shall not admit more youth into care than the number specified on the provider's contract.

C. A youth's admission into a program shall be based on an assessment of the youth's comprehensive needs and on the ability of the contractor to address same.

D. A contractor shall ensure, if feasible, that the youth and the person legally responsible for the youth are provided an opportunity to participate in the admission process and related decisions.

E. Only youth who meet the criteria for placement into the program shall be referred to the program except in emergency situations when a judge has ordered immediate placement, or when a more appropriate placement is not available. The contractor shall not refuse admission of any referred female between the ages of 10-20 determined appropriate by YS/OJJ and referred to the contractor, regardless of psychiatric diagnosis or behavioral history, race, ethnic origin or religion.

3.1.2 Emergency Placement

The Office of Juvenile Justice, shall, at times, require providers to facilitate emergency placements. YS/OJJ Director of Girls' Programs shall facilitate the transfer of available social, evaluative and medical information and shall determine the need for additional assessments. The requirements of 3.1 Admission Procedures, Paragraphs B-I, shall be met.

3.2 Discharge Process

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

Reintegration planning begins with the initial development of a ITP/IIP and is an ongoing process throughout the youth's program. Refer to SOP Section 4.1, Service Plan.

The youth's case manager/counselor in collaboration with the multidisciplinary treatment team (MDT) is responsible for reintegration planning and must ensure that the program's obligations to the youth have been met prior to release

3.2.1 Planned Discharges

A. A planned discharge is a discharge following the youth's successful completion of the youths treatment program, and/or modification by the court, or the discharge of a youth on the youths 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 parent(s)/aftercare workers to reinforce;
5. Recommendations for continuing service in the youths' 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
   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, the youths' 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.

E. The following procedures shall be completed by the contractor at the time of discharge:

1. The program shall ensure that a release agreement signed by the youth and a facility representative is maintained in the youth's file which includes 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 facility issued articles (sheets, pillowcases, bedspreads, towels, washcloths, etc.).

2. The contractor shall immediately provide the youth's medication and prescriptions to the individual or agency authorized to transport the youth.

3. Within five (5) working days of discharge, the contractor shall provide to the supervising regional office the following:

   a. Any available dental or medical records not already provided; and
   b. All available records from the school(s) the youth attended while in the program.

3.2.2 Recommending Reassignment, Release, or Discharge

Youth in the custody of YS/OJJ assigned to an intensive residential treatment program (other than those committed under the provisions of La. Ch. C. Article 897.1 or who have a self-modifying order) shall be considered for reassignment to a non-secure program, release or discharge from custody when the youth has completed the treatment program. In these cases, a modification of disposition must be filed in accordance with YS/OJJ Policy Nos. B.2.1 "Assignment, Reassignment, and Release of Youth".

3.2.3 Emergency Discharges

In the event that a youth's medical or psychiatric condition is such that long-term hospitalization is required, YS/OJJ may discharge the youth from the contractor's care. A provider shall not conduct an emergency discharge of a youth without first obtaining permission from YS/OJJ.

3.3 Reservation of Program Slots

When a youth's treatment program is interrupted, with an expectation for return and continuation of services, a program slot reservation shall be coordinated through the Regional Director for this individual.

Hospitalization for psychiatric or medical reasons**,** trial home visits and escape/runaways are routine situations for program slot reservation. In these cases, the program slot shall be reserved until YS/OJJ notifies the program that the youth will not return.

3.4 Furloughs

Youth shall be considered and recommended for furloughs in accordance with YS/OJJ Policy No. C.4.1 "Furlough Process". Furloughs shall be utilized as a rehabilitative tool to assist youth in maintaining and improving positive family and community relations.

Furloughs for youth assigned to intensive residential treatment programs shall be considered an integral part of the youth's ITP/IIP. However, in all cases, the potential risk to public safety and adequacy of home supervision shall be considered prior to allowing a youth to return home. It is also important that furloughs not interfere with the ongoing treatment and supervision needed by youth in YS/OJJ custody.

Provisions shall be made for annual review of the furlough program's effectiveness. The contractor shall maintain data on the number of requested furloughs, approved furloughs, successful and unsuccessful furloughs, and barriers to approval and success.

3.4.1 Escorted Passes

Youth shall be considered and recommended for an escorted absence when the youth has met the minimum qualifications as outlined in YS/OJJ Policy No. C.4.7 "Escorted Absence". Escorted passes shall be granted to youth for therapeutic purposes, including the opportunity to visit with family before the release date to set realistic goals and expectations; to show youth acceptable and socially appropriate behavior, allow youth to participate in work/training opportunities and to participate in special events in the community. The passes should be used primarily as an incentive for progressing through the level system and to address reintegration plan issues such as enrolling in school, applying for a job, obtaining a driver's license, etc. Family emergency passes should be permitted for visits of dying family or attendance at the wake of a family member.

To be eligible for an escorted pass, a youth:

A. Must be Low or Moderate risk youth;
B. Must be participating in all programming (school, counseling, mental health or specialized treatment;
C. Must have no disciplinary violations within 30 days prior to the proposed escorted absence;
D. Must have no escapes/runaways within 12 months prior to the proposed escorted absence; and

E. Must not be considered a high public safety risk.

High risk youth who meet the above criteria, except for the custody and risk considerations, may be allowed to participate in an escorted pass for family reintegration purposes, if it is reviewed and approved by the provider staff, the youth's YS/OJJ PPO/J, and the Facility Director.

Limitations on the number of youth at the approved site shall be in accordance with YS/OJJ Policy No. C.4.7.

# of Youth	# of JJS	# of Other Staff	Requirements
1-2	1	1	1 same sex
2-3	2	1	1 same sex
4-5	2	1	1 same sex
6-7	2	1	1 same sex
8-9	2	1	1 same sex
10-11	3	3	2 same sex
12+	3	3	2 same sex

If a crowded large venue is selected for the visit, the location's security staff must be informed of the visit two (2) days prior to arrival, and a time for the activity should be selected when crowds will not be heavy. The group should also be limited to six (6) youth for this type of setting. Examples of appropriate small group incentive activities include: outings to movie theatres (not in mall locations) during the day hours, outings to restaurants during the day hours, outings to local civic organizations or restorative justice community activities. Large group activities may include: organized facility team sporting events, family fun day related activities, fishing trips. The Facility Director or designee shall accompany the group. Public safety is always the first priority when considering off-campus activities.

Mechanical restraint use, staff ratios and proximity to youth shall all be in accordance with YS/OJJ Policy No. C.4.7.

A. Mechanical Restraints

Staff shall have belts and handcuffs with them on all escorted absences. Handcuffs shall remain in staff's possession at all times for immediate use if needed. Occasions when restraints may be used include, but are not limited to:

1. Youth is found with contraband; and/or

2. Engages in self-harming behavior or exhibits other types of behavior problems; and/or

3. Attempts to escape or escapes and is recaptured, or the visit is unexpectedly terminated.

B. Proximity to Youth

Staff shall be no more than 3 feet away from the youth and in the line of sight of the youth they are supervising at all times. Youth shall be escorted and supervised on bathroom visits by a staff member of the same gender.

C. Food

Food consumed during the escorted absence shall be purchased at the time of the visit.

All youth must be examined by medical staff prior to an escorted pass and upon return from an escorted pass.

Documentation of a violation shall occur on the Unusual Occurrence Report [Attachment A.1.14 (a)], with a copy forwarded to the YS/OJJ regional office.

While escorted passes are typically the responsibility of the contractor, either the supervising or placing probation officer may also choose to participate in an escorted pass. Escorted passes initiated by the facility do not require prior approval by YS/OJJ; however, the supervising regional office shall be notified 24 hours prior to the escorted passes. Escorted passes initiated by YS/OJJ must be coordinated with the residential facility.

Youth participating in escorted passes may wear street clothing rather than the facility uniform.

3.5 Temporary Closure of Facility

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

The contractor shall provide YS/OJJ with an emergency plan for natural disasters, fires, floods, or other emergency situations which may or may not require the temporary closure of the facility.

Approval must be obtained from YS/OJJ prior to moving youth in an emergency situation, when possible. In the event there is insufficient time to request approval (i.e., natural disaster, fire, flood, etc.), the contractor must assure the safety of all youth, then immediately notify the supervising YS/OJJ Regional Manager of the physical location of each youth assigned to the program.

3.6 Travel

3.6.1 In-State Facility Overnight Travel

A. Planned overnight facility outings within the State shall be approved by the Deputy Secretary or designee.

B. The Facility Director or 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/phone numbers);
3. Scheduled location of outing;
4. The number and names of youth involved;
5. The number of staff providing supervision, as well as their names and positions; and
6. Contact information (cell phone numbers) of staff providing supervision.

C. Written notice to the supervising region shall occur at least 14 days prior to the scheduled activity.

D. Any “unusual occurrences” during the outing shall be reported to the supervising regional office immediately.

3.6.2 Out-of-State Travel

Prior authorization is required from the Deputy Secretary for out-of-state travel. The procedure is as follows:

A. The Contractor shall:

Notify the supervising regional office, in writing, at least 30 days prior to the scheduled outing. The following information shall be included:

1. Date(s) of the scheduled trip;
2. Destination of the trip;
3 Transportation arrangements;
4. The address and phone number of overnight accommodations;
5. The names of youth and the names and positions of the staff; and
6. Contact information (cell phone numbers) of staff providing supervision.

B. The Supervising Region shall:

1. Notify the placing region of proposed travel;
2. Obtain youth's signature on the Interstate Compact Out-of-State Travel Permit and Agreement to Return form and maintain form in the youth's file;
3. Contact the YS/OJJ Deputy Secretary or designee for authorization for out-of-state travel after court approval is obtained; and
4. Notify contractor of final decision.

C. The Placing Region shall:

1. Obtain court approval after notification from the supervising region; and
2. Advise supervising region when court approval is obtained.

3.6.3 Out-of-State Travel – Individual Youth

Out-of-state travel for an individual youth in the custody of YS/OJJ must have the prior written approval of the Deputy Secretary and the court of jurisdiction. It is the responsibility of the placing region to contact the Deputy Secretary and the court of jurisdiction. The information required in SOP Section 3.6.2 above shall be included in the request for out-of-state travel.

3.7 Recreation and Leisure

The contractor 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 contractor shall employ 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 contractor. The contractor shall not require youth to pay to participate in recreational activities. Participation in recreation shall be documented and maintained individually in the youth case files.

3.8 Education

The contractor 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. All youth placed in Intensive Residential Treatment Program shall be tested within seven days of placement. Youth shall be retested every six months and/or prior to release. Formal tests such as the Test of Adult Basic Education (TABE) or the Woodcock Johnson shall be utilized.

A. All youth of mandatory school age shall be enrolled in a school system or in a program approved by the 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 Title 28, Bulletin 1530 attached).

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 HiSET and given the opportunity to complete all HiSET testing.

E. All youth who have obtained a high school diploma or HiSET 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 completed high school or obtained a HiSET and desire vocational education shall be enrolled in a structured, sequential, and time-limited on grounds vocational program with emphasis on skill development using the State approved curriculum. Vocational Programs shall be accessible to youth, appropriate to age, interest and abilities and graduation requirements. (Refer to YS Policy B.7.2.)

G. All youth who have obtained a high school diploma or HiSET and have taken the ACT shall be given the opportunity to enroll in a college/university either on or off site or via the internet. If off site, contractor staff shall be present with the youth. (Refer to YS Policy B.7.2.)

YOUTH WITH INDIVIDUAL DEFICIT DISORDER/ LEARNING DISABILITIES/ADHD

Accommodations shall be provided as needed to all youth with mental retardation individual deficit disorder, learning disabilities, or ADHD to ensure the youth adequately understand and participate in any services/programs provided by the program.

An Individualized Education Plan (IEP) must be written and provided to the program by special education personnel from the school board providing education services for all youth meeting criteria for special education services.

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 religions on-site.

B. Youth shall be permitted to receive visits from approved official representatives of their respective faith.

3.10 Behavior Management:

The Contractor 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. Incentives and consequences are fair and directly relate to the target behavior(s).

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

3. 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.)

4. Rewards and consequences should be consistently applied.

The application of rewards should outnumber the application of consequences by a ratio of at least 4:1 (ex: there should be 4 applied rewards for every 1 applied consequence).

3.10.1 Characteristics of the Formal Disciplinary Process

Providers are required to have a formal written disciplinary process which includes the following elements:

A. Notice of the rules, penalties and process;

B. Notice to youth being disciplined;

C. Notice of the possibility of restitution;

D. A mechanism for a fair and impartial hearing by a disciplinary committee who was not involved in the incident giving rise to the disciplinary action; and

E. A process for appeal.

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 disciplinary response. Discipline shall not compromise the safety and well-being of the youth. Disciplinary procedures shall be carried out promptly and the contractor should notify the parents of infractions in a timely fashion.

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 usual services;
   a. Education
   b. Vocational services and employment
   c. Medical services
   d. Communication with family, PPO/J, or legal counsel; and
5. Extra work detail.

3.10.2 Restitution

Program youth should be held responsible for the financial consequences of their actions. The contractor should implement procedures for youth 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 a hearing in accordance with the disciplinary procedures of the provider and standards set forth in this document if restitution is to be considered. Written evidence or testimony of costs incurred or damages to justify restitution shall be documented by staff and a hearing shall be conducted with the MDT 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

The contractor's formal youth disciplinary procedures shall include a procedure for an appeal or review of the decision of the disciplinary committee. At the time of notification of appeal, the disciplinary committee may delay imposition of the consequence. 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 Confidentiality

Confidentiality of records is of critical importance.

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

A. All records shall be stamped "confidential" on the cover or outside folder;

B. Youth records shall be kept in locked areas and shall be supervised and controlled by an authorized staff member;

C. Automated records shall include a procedure to ensure confidentiality; and

D. The provider shall have written policy and procedure to address the confidentiality of youth records. At a minimum, these policies and procedures shall specify the following:

1. The information 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. Who will supervise the maintenance of the records, who shall have custody of records, and to whom records may be released.

3.11.1 Access

A. Access to or release of confidential youth records shall be limited to the following authorized persons:

1. Staff authorized by the contractor and members of the administrative staff of the contractor's parent agency;
2. A parent/guardian for youth under age 18. If the youth if is age 18 or over she must authorize release;
3. Appropriate YS/OJJ staff; Counsel for the youth with signed consent form;
4. Judges, prosecutors, and law enforcement officers when essential for official business;
5. Individuals and agencies approved by YS/OJJ to conduct research and evaluation or statistical studies;
6. State licensing reviewers; and
7. Social service agencies.

B. If YS/OJJ believes that information contained in the record would be damaging to the youth's treatment/rehabilitation, that information may be withheld from the youth and/or the youths' parent(s)/guardian(s) or others except under court order.

3.11.2 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 designee. For youth under the supervision of YS/OJJ, the contractor shall obtain signed authorization from the youth and parent/guardian.

3.11.3 Release Forms

A. The youth and legal authority (parent/guardian if youth is under 18 years old or PPO/J) shall sign a Release of Information Consent Form before the information about the youth is released to anyone outside of YS/OJJ. The Director of Treatment and Rehabilitative Services shall be contacted for approval prior to release.

B. The Release of Information Consent Form shall include, at a minimum, the following:

1. Name of person, agency, or organization <u>requesting</u> information;
2. Name of person, agency, or organization <u>releasing</u> information;
3. The specific information to be disclosed;
4. The purpose or need for the information;
5. Date consent form is signed;
6. Signature of the youth and the parent/legal guardian;
7. Signature of the person witnessing the youth's signature; and
8. An expiration date.

C. A copy of the consent form shall be maintained in the youth's record.

D. Documents provided to the contractor by YS/OJJ shall not be reproduced or distributed without written permission from YS/OJJ.

3.11.4 Retention of Youth Records

Contractors shall turn over the entire original youth record to the region of origin upon the youth's release.

All copies of youth records retained by the contractor shall be purged after the youth's 25th birthday.

3.12 Personal Funds

The contractor 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 have been in the program at any time during the previous year. The personal funds account and the report are 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 her account minus any funds due the contractor shall be given or mailed to her within 30 days regardless of the reasons for discharge.

If the youth is to be reassigned to another program, a check should be made in the name of the youth and forwarded to the new program within seven working days.

The provider must document efforts made, including contacts with YS/OJJ, in attempting to locate a youth for transfer of funds. When a youth cannot be located, those funds held on the youths behalf are considered to be abandoned after 90 days and shall be remitted to YS/OJJ Central Office. The refund check and report must be accompanied by a list of youths' names and case numbers.

3.12.3 Claim's Against a Youth's Account

The contractor shall not require youth to pay for services and supplies which are to be provided by the contractor (e.g. toiletries, linen, laundry, 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 merits restitution to the contractor 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 their 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 are required to provide meals and 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 to the program to provide all transportation associated with youth's ISP. It is YS/OJJ's 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.

The facility shall have an adequate number of vehicles to move the entire population at any given time

Female Intensive Residential Licensing prohibits facility staff from using mechanical restraints on youth. In the event the Facility Director determines mechanical restraints are required for the transport, coordination of the transport shall be completed between the supervising YS/OJJ Regional Manager and the Facility Director.

3.15 Clothing

The contractor shall provide youth sufficient clothing appropriate to participate in activities included in their ITP/IIP.

If the youth does not have sufficient clothing (for furloughs, facility outings, and/or participation in vocational programs) the Facility Director or their designee shall contact the supervising region for authorization to make an initial clothing purchase.

Replacement clothing shall be purchased at the expense of the provider. Clothing left behind if 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 contractor for certain program-related expenses, with prior approval from the Deputy Secretary, according to the following terms:

A. The item or service must be needed to promote the health, well-being, and/or treatment goals of the youth;

B. The item or service is not available or fundable through any other source, including the family of the youth; and

C. The cost of the item or service is not specifically funded by the per diem paid to the contractor.

The contractor shall obtain prior approval from the Deputy Secretary or designee before making a reimbursable expenditure.

3.16.1 Types of Reimbursable Expenses

In certain emergencies 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 and the criteria shall be applied individually. Examples of reimbursable expenses include the following:

A. Clothing Purchases

The contractor shall provide for basic clothing needs, including seasonal garments, and replacement of outgrown clothing.

When youth have insufficient clothing to participate in activities included in their ITP/IIP and no means to acquire clothing (for furloughs, outings, etc.), a request for clothing purchases may be submitted to YS/OJJ. The request must include a clearly documented need.

B. Medication

YS/OJJ shall reimburse the contractor 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 directly related to treatment of an existing condition and is not preventative, elective, or discretionary treatment.
4. The item or service is denied reimbursement by Medicaid.

C. School Expenses

YS/OJJ shall reimburse the contractor for certain expenses directly related to educational or vocational services.

Reimbursement shall not include the routine purchase of school supplies (e.g. paper, pencils, pens, notebooks, workbooks, lunch fees, etc.)

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

1. Tuition and/or fees for approved course work or vocational education; and
2. Tools, text books, 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. One-on-One Staffing

When extraordinary circumstances (i.e., hospitalization) 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 person providing the supervision. This request should be submitted to the supervising regional office which shall obtain approval from Central Office. One-on-one staffing may only be considered in crisis situations to address the safety of the youth and the public.

SECTION 4: TREATMENT

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

4.1 Individual Treatment Plan/Individual Implementation Plan (ITP/IIP)

A. The provider shall develop a written Individual Treatment Plan/Individual Implementation Plan (ITP/IIP) designed to enhance the growth and development of assigned youth. The ITP/IIP shall be developed by MDT to target the individual social, behavioral, mental health, medical, educational and vocational needs of the youth that were identified through formal assessment. Targets for change, goals and objectives, time frames for completion, and performance indicators shall be developed during the case planning process. ITP/IIP goals and objectives must be individualized, clear, measurable and attainable. The contractor shall utilize all available resources to develop the ITP/IIP, including but not limited to the following:

1. Social History (provided by OJJ);
2. SAVRY summary results (provided by OJJ);
3. Psychological/psychiatric evaluation, if available;
4. Educational records
5. Health records and;
6. Psychological/behavioral tests conducted by the contractor.

B. Case plans should not be exactly the same for each youth. They should be developed in conjunction with the youth and routinely updated. The case plan shall serve as a management tool which the program utilizes to track goal and objective completion and a youth's progression through the program.

The ITP/IIP shall be completed within 14 working days of admission, and a written copy shall be submitted to the supervising region, the placing region, if different, and the youth's parents/guardians within seven (7) days of completion.

C. A maximum of three (3) "High" (especially critical) dynamic SAVRY risk factors shall be addressed on the ITP/IIP. If "High" risk factors were not indicated on the SAVRY, "Moderate" risk factors shall be addressed. Any educational, vocational, mental health or medical needs shall also be addressed in the ITP/IIP.

D. At a minimum the ITP shall contain the following elements:

1. Overall goals,
2. Behavioral objectives relative to goals,
3. Criteria for measuring objective completion,
4. An estimate of time needed to achieve the goal,
5. A schedule of the frequency and intensity of the services to be provided,
6. The individual responsible for providing the service, and
7. Scheduled review date.

E. The ITP/IIP shall be reviewed monthly and updated by the MDT quarterly. Goal and objective progression shall be documented in the youth's record on the Monthly Assessment of ITP/IIP Progress and treatment plan review form. MDT members participating in quarterly staffings shall sign a new Summary of Staffing Form signature sheet following staffings.

4.2 Reintegration Plan

The program shall establish a structured reintegration program for program youth. Reintegration planning should begin when a youth is admitted to the intensive residential treatment program. A formal reintegration plan should be initiated during the development phase of the ITP/IIP in collaboration with the MDT and shall be completed within 30 days of placement. The plan shall be reviewed and updated, and documented during ITP/IIP reviews and staffings. A copy of the final plan should be filed in the youth's case record and given to the youth and parent/guardian, YS/OJJ Central Office, and supervising and placing YS/OJJ regional offices within seven (7) days of release. (Refer to YS/OJJ Policy No. B. 2.2)

The ITP/IIP shall address the ten (10) primary areas of reentry. Eight (8) of which include challenges / identified needs obtained prior to admission to a secure care or residential facility, and rated "High" or possibly "Moderate" risk on the youth's latest SAVRY reassessment.

The following need areas shall be included in the plan:

1. **Family:** Challenges and living arrangements that need to be addressed; appointments for family counseling;
2. **Peer Groups, Pro-social and Leisure Activities;**
3. **Mental Health and Emotional Stability**: Appointments for mental health counseling and contact information;
4. **Education**: In addition to SAVRY needs, the need for special education services, GED services, as well as applications for financial assistance shall be addressed and attached to the plan. Specific schools the youth has enrolled in or will be enrolled in;

5. **Vocational Training and Employment**: Applications to schools or jobs with contact information shall be included and attached. All youth 17 and older who have achieved a GED shall have a finalized vocational training or employment plan;

6. **Substance Abuse:** Appointment dates and times for continued substance abuse treatment;

7. **Community Issues**: If the youth is returning to a high risk community, the plan shall include strategies to address youth and family and issues that may arise within their community; and

8. **Disruptive Behavior Issues:** Appointment dates and times made to address behavioral issues.

Other reintegration factors that can be addressed which are not included in the SAVRY needs may include but are not limited to the following:

9. **Special Conditions of the Court** (including sexual behavior problem treatment and registration of youth who have committed a sex offense); and

10. **Physical Health and Medication Management.**

4.3 Counseling/Therapy

Counseling/therapy shall be conducted in accordance with the minimum requirements outlined in the service grid of the contract and may take place in house or through community resources.

A. Counseling/therapy should be planned, goal-directed and focused on assisting the youth in achieving ITP/IIP goals and objectives.

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 ITP/IIP. 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 YS/OJJ. Recent research indicates that the following guidelines can be useful to determine “dosage” of treatment:

1. For Moderate risk youth with few needs (three or fewer) 100 hours is sufficient to reduce recidivism;

2. For youth either High risk or multiple needs, but not both, 200 hours are required to significantly reduce recidivism;

3. 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 an evidence-based curriculum manual. 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. All Counseling/Therapy Sessions shall be documented using the acceptable format (DAGP) and should include the date, beginning and ending time, goal addressed and Signature of the individual providing the counseling service.

Individual Counseling/Therapy

A. Individual counseling/therapy must be conducted by a master's level counselor/social worker/therapist under the supervision of a licensed mental health professional.

B. Individual counseling/therapy shall be an ongoing component of the youth's ITP/IIP. Each youth shall be assigned an individual who shall be responsible for providing the counseling/therapy.

C. Individual counseling/therapy shall make provisions for crisis intervention and address the goals/behaviors identified in the youth's ITP/IIP. Individual Counseling Services shall provide to each youth in accordance with their level of risk and needs identification through assessments. Individual counseling/therapy services must meet the weekly requirement stated in the contract.

D. In order to be considered individual counseling/therapy, sessions must be a minimum of 30 minutes and must be conducted by the identified service provider. Youth identified with an Intellectual Developmental Disorder (IDD) must have two (2) individual counseling sessions per week.

Each individual counseling/therapy session shall be documented on the Progress Notes Form using an acceptable format documenting the start and end time, date, goal addressed and signature of the individual providing the service.

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

E. Youth with individual deficit disorder must receive individual counseling for a minimum of two (2) thirty-minute sessions per week. Staffings for youth with individual deficit disorder (mental retardation) must be held a minimum of once every 30 days. A Brief Youth Interview Form must be completed by the case manager prior to the staffing.

GROUP COUNSELING

A. Group counseling/therapy must be conducted by a trained and qualified staff under the supervision of a licensed mental health professional. For example, staff conducting the Thinking for a Change curriculum should be trained and qualified to do so.

B. Group counseling shall be an ongoing component of the youth's ITP/IIP and aligned with the identified needs of each youth.

C. When targeting criminogenic issues, the contractor should utilize programs and practices that are based in evidence. Group interventions targeted to specific issues are to use an evidence-based curriculum based on the best practices model. The best known are cognitive behavioral within a social learning environment.

D. Group counseling sessions are to be held daily for a minimum of 50 minutes in duration. Group counseling shall provide attention to goals/behaviors relevant to the entire group. Sufficient space shall be provided to accommodate group meetings. The room(s) shall be comfortably furnished.

CRISIS COUNSELING

A. Individual counseling/therapy must be conducted by a master's level counselor/social worker/therapist under the supervision of a licensed mental health professional.

B. Crisis counseling is a type of brief treatment for which the case manager assists a youth with an immediate problem (i.e., trauma due to abuse, recent fight or suicidal ideation or attempt). This type of counseling is to occur as needed in addition to or during the weekly individual counseling session.

FAMILY COUNSELING

A. Family counseling/therapy shall be conducted by a staff person with, at a 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.

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

C. 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 to the youth's mental health at the time. A statement of goals to be achieved or worked towards by the youth and her family shall be part of the ITP/IIP.

D. Family counseling may include private family counseling sessions and/or family group sessions. This shall be made available in person, whenever possible, but the facility shall also utilize conference telephone sessions if distance makes face-to-face sessions unworkable. Family sessions shall be conducted for a minimum of 30 minutes per month as noted in the ITP/IIP.

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

FAMILY SKILLS 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 skills training shall be provided in accordance with the contract and ITP/IIP.

INFORMAL CONTACT

Any informal contact or collateral consultation with family, social services, education personnel, medical personnel, other service providers, etc. (i.e., family issues, educational concerns, medical issues, reports of alleged abuse, and emotional distress) shall be documented in the youth's case record. Each progress note entry shall be signed (full name and title) and dated by the person making the entry.

Required Educational Groups for all Youth

Educational groups are designed to provide youth with the opportunity to acquire skills that foster healthy decision making and effective critical thinking. As outlined in Agency contracts, intensive residential treatment programs shall provide:

GENDER SPECIFIC GROUP/EDUCATION

These groups may be provided by direct care workers under the supervision of the master's level mental health professional.

The purpose of this group is to address the risk factors that predispose female 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.

Independent Living Skills Training

A contractor shall have a program to teach **all** youth independent living skills consistent with their needs.

A. This program shall include, at a minimum, instruction in:

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

B. 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 monthly.

C. Prenatal Care/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 females 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.

D. Social and other skills:

1. Anger management
2. Conflict resolution
3. Refusal skills
4. Interaction with authority figures
5. Negotiation/compromising skills

4.4 Family Education / Parenting Program

Staff providing family education/parenting skills programming shall have a master's degree in a human service field with demonstrated conceptual familiarity with family dynamics **or** be an individual with specific training in the parenting model selected for use by YS/OJJ.

The purpose of the family education/parenting skills program is to teach parents/guardians to use effective consequences 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 with their children.

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.

4.5 Specialized Services for Youth with Severe Emotional Needs

All specialized services for youth shall be addressed on the Mental Health Treatment Plan (Part 3 of the ITP/IIP) by the appropriate service providers.

PSYCHIATRIC SERVICES

Psychiatric services are to be provided to youth needing psychotropic medication for management of a severe emotional disturbance. Psychiatric services may be provided by an individual psychiatrist or through contract or cooperative agreement with a community mental health center or a licensed psychiatric rehabilitation facility. Psychiatric services shall include evaluation, medication management, and consultation with program staff in the overall treatment/management of the youth's mental illness.

When services are provided by an individual on staff or on contract with the program, the psychiatrist shall be, at a minimum, a licensed board-eligible child/adolescent psychiatrist **or** a licensed board-eligible adult psychiatrist with at least three (3) years of experience in providing services to children/adolescents.

Psychiatric services shall be provided as needed for appropriate care based on the acuity level of the youth, but no less frequently than once per month.

CRISIS INTERVENTION

The program 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.

4.6 Required Intensive Issue-Related Group Interventions for Youth with Identified Needs

These groups shall be conducted by a master's level mental health under the supervision of a licensed mental health professional unless otherwise specified.

These groups are for youth who have been identified as having a significant issue with **anger management, substance abuse or abuse/trauma** and require intensive, issue-specific therapy. These groups are expected to be therapeutic rather than psychoeducational in nature. Youth involved in these groups may have a mental health diagnosis related to these issues.

ANGER MANAGEMENT/CONFLICT RESOLUTION GROUP INTERVENTION

The purpose of this group intervention is to help adolescents recognize the risks associated with violence, understand that anger is a normal emotion that can be expressed constructively, and teach specific social skills to effectively manage conflict.

SUBSTANCE ABUSE TREATMENT

Intervention must be provided by an individual with demonstrated instruction and/or experience in substance abuse counseling or provided through the services of a state-licensed substance abuse clinic. Provisions shall also be made for youth participation in self-help groups (AA or NA) when included as part of the ITP/IIP.

The purpose of this group is to reduce recidivism of youth with a history of substance abuse, increase understanding of the causes of self and socially destructive behavior, provide knowledge and skills to understand the disease, and teach relapse prevention and management.

ISSUES OF ABUSE/TRAUMA

Most females have a history of experiencing/witnessing physical and/or sexual abuse. An abuse history is highly correlated to behaviors such as substance abuse/dependency, self-harmful and assaultive behaviors, and disruptive behaviors. The purpose of this group is to assist youth with trauma-related behaviors to understand the relationship between abuse and maladaptive behaviors and to establish the concept of safety, which includes elements such as discontinuing substance use, reducing suicidality, minimizing the exposure to risky behavior (such as unprotected sex), termination of dangerous relationships (such as drug-using peers and abusive relationships), and ending self-injurious behaviors such as cutting.

4.7 Required Therapy Group for all Youth

Group therapy must be conducted by a master's level counselor/social worker/therapist under the supervision of a licensed mental health professional.

The purpose of this group is to focus on interpersonal relationships and help youth learn to get along better with other people, to provide a support network for specific problems or challenges, to provide opportunities to learn with and from other people, to understand one's own patterns of thought and behavior and those of others, to perceive how group members react to one another, and to work on shared problems. Group therapy shall be conducted for a minimum of one (1) hour per week.

4.8 Assessing, Documenting and Reporting Progress

4.8.1 Treatment Documentation

The program must maintain treatment records in each youth's file that follows accepted standards. All files, including but not limited to treatment plans, individual, group, and family case/progress notes, and progress summaries shall be made available to YS/OJJ's named representative upon request for the purpose of quality assurance.

A. Individual Counseling Progress Notes

Each individual counseling/therapy session must be documented on the Progress Notes form using the DAGP format: Data, Assessment, Goal, Plan, and must document beginning and ending time, date, goal addressed, and signature of individual providing the service.

B. Group Counseling (Therapeutic and Educational) Progress Notes

Each group session must be documented individually on the Group Counseling Assessment form for each youth participant. Group notes must be individualized and state information relevant to the content, behavior, progress, etc. of the youth being documented rather than a general summary of the group. A separate group note must be written for each participant and must include only the name of the individual being discussed. Notes must include beginning and ending time, date, goal addressed, and signature of individual providing the service.

C. Family Counseling Progress Notes

Each family counseling session must be documented on the Progress Notes form using DAGP format: Data, Assessment, Goal, Plan and must document beginning and ending time, date, goal addressed, and signature of individual providing the service.

4.8.2 Monthly Assessment of ITP/IIP Progress

The Monthly Assessment of ITP/IIP Progress shall be completed by the youth's case manager/counselor and treatment provider, as applicable, in conjunction with the youth, and shall rate the youth's efforts toward achieving ITP/IIP objectives.

The Monthly Assessment of ITP/IIP Progress shall be filed in the case (master) record and a copy forwarded for filing in the youth's medical record.

4.8.3 Quarterly or Specialized Treatment Team Staffing

A. The ITP/IIP shall be reviewed by the multidisciplinary team at least quarterly. MDT review of the ITP/IIP may be held more frequently, if needed, to consider whether emergent changes in the youth's behavioral or mental status require plan modification. All members of the MDT should participate either in person or by phone in the quarterly staffings; however, it is required that a minimum of three (3) MDT members attend. Those members unable to attend shall submit written reports regarding the ITP/IIP goal progression. The parent/guardian shall be invited to participate in quarterly staffings through written correspondence.

The ITP/IIP Summary of Staffing form shall be utilized to document the deliberations of the MDT. This form shall be completed for all staffings, including: initial, quarterly, interim, and special staffings. The Summary of

Staffing form shall also be utilized when addressing release planning. The signatures of all staffing participants shall be documented on the form.

4.8.4 Quarterly Progress Report

The contractor shall complete, in writing, a Quarterly Progress Report for each youth assigned to the intensive residential program. The first report is due within 90 days of the initial date of placement.

The progress report is a summary of the youth's progress toward meeting the goals and objectives set forth in the ITP/IIP. Quarterly reports should focus on areas of change in behavior and attitudes as well as the factors required for successful program completion. The quarterly progress report shall follow the "Progress Report Format Guidelines" and shall include the completed Custody Reclassification form.

The report shall be distributed by the provider to the court of jurisdiction, district attorney, supervising and placing regional offices (if different), and parent/guardian within 7 days of completion. Documentation of compliance shall be maintained in the youth's case file.

SECTION 5: SECURITY AND SUPERVISION

5.1 Monitoring Movement of Youth

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

The contractor shall follow a written plan to allow staff in intensive residential treatment programs to monitor movement into and out of the facility. Program staff shall be able to account for the whereabouts of the residents at all times.

5.2 Escapes/Apprehensions/Reporting

A youth is considered an escapee/runaway if the youth leaves the facility grounds without staff approval, or fails to return to the facility after a furlough. Escapes/runaways from the Intensive Residential Program shall be reported <u>immediately</u> to the Regional Duty Officer, local law enforcement and the parent/guardian.

A. Within 14 days of a completed investigation by program staff and YS/OJJ field staff, a Critical Incident Assessment shall be conducted on every escape to review the following:

1. Staff and youth actions during the incident;
2. The incident's impact on staff and youth;
3. Corrective actions taken and still needed; and
4. Plans for improvement to avoid another incident.

A Critical Incident Assessment meeting of YS/OJJ field staff, the Facility Director, and all appropriate facility staff shall be conducted to review the investigation report and develop a plan of action to minimize any reoccurrence.

A written plan shall be submitted to the appropriate YS/OJJ Regional Director within seven days following the Critical Incident Assessment.

B. The Facility Directors' shall maintain a record and description of every escape from their facility. The record shall list the following:

1. Date and time of escape;
2. Number of youth who escaped;
3. Offense for which the escapee(s) was/were placed at the facility;
4. Name of each law enforcement agency notified;
5. Time each law enforcement agency was notified;
6. Name of each person receiving notification at the law enforcement agency; and
7. Name of the employee or agent who notified the law enforcement agency.

C. The Facility Director shall ensure that apprehensions are immediately reported by telephone to the supervising regional duty officer, as well as all applicable law enforcement agencies. The Facility Director shall forward a Written Notice of Apprehension to the District Attorney of the adjudicating parish ***within 48 hours,*** if a victim registration form was filed on behalf of the victim, in accordance with YS/OJJ Policy No. C.1.7.

5.3 Routine Searches

Regular youth, staff and visitor searches shall be conducted. The primary objective of the routine search is to ensure the safety of all youth, staff and visitors. Searches shall be completed in the least intrusive manner possible. The contractor shall post written policies and procedures for conducting searches in locations accessible to youth, staff and visitors. Regular searches shall be utilized to control contraband and/or locate missing property. The contractor shall also have a written policy and procedure establishing the consequences for residents found to be in possession of contraband and/or unauthorized items. Upon admission to the facility, the resident shall acknowledge, via signature that she was informed of what constitutes contraband/unauthorized items and the consequences of possession of said items.

5.3.1 Facility Searches

In order to ensure the safety of the residents, staff, and visitors, periodic housing searches for contraband and unauthorized items shall be conducted. The frequency and extent of the entire facility and ground searches should be consistent with the program policies and can be included during other routine inspections or activities. Searches shall be conducted by staff trained in the appropriate search techniques. Program staff can limit searches 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 and/or unauthorized item(s) was/were found, if any. If a search yields contraband or unauthorized items, the supervising regional office shall be notified by the close of business the following day, and it shall be reported according to the requirements of YS/OJJ Policy No. C.2.3. If necessary, local law enforcement shall be notified by the facility.

The Facility Director or designee may request the services of YS/OJJ (i.e. training and technical assistance) to assist their staff in conducting a search. YS/OJJ may conduct housing searches should conditions warrant.

5.3.2 Personal Items

Routine searches of suitcases and other personal items brought into the facility shall be conducted by program staff prior to the resident taking possession of the property and/or when the resident is returning to the facility from an escorted pass or furlough. Search of a resident's belongings may be conducted at any time and shall be as minimally intrusive as possible. Youth should be present when her belongings are being searched. Every effort must be made to ensure the youth is present during a personal items search. All searches shall be documented in the facility's logbook and if a search yields contraband, the contractor shall notify the supervising probation and parole officer and if necessary, notify law enforcement.

5.3.3 Resident 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 that contraband is on their person.

B. Pat down searches are conducted as follows:

1. The search shall be conducted by a 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 that they are about to be searched;

4. The youth should remove all outer clothing (gloves, coat, hat, shoes, socks, etc.) and empty all pockets;

5. The staff person shall then pat the remaining clothing of the youth using only enough contact to conduct an appropriate search;

C. All pat down searches shall be documented in the facility logbook. Documentation shall include the name of the resident being search, staff conducting the search and results of the search. A written report shall be completed when contraband is located to indicate the specific item(s) discovered. This written report shall be maintained by the contractor and forwarded to the supervising probation and parole officer. If necessary, local law enforcement shall be notified.

5.3.4 Resident 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. The youth' clothes shall be thoroughly searched prior to being returned. Strip searches may be performed by program staff only after a pat-down search causes reasonable suspicion that weapons, contraband, or unauthorized items may be found through additional searches. Strip searches shall be authorized by the Facility Director or their designee only.

Only staff that has been trained in the following search techniques may conduct resident strip searches using the following procedures.

A. A strip search shall be conducted by two (2) staff members who are of the same gender as the youth being searched. The first staff member shall observe the resident to conduct the search. The second staff member shall observe the staff member conducting the visual search.

B. A strip search shall be performed in an area that ensures the privacy and dignity of the resident.

C. The resident shall remove all clothing and move away from the articles.

D. Staff shall **NOT TOUCH** the resident.

E. The resident shall be instructed to run their hands through their hair.

F. Staff shall search the clothing carefully and return it to the resident.

G. All strip searches shall be documented in the facility log.

BODY CAVITY SEARCHES —VISUAL OR OTHERWISE ARE PROHIBITED

If it is believed that a youth may have contraband secreted in a body cavity, the contractor shall request assistance from the appropriate law enforcement agency. If contraband or unauthorized items are discovered, the supervising probation and parole officer/regional manager shall be notified by the close of business the following day. Discovery of contraband shall be reported according to YS/OJJ Policy No. C.2.3. If necessary, the appropriate law enforcement agency shall be notified by the facility.

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 contraband or unauthorized items are discovered, the supervising probation and parole officer shall be notified by the close of business the following day. If a visitor search yields contraband, the appropriate law enforcement agency shall be notified by the facility.

5.3.6 Staff Searches

The contractor shall distribute a written copy of the rules governing the control of contraband and unauthorized items to all staff. An acknowledgment of receipt of these rules shall be placed in each personnel file.

The Facility Director or designee may authorize a search of a staff person's belongings and/or a pat down search that follows established guidelines. Refusal to comply with the search or the discovery of contraband or unauthorized items shall be addressed by the Facility Director or designee in accordance with the program rules and regulations governing employees.

All staff searches shall be documented in the facility log. If contraband or unauthorized items are discovered, the supervising regional office shall be notified by the close of business the following day and reported in accordance with YS/OJJ Policy No. C.2.4 "Searches of Employees. If necessary, the appropriate law enforcement agency shall be notified by the facility.

5.4 Contraband and Unauthorized Items

According to R.S. 14:402, contraband is defined as described below.

A. Any controlled dangerous substance as defined by R.S. 40:961 or any other drug or substance that if taken internally, whether separately or in combination with another drug or substance, produces or may produce a hypnotic effect.

B. A dangerous weapon, or other instrument customarily used or intended for probable use as a dangerous weapon or to aid in an escape.

C. Explosives or combustibles.

D. Plans for the making or manufacturing of a dangerous weapon or other instrument customarily used or intended for probable use as a dangerous weapon or to aid in an escape, or for the making or manufacturing of explosives or combustibles, or for an escape from an institution.

E. An alcoholic beverage or other beverage which produces or may produce an intoxicating effect.

F. Stolen property.

G. Any currency or coin.

H. Any article of food, toiletries, or clothing, unless authorized by the Facility Director.

I. Any telecommunications equipment, including but not limited to cellular phones, beepers, or global positioning satellite system equipment whether or not such equipment may be intended for use in planning or aiding an escape or attempt to escape.

J. Any equipment, whether professionally made or homemade, intended for use in tattooing.

K. Any electronic device including, but not limited to computers, telephoto equipment, communications equipment, tablets or thumb drives, whether modified or not that is intended for use in the planning or aiding in an escape or attempt to escape.

L. Any object or instrument intended for use as a tool in the planning or aiding in an escape or attempt to escape.

M. Tape recorders, cameras or camcorders.

N. Movies, music, DVDs, CDs, cassettes tapes, VHS tapes, or other devices, images or videos.

O. Nude photographs, pornography or pornographic literature.

Unauthorized items as per written posted policy are items that are not illegal but are not allowed to be in a resident's possession.

Any 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 residents. Local law enforcement shall be notified in the event illegal drugs, weapons, drug paraphernalia, bio-hazardous materials, etc. are found.

The Facility Director, in consultation with YS/OJJ Regional Manager, shall be responsible for disposal of all contraband not confiscated by police. Visitors' items that are unauthorized but not illegal shall be taken and locked in an area inaccessible to the youth during the visit. These items shall be returned to the visitor upon exit from the facility. Disposal and reporting of all contraband shall be in accordance with YS/OJJ Policy Nos. C.2.3, C.2.4 and C.2.5.

A record of the disposition of contraband and unauthorized items shall be maintained by the program.

5.4.1 Contraband Disposal

Any 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 Resident Drug Screens

A drug screen shall be conducted when a youth returns from a furlough or escorted absence.

A. Drug screen results shall be documented individually in resident case files.

B. Drug screens shall be reported to the supervising probation and parole officer by close of business the following day.

5.6 Use of Force

The contractor 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 a punishment.

B. All use of force shall be documented in writing, dated, and signed by staff reporting the incident. The documentation shall be submitted to the Facility Director or designee.

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.dcfs.louisiana.gov/assets/docs/searchable/OCS/CPI-2.pdf. A copy of the completed report shall be provided to the OJJ supervising probation and parole officer.

The program shall not take reprisals against residents or staff for 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 Room Restriction

The contractor shall have written policies and procedures regulating the use of room restriction or unauthorized areas. The policy and procedure shall contain the following elements:

A. Procedures for recording each incident involving the use of restriction.

B. The reason for the room restriction is explained to the youth and the youth 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.

5.8 Battery on Staff

All instances of battery committed on a staff member shall be documented and when appropriate, charges shall be filed with the appropriate law enforcement agency. The supervising regional office shall be notified by the close of business the following day in accordance with YS/OJJ Policy No. B.5.1.

5.9 Suicide Precautions

All facilities shall have a plan for responding to youth who present a risk of suicide. The procedure shall include, at a minimum, the following elements.

A. Assessment of suicidal behavior and risk by qualified personnel.

B. A procedure for contacting the appropriate health authorities and the supervising regional office.

C. A plan, created by a qualified professional, for direct supervision of the resident until the suicide crisis has ended.

5.10 Abuse/Neglect Reports

In accordance with the Department of Children and Family Services (DCFS), all allegations of abuse and neglect shall be reported to the DCFS hotline at 1-855-452-5437.

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

Abuse – Any one 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 of 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 caretaker 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 – As defined in part by Ch. C. Article 603(14), the refusal or unreasonable 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.

If the provider files an allegation of abuse or neglect, a copy of the report will be forwarded to the Facility Coordinator by the close of business of the shift and the Facility Coordinator will fax the report to the Director of the Girl's Program for processing.

SECTION 6: ORIENTATION

YOUTH'S RIGHTS AND RESPONSIBILITIES

6.1 General Statement

All youth shall be advised of their rights and responsibilities, and the expectations of the provider, through the orientation process to be conducted within 24 hours of admission. All youth should be advised specifically of their rights and responsibilities outlined in the document attached in the Appendix. A signed copy of the attachment shall be filed in the youth's case record.

6.2 Mail

Mail shall be handled in accordance with YS/OJJ Policy No. C.2.9 "Correspondence and Packages".

6.2.1 Letters

A. All outgoing mail shall be stamped to indicate it originates from a secure care facility.

B. Youth may not send or receive letters from any youth under the supervision or in the custody of YS/OJJ, unless an exception has been approved by the Facility Director. Youth shall be allowed to send and receive letters from other persons unless specifically prohibited by their ITP/IIP or by order of the court of jurisdiction. All restrictions of mail shall be documented in the youth's ITP/IIP.

C. There shall be no restriction on the number of letters written, the length of any letter, or the language (English, Spanish, etc.) in which a letter may be written. Profanity, graffiti and/or gang symbols shall not be allowed on incoming or outgoing mail.

D. Youth may not send to or receive letters from inmates in adult prisons unless the person is officially listed in their record as an identifiable parent, legal spouse, sibling or grandparent, or unless an exception has been approved by the Facility Director.

E. Youth may not initiate contact with the victim(s) of their crime(s) (or the victims' family members), except in accordance with specific procedures established by the Facility Director in conjunction with the Crime Victims Services Bureau.

F. Inspection of Outgoing Letters

Outgoing letters are to be posted unsealed and inspected for contraband, with the exception of outgoing privileged mail as listed in 1-8 below, which may be posted sealed and may not be opened or inspected if it is confirmed to be addressed to an identifiable source. In accordance with YS/OJJ Policy No. C.2.9, an identifiable source means that the official or legal capacity of the addressee is listed on the envelope and that the name, official or legal capacity and address of the addressee has been verified.

Possible identifiable sources are the following:

1. Identifiable courts;
2. Identifiable prosecuting attorneys;
3. Identifiable PPO/J's;
4. Federal, state and local chief executive officers;
5. Identifiable attorneys;
6. Deputy Secretary, Assistant Secretary, Undersecretary, Chief of Operations, Executive Management Advisor, Regional Directors, and other officials and administrators of grievance systems of YS/OJJ;
7. Local, state or federal law enforcement agencies and officials; and the
6. U.S. Department of Justice (DOJ) Prison Rape Elimination Act (PREA) Auditor, identified by Central Office.

G. Incoming letters may be opened and inspected for contraband (with the exception of incoming privileged mail listed in F. above) only in the presence of the youth to whom it is addressed, except as indicated in YS/OJJ Policy No. C.2.9.

Any contraband, as defined by program policy, shall be disposed of according to program policy.

Youth shall be permitted to receive confidential information or correspondence from the U.S. DOJ PREA Auditor, as noted above.

H. Reading of Letters

Youth letters may be read only when the Facility Director/designee has determined through sufficient relevant information that the correspondence may contain material that interferes with legitimate program integrity, (including but not limited to deterrence of delinquency, rehabilitation of youth, maintenance of internal/external security of the facility, or maintenance of an environment free from sexual harassment), to prevent the commission of a crime, or to protect the interests of crime victims.

In such cases, the Facility Director or designee reading the youth's correspondence shall document the reading, which in accordance with YS/OJJ Policy No. C.2.9, includes:

1. Youth's name and ID number;
2. The specific reasons it is necessary to read the mail;
3. Approximate length of time the mail is to be read;
4. A photo copy and a list of each piece of correspondence, including the date received and the name of the sender; and
5. Signature of the Facility Director/designee.

The documentation shall be maintained by designated program staff and included in the youth's ITP/IIP. If the decision is to deny the youth the letter, the youth shall be informed of their right to appeal to the supervising regional office.

6.2.2 Stationary and Stamps

Facilities shall provide youth with sufficient stationery, envelopes and postage for all legal and official correspondence and for a minimum of three personal letters each week. Additional supplies may be earned with program levels, according to the behavior, purchased with personal funds, or provided by family.

6.2.3 Packages

All packages shall be inspected for contraband. Handling of items contained in packages shall be in accordance with YS/OJJ Policy No. C.2.9.

6.2.4 Publications

Books, magazines, newspapers, and printed matter which may be legally sent to youth through the postal system shall be processed or handled in accordance with YS/OJJ Policy No. C.2.9.

6.2.5 Collection and Distribution of Mail

Mail shall be collected from and delivered directly to the youth to whom it is addressed by program staff only, on a daily basis, excluding weekends.

In accordance with YS/OJJ Policy No. C.2.9, when mail is received for a youth who has been transferred or released, the Facility Director/designee shall attempt to forward the mail to the youth. If the attempt fail, the correspondence shall be forwarded to the youth's YS/OJJ PPO/J.

6.3 Visitation

The contractor shall develop written rules governing visitation and shall provide a copy to each youth, parents/guardians, and the placing and supervising regional offices. The contractor, in collaboration with YS/OJJ, shall screen potential visitors and approve or disapprove their visitation in accordance with the program criteria.

6.4 Personal Safety

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

Every youth shall be informed of procedures to contact a professional staff person on a 24-hour basis if the youth does not feel safe.

The Facility Director or designee shall make regular contact with youth in the program to determine if they feel safe and are 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. Appropriate action should be taken based on youths' candid responses about safety.

6.5 Smoking/Sale of Cigarettes

The contractor shall establish written policies and procedures banning the use of cigarettes and other tobacco products at the facility or while exercising supervision over youth. Youth who need help to stop smoking shall be assisted by the program in obtaining additional services to address this problem.

6.6 Research

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

6.7 Telephone

Facilities shall have written policies and procedures regarding the youth's use of the telephone. Youth will be provided with the opportunity to contact the toll-free number set by the Office of Juvenile Justice for reporting harmful behavior. The toll free number is 1-800-626-1430.

6.8 Television Programming

Programs may utilize local television programming, cablevision television, 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.

Facility Directors shall periodically review and monitor television programming.

6.9 Video Games

Game systems, videos/DVD’s rated “T” (Teen), “M” (Mature), “AO” (Adults Only), or “RP” (Rating Pending) are strictly prohibited.

The Facility Director shall periodically review and monitor television programming to upgrade or delete services as appropriate, as well as reviewing and monitoring of game system and video/DVD ratings for appropriateness.

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

The contractor 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

7.1 Medical Services

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

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 arrangement 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 facility 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.

7.1.3 Non-Routine Medical Treatment

Where it has been determined by a duly qualified and licensed physician that non-routine medical care is required, it is desirable to have the approval of the youth's parent or guardian. If the parent or guardian cannot be contacted, the matter should be submitted to the supervising regional manager for review and direction.

Examples of non-routine medical treatment include:

A. Administration of AZT to AIDS patient.

B. Chemotherapy approved by the FDA for human trials.

C. Surgery.

7.1.4 Staff Development Regarding Medical Issues

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.

Training shall include, at a minimum, the following:

A. Recognition of signs and symptoms of physical illness and knowledge of action required in emergency situations;

B. Signs and symptoms of mental illness, suicide risk, retardation, chemical use and/or dependency;

C. Methods of obtaining assistance, including emergency medical back-up plans; and

Procedures for transferring youth to appropriate medical facilities or health care providers.

7.1.5 First Aid Kits

First aid kits shall be kept locked and shall be placed in an area of the facility readily accessible to youth care workers. Each kit shall include, at a minimum, the following:

A. Latex gloves
B. Rolled gauze
C. Sponges
D. Triangle bandages
E. Band-Aids (adhesive bandage)
F. Instruction pamphlets on first aid
G. Salves and other over-the-counter medication approved by a recognized health authority
H. Antiseptic lotion
I. Note paper and pencil
J. Blunt-end scissors, safety pins, and tweezers
K. Ammonia inhalant

The contents, location, and use of first aid kits shall be reviewed annually with all staff. The content of the first aid kits shall be inventoried monthly and replenished as needed, taking into account the expiration dates of individual kit items. A copy of the inventory shall be kept in the first aid kit.

7.1.6 Communicable Diseases

The health authority (i.e. the physician or health administrator of an agency responsible for the provision of health care services to the contractor), 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 and provide an orientation and ongoing education for new staff and youth concerning these diseases. Counseling should be provided for those who have been diagnosed as being HIV positive. Policies and procedures should be updated as new information becomes available.

A. In accordance with law, a youth may request that they be tested for the presence of HIV. Youth requesting testing shall be tested. If possible, testing is to take place at the facility.

B. Examinations shall be performed on residents by proper medical authorities for all symptomatic cases of communicable diseases such as tuberculosis, ova and parasites, infectious hepatitis and venereal diseases. Residents shall be tested and, if indicated, treated.

C. Staff shall be provided information about a resident's medical conditions 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 the protection of staff and youth and for the proper treatment of the youth.

D. Confidentiality shall be maintained.

7.1.7 Pregnancy

ITP/IIP goals and objectives shall be developed when a pregnancy has been confirmed. The ITP/IIP shall be based on the orders of an 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.

A. Parenting classes shall be an integral part of the ITP/IIP for all pregnant females in care.

B. Medical services relating to pregnancy shall be provided by a physician/hospital as approved by the supervising regional office.

When the child is delivered and the mother requires continued placement in an intensive residential treatment program, the newborn shall be placed with an appropriate family member or in the custody of the Department of Children and Family Services. All efforts should be made to maintain contact between the mother and the infant.

7.2 Refusal of Medical Treatment

7.2.1 Youth 18 Years of Age or Older

If a youth 18 years of age or older 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 shall encourage the youth to comply with medical advice. The provider shall notify the supervising Regional Office immediately whenever a youth refuses treatment.

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

7.2.2 Youth Under 18 Years of Age

When a youth under 18 years of age refuses necessary 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 shall encourage the youth to comply with medical advice. The provider shall immediately notify and request assistance from the youth's parent(s)/guardian and the supervising Regional Office.

The provider may consent to medical treatment for the youth and the youth may refuse medical treatment.

7.3 Suicide Prevention/Precaution

The program shall develop and implement a written plan to safely assess and protect youth who have been identified as at risk of suicide.

A. The program shall develop and implement a written suicide plan that includes procedures for the initial identification and ongoing assessment of suicide risk, as well as precautions.

B. The plan shall detail levels of appropriate supervision/observation used by the program to monitor the youth until trained mental health professional help is obtained.

C. The plan shall outline protocols 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 Use of Pharmaceutical Products

The contractor shall have written policies and procedures governing the use and administration of medication to youth. Policies should conform to all applicable laws and regulations.

7.5 Notification of Serious Illness, Severe Bodily Injury, or Severe Psychiatric Episode

The provider shall report incidents of severe bodily injury and PREA related incidents to the supervising region.

Incidents of serious illness and severe psychiatric episodes shall immediately be reported to the youth's parents/guardians and the supervising regional office and placing Region (if different).

7.6 Notification of Death (Youth in YS/OJJ Custody)

In the event of the death of a youth who is in YS/OJJ custody, the Facility Director shall immediately notify the youth's parent/guardian, the supervising regional office and placing region (if different) as provided in YS/OJJ Policy No. C.5.2, and the local coroner.

In the event of a sudden death or if death occurs as a result of a crime or accident, the appropriate law enforcement agency shall be contacted immediately by the facility in addition to the reporting requirements as outlined in YS/OJJ Policy No. C.5.2.

Pursuant to La. R.S. 13:5713, it is the responsibility of the parish coroner to either view the body or conduct an investigation into the cause and manner of death in all cases involving the death of a youth while in the custody of YS/OJJ, in accordance with YS/OJJ Policy No. C.1.1 "Death of Youth in Custody, Autopsies, and Burial Expenses".

Pursuant to La. R.S. 13:5712, deaths at YS/OJJ facilities which are suspicious, unexpected or unusual shall be reported to the coroner in accordance with YS/OJJ Policy No. C.1.1.

Certain burial expenses for indigent families may be paid by YS/OJJ.

SECTION 8: CONTRACT MONITORING / QUALITY IMPROVEMENT

8.1 Contract Performance 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.

Intensive Residential Programs will be monitored in accordance with assigned level of risk. Intensive residential programs are considered high risk and receive monthly monitoring.

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

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, either intentionally or through negligence. These sanctions are imposed by the YS/OJJ Deputy Secretary and General Counsel and shall not exceed three percent (3%) of the gross monthly billing. One sanction may be levied on 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 the Office of Juvenile Justice. Sanctions may include, but are not limited to:

A. Reducing the number of youth assigned to the facility;
B. Monetary sanctions (reduction of monthly payment);
C. Moratorium on placements; and/or
D. Termination of contract.

8.3 Correctional Program Checklist (CPC)

The Office of Juvenile Justice evaluates programs using the Evidence-Based CPC which is designed to assess correctional treatment programs.

The Evidence-Based Correctional Program Checklist (CPC) is a tool developed by the University of Cincinnati Corrections Institute (UCCI) for assessing correctional intervention programs. The CPC is designed to evaluate the extent to which correctional intervention programs adhere to evidence-based practices (EBP) including the principles of effective interventions. Data from four studies conducted by UCCI on both adult and youth programs were used to develop and validate the CPC indicators. These studies produced strong correlations between outcome (i.e., recidivism) and individual items, domains, areas, and overall score. Two additional studies have confirmed that CPC scores are correlated with recidivism and a large body of research exists that supports the indicators on the CPC.

The CPC is divided into two basic areas: capacity and content. Capacity measures whether a correctional program has the capability to deliver evidence-based interventions and services for justice involve participants. There are three domains in the capacity area

including: Program Leadership and Development, Staff Characteristics, and Quality Assurance. The content area includes the Offender Assessment and Treatment Characteristics domains. This area focuses on the extent to which the program meets certain elements of the principles of effective interventions. The CPC is comprised of a total of 73 indicators, worth up to 79 possible points. Each domain, each area, and the overall score are tallied and rated as either Very High Adherence to EBP (65% to 100%); High Adherence to EBP (55% to 64%); Moderate Adherence to EBP (46% to 54%); or Low Adherence to EBP (45% or less). It should be noted that not all of the five domains are given equal weight, and some items may be considered "not applicable" in the evaluation process.

The CPC assessment process requires a site visit to collect various program traces. These include, but are not limited to: interviews with executive staff (e.g., program director and clinical supervisor), direct service delivery staff, and key program staff; interviews with program participants; observation of direct services; and review of relevant program materials (e.g., participant files, program policies and procedures, treatment curricula, handbooks, etc.). Once the information is gathered and reviewed, assessors score the tool. When the program has met a CPC indicator, it is considered an area of strength for the program. When the program has not met an indicator, it is viewed as an area in need of improvement. For each area in need of improvement, the assessors craft a practical recommendation to help the program develop a plan to better align with current research.

All of the assessment results are compiled into a report where program scores are also compared to the average scores across all programs that have been assessed with the CPC. The report is first issued in draft form and feedback from the program is sought. Once feedback from the program is received and considered, a final report is submitted.

Intensive residential programs are expected attain a minimum evaluative rating of High Adherence to EBP.

More information about the CPC can be found here:
https://www.uc.edu/content/dam/uc/gencounsel/docs/CPC%20Training%20MOU%2011.12.14.pdf

8.3.1 Correctional Program Checklist (CPC) Provider Response

Once the final CPC report is issued, the program shall create action steps to address the *Areas Needing Improvement* identified in the CPC Action Plan. The completed CPC Action Plan shall be submitted to OJJ within 30 days of receipt of the final CPC report.

Within six (6) months of receipt of the CPC Action Plan, CPC evaluators will contact the facility to monitor the program's implementation of the action steps.

SECTION 9: REPORTING

9.1 Monthly Report

The contractor shall submit a monthly report by the tenth (10th) 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

The contractor 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 15th 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; and
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.

9.4 Data Collection

All intensive residential treatment programs are expected to maintain current data on all youth. It is the responsibility of the contractor to develop a data collection system to meet this requirement. This shall include, but not be limited to:

A. Number of furloughs requested
B. Number of furloughs approved
C. Level at which furlough was stopped
D. Number of furloughs successfully completed
E. Number of family visits
F. Number of youth completing GED/ACT
G. Educational progress of youth
H. Percentage of youth successfully completing treatment goals
I. Number of youth enrolled in vocational programs
J. Number of early release requests
K. Number of early releases granted
L. Number of youth returned to their homes
M. Number of youth placed in OCS custody
N. Number of youth placed in foster care
O. Number of youth who obtain jobs upon release
P. 3 month follow up
Q. 6 month follow up
R. 12 month follow up

SECTION 10: DEFINITIONS

For the purposes of this document the following words are herein defined as follows:

ADMINISTRATIVE FURLOUGH REVIEW COMMITTEE (AFRC) - The multidisciplinary committee responsible for determining furlough eligibility.

ASSESSMENT - The process of gathering the necessary social, legal, behavioral, medical, educational, social service screening documents, SAVRY summary Risk Rating, and other information about the youth to indicate the appropriate level of care and custody and to determine the appropriate treatment plan for the youth during her commitment.

ASSIGNMENT - The process of placing a youth in a non-secure or YS secure care facility that is determined to be the most appropriate to meet the identified needs of the youth.

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

BEST PRACTICE - Practices that have demonstrated over time, the ability to produce positive outcomes.

CENTRAL OFFICE - For the purposes of this SOP, Central Office is the office of the Deputy Secretary and staff located at 7919 Independence Boulevard, State Police Building 1st Floor, Baton Rouge, Louisiana 70806.

CHEMICAL AGENT - Any product which is dispensed by means of an aerosol spray to control an individual's combative and/or resistive behavior.

CLINICAL SUPERVISION - An interactional professional relationship between a licensed clinical social worker and licensed master's social worker that provides evaluation and direction over the supervisee's practice of clinical social work and promotes continued development of the licensed social worker's knowledge, skills and abilities to engage in the practice of clinical social work in an ethical and competent manner.

CODE OF CONDUCT - Code of conduct is a youth disciplinary system in place to address inappropriate/problematic adolescent behaviors through an informal resolution process, and to address violations formally through a written report and due process in order to preserve structure and order in the facilities

CONSIDERATION FOR RECOMMENDATION OF MODIFICATION (CRM) - A form [Attachment B.2.1 (a)] used by YS/OJJ secure care facility case managers to document recommendations for modification of disposition.

CONTRABAND - Items possessed by youth, staff, or visitors, or found within the facility that are illegal or expressly prohibited by the contractor including those items listed under R.S. 14:402.

CONTRACTOR - An individual or organization providing services to YS/OJJ through a duly executed contractual agreement. The terms “facility”, “provider” and “program” may also refer to “contractor”.

CUSTODY SECURE DELINQUENT (CSD) TIME - The length of time expressed in years, months, and/or days remaining on all open dispositions with a JETS case type of CSD.

DEPUTY SECRETARY – Lead administrator of the Office of Juvenile Justice appointed by the Governor of the State of Louisiana.

DEVELOPTMENTALLY DISABLED / INTELLECTUALLY DISABLED (DD/ID) – *(formally referred to as MR)* - Refers to significant sub-average intellectual functioning with an Intelligence Quotient (IQ) of 68 or below with concurrent deficits or impairments in present adaptive functioning in at least two of the following areas: communication; self-care; home living; social/interpersonal skills; use of community resources; self-direction; functional academic skills; work; leisure; health and safety; with onset before age 18.

DISCHARGE – The termination either by a court order or expiration of a court order of YS/OJJ legal responsibility for a youth.

DISPOSITION (also known as Judgment of Disposition) - The written order of the court, following adjudication, which assigns custody/supervision and the terms thereof.

DRUG-FREE WORK PLACE POLICY - A policy which prohibits drug use by staff and volunteers and mandates drug screening after certain incidents.

ESCORTED ABSENCE - A temporary absence authorized by the Program Director in which youth are escorted outside the secure perimeter by qualified employees for a therapeutic purpose.

EVIDENCE-BASED INTERVENTION/PRACTICE - An intervention/practice which incorporates the principles that research shows to be effective in reducing juvenile crime and recidivism.

FACILITY COORDINATOR - The Program Specialist assigned by the regional office to supervise the female secure residential program.

FACILITY LOG - The official record book of a program which documents daily required information and important events that occur at the facility. These Facility Log Books should be bound books with numbered pages.

FULL-TERM DATE - The date which a youth can no longer be legally held in the custody or under the supervision of YS/OJJ.

FURLOUGH - The authorized temporary release of a qualified youth from the grounds of an intensive residential treatment facility without the supervision of facility staff for the purposes of aiding in the youth’s rehabilitation, maintaining and/or enhancing family and

community relations, and preparing the youth to make a satisfactory transition into society after her release.

GRIEVANCE – A formal process known as the "Administrative Remedy Procedure" through which a youth may seek resolution of complaints regarding his safety in a YS/OJJ secure care facility.

HOUSING SEARCHES - Announced/unannounced searches of a youth's living area designed to uncover contraband and/or unauthorized or stolen items, maximize sanitary standards, and prevent fire and safety hazards.

INDIGENT YOUTH - A youth in the custody of or under the supervision of YS/OJJ who has little or no money.

INDIVIDUAL COUNSELING - One-on-one direct therapeutic intervention by the service provider with a youth addressing core need areas identified in the Service/Reintegration Plan or other problem area.

INTENSIVE RESIDENTIAL TREATMENT PROGRAM (IRT) - A structured behavioral treatment program which serves adolescent females who are adjudicated delinquent and placed into a secure program in a professionally staffed residential environment 24 hours per day. The purpose of the residential service is to provide a safe and restrictive environment for those youth requiring secure residential services and to provide them with the skills necessary to reenter society and function as productive citizens.

INDIVIDUAL TREATMENT PLAN / INDIVIDUAL INTERVENTION PLAN (IIP/ITP) – A written plan developed by the program to address the identified needs of a youth. The ITP/IIP outlines the goals, objectives, interventions and timelines that the provider will utilize to measure a youth's progress through the treatment program. The dynamic need areas addressed in the ITP/IIP will be identified through a variety of sources, including but not limited to SAVRY assessments/reassessments, psychological evaluations and testing conducted by the program.

LEVEL I INCIDENT - An incident of a very serious nature that requires immediate reporting.

LEVEL II INCIDENT - An incident of a serious nature that requires reporting within 24 hours (excluding weekends and holidays).

MECHANICAL RESTRAINTS - Handcuffs or wristlets, chains or anklets, or any other approved or authorized device used to limit the movement of a youth.

MODERATE / LOW RISK - That risk level at which a youth is eligible to be considered/recommended for modification when other factors are met.

MODIFICATION OF DISPOSITION - The process by which the court modifies a previous disposition to include changing the youth's legal custody, suspending all or part of any order of commitment, eliminating conditions of probation, or adding any further conditions authorized by the La. Children's Code Articles 897 (B) and 899 (B). A Modification of Disposition order may also terminate an Order of Disposition at any time while the Order is still in force.

MONITOR - A YS/OJJ employee assigned to review program effectiveness, compliance with contract provisions, and accepted standards and public policy or state law.

MULTIDISCIPLINARY TREATMENT TEAM (MDT) - A group of individuals from diverse disciplines who provide comprehensive assessment and consultation and assist in identifying the goals of the ITP/IIP. The MDT staffing shall include the program staff and/or community providers, educators, PPO/J and the Regional Manager.

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

OUTCOMES - The results of the impact and effectiveness of a service, process or program on the client; must be measurable and observable.

OJJ - Office of Juvenile Justice.

PAT-DOWN SEARCH - A running of the hands over a fully-clothed person, conducted by a member of the same sex, for the purpose of discovering contraband.

PERFORMANCE - To function in accordance with the requirements of the contract.

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/security).

PHYSICAL INTERVENTION - A use of force which involves the application of approved techniques or restraints by a staff member to physically restrain a youth whose behavior is out of control, presenting an unsafe situation.

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

PLACING OFFICER - The probation officer from the region of origin.

PLACING REGION - The YS/OJJ Region from which a placement originates (region of origin).

PPO/J - Includes CBS probation officers (Probation and Parole Officer 1, 2 and 3/Juvenile).

PREA - An Act signed into law in September 2003. This legislation requires the Bureau of Justice Statistics (BJS) 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 / FACILITY DIRECTOR – The individual responsible for the overall management of the intensive residential treatment program.

PROGRAMMATIC COMPLIANCE – Documentation of approved activities/services leading to achievement of outcomes in conformance to the provisions required by the contract.

PROVIDER – An individual or organization providing services to YS/OJJ, through a duly executed contractual agreement; the terms "facility" and “program" are also used to mean provider.

REASSIGNMENT - The authorized move of a custody youth from one facility or program to another. Also, custody youth may be reassigned into the community under supervision while still in the legal custody of YS.

REGION - An organizational subdivision of YS/OJJ.

REGIONAL DUTY OFFICER - All professional level regional office personnel responsible for reporting serious incidents as described herein to the appropriate Regional Director. The regional duty officer may be the Regional Manager/designee.

REGIONAL MANAGER - Lead administrator of the YS/OJJ field offices located throughout the state.

RELEASE - The process by which a court order removes a youth from YS/OJJ custody, allowing her return to the community.

RELEASING AUTHORITY - The court of jurisdiction per La. Children’s Code Article 909.

REPORTABLE INJURY - Any injury that threatens a youth’s life or limb, or that requires urgent treatment by a doctor, or severely restricts the youth’s usual activities, or requires follow-up by a doctor.

RUNAWAY - Leaving the facility grounds or the custody of facility staff when off grounds without staff approval.

SELF-MODIFYING ORDER - An order or disposition which modifies itself, if conditions specified in the order are carried out or met, without any additional action by the court.

STRIP SEARCH - A visual search of a person's nude body, conducted by two (2) employees of the same sex as the person being searched, in a private place, out of the view of persons other than those conducting the search. The person being searched shall be required to bend over, squat, turn around, raise their arms, lift the genitals, cough, and raise the breast. (The foregoing list is not exclusive.) The clothing and all property of the person being searched shall be thoroughly searched prior to returning it.

SUPERVISING OFFICER - The probation officer responsible for monitoring a placement of the youth while the youth is assigned to a particular intensive residential treatment program.

SUPERVISING REGION - YS/OJJ Region in which the Intensive Residential Treatment Program is geographically located.

TIME-OUT – Time-out for a youth directed by staff when there is a programmatic need. The use and issuance of SDTO must have the approval of the Facility Director or higher level personnel before the youth is placed in this area. SDTO cannot exceed 59 minutes. The door to the time-out room shall remain open.

TRANSITION PORTFOLIO – A portfolio of information compiled by the treatment team and provided to youth when released from a secure care facility which provides various information on job hunting, interview and placement information, rehabilitation, transportation, school, birth certificate, social security, driver's license, State ID card or driving schools, and transition concerns and contacts.

TREATMENT - Any therapeutic or rehabilitative service provided to a youth by a contractor.

UNIT HEAD - For the purposes of this policy, the Unit Head refers to the YS Facility Directors, Probation and Parole Program Director, Regional Managers, and the Deputy Secretary or designee for YS/OJJ Central Office.

UNIT REPORTING OFFICER - The appropriate facility or field personnel responsible for reporting Level I and II incidents as described herein to the assigned Duty Officer. The reporting officer may be the Director of the facility or a Regional Manager, or someone designated by either to fulfill this role.

YOUTH - A youth who is adjudicated delinquent and placed in the custody of YS/OJJ.

YOUTH SERVICES (YS) - Office of the Deputy Secretary and support staff.

SECTION 11: APPENDICE

(see SOP attachments)

DNA OFFENSE LIST

A. A violation of La. R.S. 14:34.2 through 34.5;

B. A violation of La. R.S. 14:35 through 37;

C. A violation of La. R.S. 14:37.3;

D. A violation of La. R.S. 14:38;

E. A violation of La. R.S. 14:38.2;

F. A violation of La. R.S. 14:40.2;

G. A violation of La. R.S. 14:67.16;

H. A violation of La. R.S. 14:80.1;

I. A violation of La. R.S. 14:81.4;

J. A violation of La. R.S. 14:82;

K. A violation of La. R.S. 14:83 through 83.1;

L. A violation of La. R.S. 14:83.3 through 83.4;

M. A violation of La. R.S. 14:85;

N. A violation of La. R.S. 14:92;

O. A violation of La. R.S. 107.2;

P. A violation of La. R.S. 14:284; or

Q. A violation of La. R.S. 14:329.2.

YOUTH RIGHTS AND RESPONSIBILITIES

Youth Rights

You will have your own program, called an Individualized Service/Treatment Plan. This plan is basically to help you learn ways to take care of yourself and your personal belongings and to get along with other people.

You and your parent(s) or guardian may see the case record that we keep on you. Before anything in your record can be given to you or your parent(s) or guardian, we will obtain written permission from you and your parent(s), guardian, or legal custodian.

You can know about your health condition unless the doctor asks in writing that you not be told. You may take part in plans for your medical treatment and, if you are 18 years old or older, you may refuse recommended treatment.

You will be free of physical restraint so long as you are not in danger of hurting yourself or others. Then you will be held safely and for only as long as you are upset.

Mechanical restraints that restrict movement may only be used by the program if it has prior approval of the Agency.

If you are given medicine, it shall be only after a doctor or nurse approves it and only under the circumstances they define. Medicine must not be given to you to punish you.

You will be served three nutritiously balanced meals a day. You cannot be denied a meal as punishment.

You will be treated with respect by staff even when you are being disciplined or corrected. You will not be cursed or called names.

You will be allowed to have visitors at reasonable times--that is, at times when you are not expected to be sleeping, eating, or doing activities that are in your program.

You may receive and send mail without it being read by anyone but you, except in circumstances that the program director determines are a risk to the safety and security of the program. Mail will routinely be inspected for contraband in your presence.

You may use the telephone at reasonable times. You may visit your friends and family as outlined in your program.

You may manage your own money and know the amount in your account each month. You may help in deciding what you can or should buy and how much you should spend.

You will be required only to do the work outlined in your program and to share duties such as keeping your room neat and helping with kitchen chores.

You may belong to clubs and go to church unless the person in charge of your program believes that something bad could happen to you there.

If you feel that you have not been treated fairly, you should notify your case manager about it. If you feel that any of your rights might have been violated, you can file a grievance.

If you are 18 years old or older, you have the right to register and vote.

Youth Responsibilities

You are expected to follow the rules, procedures, schedules and directives of staff while at this provider.

It is your responsibility to see that your behavior and language do not discriminate or show prejudice against other persons.

You are responsible for helping to clean and maintain your living quarters.

You must ask for medical and dental care when you feel you need it.

You are to conduct yourself properly during visits and community outings and activities.

You must not accept or bring into or take out of the provider items that are illegal or not allowed by this provider.

You must not violate the law through the mail.

You must keep yourself clean and odor free.

You must follow grievance procedures in making any complaint. If any action is taken against you by staff or other youth because of the complaint, you should report it to the provider supervisor.

You must use appeal procedures when you feel any disciplinary action has been taken against you.

I hereby acknowledge that these Rights and Responsibilities have been explained to me by

_____.

_____	_____
Resident	Date
_____	_____
Parent/Guardian, if appropriate	Date
_____	_____
Program Director	Date

GROUP COUNSELING ASSESSMENT FORM

Date:_____

Youth: _____

Facilitator(s):_____

Group: _____

Session: 1 2 3 4 56 7 8 9 10 11 12

Home: _____

Topic: _____

Level of Participation this session:

___Stayed on subject/topic of conversation.
___Provided others with useful feedback.
___Active participation, constructive comments.
___Seemed to listen, but little participation.
___Seemed to listen, but no participation.
___Inattentive, seemed disinterested.
___Disruptive-silly, inappropriate, hostile, changing subject. (Circle one)
___ Completion of assignments
___Other
(Describe):_____
_____
_____

Interaction with Others:

___Generally positive
___Supportive
___Listens
___Indifferent
___Joking
___Makes fun of
___Sarcastic
___Argues
___Hostile
___ Other

Awareness or insight into situation:

___Can verbalize well regarding problem.
___Accepts some responsibility
___Denies responsibility.
___Blames others, situations, bad luck, etc.
___Seems to have a lot of incorrect information regarding _____
___Seems to have little or no information regarding: _____

Other Comments/ Assessment:

_____
_____
_____
_____

SUBMIT TO:

Louisiana State Police
Bureau of Criminal Identification and Information
P.O. Box 66614 (Mail Slip A-6)
Baton Rouge, LA 70896

THE FEE FOR PROCESSING A STATE BACKGROUND CHECK IS $26. FOR FBI PROCESSING, WHERE AUTHORIZED OR REQUIRED, THERE IS AN ADDITIONAL $13.25 FEE.

Acceptable forms of payment include: Cashier Check, Business Check with pre-printed business name or Money Order
Credit Card payments are accepted when paying in person at Louisiana State Police Headquarters

****FORMS MUST BE FILLED OUT IN INK AND BE REVIEWED BY SUBMITTING AGENCY/INDIVIDUAL FOR ACCURACY****
******FINGERPRINTS ARE NECESSARY FOR A POSITIVE IDENTIFICATION******

******PLEASE PRINT******

AGENCY, FACILITY OR INDIVIDUAL

AGENCY, FACILITY AUTHORIZED REPRESENTATIVE OR INDIVIDUAL

MAILING ADDRESS

SIGNATURE OF AUTHORIZED REPRESENTATIVE/INDIVIDUAL

CITY STATE ZIP CODE

( )
AGENCY, FACILITY OR INDIVIDUAL PHONE NUMBER

AGENCY OR FACILITY E-MAIL ADDRESS

Request For: (pick one only)

- ☐ ALCOHOL BEVERAGE OUTLET
- ☐ BEHAVIOR ANALYST BOARD
- ☐ BOARD OF EXAMINERS (PSYCHOLOGIST)
- ☐ BOARD OF EXAMINERS (SPEECH/LANGUAGE PATH. & AUDIO.)
- ☐ BOARD OF NURSING HOME ADMINISTRATORS
- ☐ CASA
- ☐ COURT ORDER ADOPTION
- ☐ CRIMINAL JUSTICE EMPLOYEE
- ☐ DAYCARE / WORKING WITH CHILDREN
- ☐ DENTISTRY BOARD
- ☐ DEPT. OF AGRICULTURE AND FORESTRY
- ☐ DEPT. HEALTH AND HOSPITALS
- ☐ DEPT. OF INSURANCE – FRAUD DIVISION
- ☐ DEPT. OF REVENUE (Public Registry of Motion Picture Investor Tax Credit)
- ☐ DCFS ABUSE/NEGLECT INVESTIGATION
- ☐ DCFS CARETAKER
- ☐ DCFS FOSTER/ADOPTIVE
- ☐ DCFS PERSONNEL
- ☐ DRUG AND DEVICE DISTRIBUTORS
- ☐ EMPLOYERS
- ☐ FIREFIGHTERS
- ☐ FIRE MARSHAL
- ☐ GESTATIONAL CONTRACTS
- ☐ HEALTH CARE PROVIDER (Non Licensed)
- ☐ JUVENILE DETENTION CENTER
- ☐ LA BOARD CHIROPRACTIC EXAMINERS
- ☐ LA PHYSICAL THERAPY BOARD
- ☐ LA STATE BOARD SOCIAL WORK EXAMINERS
- ☐ LICENSED PROFESSIONAL COUNSELORS
- ☐ MEDICAL EXAMINERS
- ☐ OFFICE OF FINANCIAL INSTITUTIONS
- ☐ OMVC – COMMERCIAL DRIVING EXAM ADMINISTER
- ☐ OMVE – EMPLOYEE ISSUING COMMERCIAL DL
- ☐ OMVI – CONTRACT PROCESS INQUIRY/TRANSACTION
- ☐ OMVT – AUTO TITLE COMPANY / PUBLIC TAG AGENT
- ☐ PHARMACY BOARD
- ☐ POST SECONDARY EDUCATION
- ☐ PRACTICAL NURSING
- ☐ PRIVATE ADOPTION
- ☐ PRIVATE INVESTIGATORS
- ☐ PRIVATE SECURITY
- ☐ PUBLIC HOUSING
- ☐ REGISTERED NURSING
- ☐ RELIGIOUS ACTIVISTS
- ☐ SCHOOL
- ☐ SUPREME COURT COMMITTEE BAR ADMISSION
- ☐ TAXI DRIVERS
- ☐ TESS WINDOW TINT
- ☐ VOLUNTEER LOUISIANA COMMISSION
- ☐ WILDLIFE AND FISHERIES
- ☐ WORKING WITH CHILDREN

APPLICANTS FULL NAME: _____
****PRINT – USE INK**** LAST FIRST MIDDLE
{INCLUDE MAIDEN NAME & PREVIOUS MARRIED NAMES IF APPLICABLE}

APPLICANTS SIGNATURE: _____

APPLICANTS SOCIAL SECURITY # ___-__-____ DATE OF BIRTH: __/__/__

ID or DRIVERS LICENSE #_____ & STATE _____ RACE ___ SEX ___

POSITION OR LICENSE APPLIED FOR _____

AUTHORIZATION TO DISCLOSE CRIMINAL HISTORY RECORDS INFORMATION

By my signature above, I hereby authorize the Louisiana State Police to release all pertinent criminal record information maintained in their files, other states files, or the FBI files (if applicable) which may confirm or deny my eligibility with the facility or agency named above. Pursuant to Title 28, C.F.R., Section 16.34, officials making the determination of suitability for licensing or employment shall provide the opportunity to complete, or challenge the accuracy of, the information contained in the FBI identification record.

SCR-1 LIC
Rev. 01/13
06/11 Issue Obsolete

STATE OF LOUISIANA
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
STATE CENTRAL REGISTRY DISCLOSURE FORM

This form must be completed by each individual owner, operator, administrator, current or prospective employee or volunteer of a child care facility or juvenile detention facility licensed by the Louisiana Department of Children and Family Services for themselves. Any owner, operator, administrator, current or prospective employee, or volunteer of a child care facility or juvenile detention facility licensed by the department who knowingly falsifies the information on the State Central Registry Disclosure Form shall be guilty of a misdemeanor offense and shall be fined not more than five hundred dollars, or imprisoned for not more than six months, or both. R.S. 46:1414.1.C or R.S. 15:1110.2(C).

This form shall be maintained by the owner/operator of the licensed facility in accordance with current licensing standards as mandated by R.S. 46:1414.1.B or R.S. 15:1110.2(B).

Name of Licensed Facility (Print or Type)

Physical Address of Licensed Facility | License #

Name of Individual/Applicant (Print or Type) | Date of Birth | Social Security #

Maiden, Previous or Any Other Name Used | Race | Sex

Current Street Address | City and State | Zip Code

Most Recent Previous Address | City and State | Zip Code

( ) - | ( ) - | ( ) -
Current Home Phone # | Current Cell Phone # | Work Phone #

My name ☐ is ☐ is not (check one) currently recorded as a perpetrator on the State Central Registry for what the Department of Children and Family Services (DCFS) has determined to be a justified (valid) finding of child abuse or neglect.

I ☐ have ☐ have not been determined to have a justified (valid) finding of abuse or neglect since the Risk Evaluation Panel finding.

If the DCFS Licensing Section has reasonable suspicion or is provided with facts or information that your name is on the State Central Registry as a perpetrator with a valid/justified finding of abuse and/or neglect, the Licensing Section may request a clearance of the SCR without your permission. If your name does in fact appear on the SCR as described above, the department will notify both your employer (the facility named above) and the appropriate District Attorney's office of your failure to comply with R.S. 46:1414.1 or R.S. 15:1110.2.

The information given is true and complete to the best of my knowledge.

Signature | Date

Signature of Licensed Facility Representative | Date

QUARTERLY PERSONAL FUNDS BALANCE

Pre-numbered

Youth	Date of Admission	Date of Discharge	Balance

YOUTH WITHDRAWAL REQUEST

Pre-numbered

NAME:_____DATE:_____

AMOUNT OF WITHDRAWAL: $_____

PURPOSE OF WITHDRAWAL:

_____

_____

SIGNATURES:

_____
Youth

_____
Staff Member

Confidential
Department of Children and Family Services/Child Welfare
Written Report Form for Mandated Reporters of Child Abuse/Neglect

I understand that I am making a report of child abuse and/or neglect in good faith and in accordance with the Louisiana Children's Code, Article 610 D. which requires me, as a mandated reporter, to send a written report to the Department of Children and Family Services (DCFS) or law enforcement within five days of having made an initial oral report. I understand that I may report suspected abuse and/or neglect in writing instead of an oral report.

Use: This form is available for you to use to make a written report of child abuse and/or neglect to DCFS or law enforcement. If you are unable to print out the form, contact any DCFS parish or regional office and one will be sent to you.

Completion: Complete each item with information known by you that may be pertinent to the suspected abuse/neglect. **If there are items for which you have no information, please complete with "Unknown". It is not necessary for you to try and get all information requested.** If you need more space, please add a page. Once completed, it may be printed out and mailed or faxed to the DCFS office for the parish where the child lives or where you made the report. The local offices, addresses and fax numbers are on this web site (www.dcfs.la.gov.). If you have not yet made a report to DCFS, please fax this form as soon as possible. **Thank you for your interest and commitment to the safety and well being of children.**

This Written Report is: ☐ Initial Written Report to DCFS ☐ Report to Law Enforcement
☐ Follow-up to oral report to DCFS on: (Date) _____ to (Parish) _____
DCFS Office

Is there any danger to a worker? ☐ None known ☐ Yes, Explain _____

Suspected Child Victim(s):

1. Name: _____ DOB/Age: _____ Race: _____ Sex: _____
2. Name: _____ DOB/Age: _____ Race: _____ Sex: _____
3. Name: _____ DOB/Age: _____ Race: _____ Sex: _____

Home Address: _____ Telephone: _____

Parents/Caretakers Names: _____

Others in Home: (Children & Adults if known)
_____ Age: _____ Race: _____ Sex: _____
_____ Age: _____ Race: _____ Sex: _____
_____ Age: _____ Race: _____ Sex: _____
_____ Age: _____ Race: _____ Sex: _____

Suspected Perpetrator(s): _____ Relationship to Child: _____
Suspected Perpetrator(s): _____ Relationship to Child: _____

Suspected Perpetrator's Address: _____

Nature, extent and cause of each child's injuries, neglect or endangered condition, including any previous known or suspected abuse to this child or the child's siblings: _____

DCFS/CW Form CPI-2
Reissued: 01/12 Replacing: 6/08

Suspected Child Victim's Name (from Page 1): _____

What is current circumstance/condition of the child victim and are they currently in danger of serious injury or harm? Why? _____

Identity of any child or adult who gave any explanation of the child's injury or condition, along with the date and details of the explanation: _____

How and when did this child(ren) victim come to your attention? _____

What services and/or referrals have been provided to the child/family by you or your agency/facility? _____

Have you previously reported abuse/neglect on this child or any of his siblings? ☐ No ☐ Yes
If yes, please give number of times, approximate dates, persons reported, office to which reported and outcome, if known:

_____

What is going well for the family; areas of parenting they handle adequately; and, was there a time when they adequately cared for or protected the child(ren), if known? _____

Other Pertinent Information (other persons with information about the family and way to contact)

_____

Reporter's Printed Name: _____ Phone # to Contact: _____

Signature: _____ Date: _____ Best Contact Time: _____

Position/Type of Reporter: _____ Agency/Provider: _____

Reporter's Address: _____

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Title 28
EDUCATION
Part XCVII. Bulletin 1530—Louisiana's IEP Handbook for Students with Exceptionalities

Chapter 1. Individualized Education Program (IEP)

§101. Introduction

A. *Louisiana's IEP Handbook for Students with Exceptionalities* outlines the legal procedures of the IEP process as mandated by the *Individuals with Disabilities Education Act* (IDEA) and Revised Statute 17:1941, et seq., and their regulations. The handbook provides information regarding the Individualized Education Program (IEP)—the basis for educational programming for students with exceptionalities in Louisiana. *Bulletin 1872, Extended School Year Program Handbook*, and *Bulletin 1891, Louisiana's IEP Handbook for Gifted/Talented Students*, have been repealed, and information from the bulletins has been integrated into the IEP Handbook. The IEP, including the Gifted/Talented IEP and Services Plan for students parentally placed in private schools, shall be developed using a format approved by the Louisiana Department of Education (LDE).

B. The term *exceptionalities* used in this document includes all disabilities identified under IDEA, including gifted and/or talented as defined in state law.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2331 (November 2009).

§103. Free Appropriate Public Education (FAPE)

A. A student is initially determined to have an exceptionality through the full and individual initial evaluation process. The responsibility for making a formal commitment of resources to ensure a free appropriate public education (FAPE) for a student identified as exceptional rests with the local education agency (LEA) in which the student resides.

B.1. The LEA is responsible for initiating the assurance of FAPE regardless of whether the LEA will:

a. provide all of the service directly or through interagency agreements; or

b. place the student in another LEA or in a private school facility; or

c. refer the student to another LEA for educational purposes.

2. This does not apply to students who are parentally placed in private schools.

C. The LEA is required to offer FAPE to those students with disabilities ages 3 through 21 years.

1. The child is eligible for FAPE on his 3rd birthday.

2. The responsibility for providing services to a student identified as exceptional continues until:

a. the student receives a state diploma; or

b. the student reaches his or her 22nd birthday. When the 22nd birthday occurs during the course of the regular school session, and all action steps in the transition plan have not been completed, the student should be allowed to remain in school for the remainder of the school year.

D. The LEA is not responsible for providing FAPE when, after carefully documenting that the agency has offered FAPE via an IEP, the parents choose to voluntarily enroll the student elsewhere or indicate their refusal of special educational services. Documentation of these parental decisions should be kept on file.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2332 (November 2009).

§105. Timelines

A. An initial evaluation is considered "completed" when the written report has been disseminated by the pupil appraisal staff to the administrator of special education programs. A LEA has a maximum of 30 calendar days to complete the IEP/placement document for an eligible student. During this time, two activities shall take place and be documented.

1. Written Notice. Written notice that the LEA proposes to provide FAPE through the IEP process shall be given to the parents.

a. The notice shall be provided in the parents' native language or shall be given using other means of communication, whenever necessary, to ensure parental understanding.

b. The notice shall indicate the purpose, time, and location of the IEP Team meeting; who will be in attendance; when a LEA IEP Team member needs to be excused from attending the meeting; the parents' right to take other participants to the meeting; the student's right to participate (when appropriate); and the name of the person in the LEA the parents can contact when they have questions or concerns.

c. The notice shall explain the procedural safeguards available to the parents; that they can negotiate the time and place of the IEP Team meeting; that they have the right to full and meaningful participation in the IEP decision-making process, know their consent is required before initial placement will be made and that all information about the student shall be kept confidential.

d. When it appears that a student with a disability may be eligible to participate in one of the alternate assessments, the notice shall explain that data appear to support the student's participation in alternate assessment, and that the decision for participation will be made with the parents at the IEP Team meeting.

e. Additionally, when the LEA has not already done so, the parents shall be informed of their right to an oral explanation of the evaluation report and of their right to an independent education evaluation (IEE) when the parents disagree with the current evaluation.

f. In the case of a child who was previously served under Part C, an invitation to the initial IEP Team meeting, at the request of the parent, will be sent to the Part C service coordinator or other representative of the Part C system to assist with the smooth transition of services. This only pertains to students with disabilities.

2. An IEP Team meeting that result in a completed IEP/placement document shall be held. This meeting should be a vehicle for communication between parents and school personnel to share formal and informal information about the student's needs, educational projections, and services that will be provided to meet the student's needs. The completed IEP/placement document is a formal record of the IEP Team's decisions. The timeline for completion of the document is intended to ensure that there is no undue delay in providing a free appropriate public education (FAPE) for the student. The IEP form is considered official when the parent and the Official Designated Representative (ODR) sign the document.

a. The IEP Team should consider parental correspondence to the school regarding the student's learning environment, any notes from previous parental conferences, and any data gathered during the screening and evaluation period in the development of the IEP.

b. Implementation of the IEP means that the student begins participating in special education and related services as written on the IEP/placement document. A LEA shall begin providing services as stated on the IEP as soon as possible but no later than ten (10) school days. The date of initiation of services shall be noted on the IEP.

c. Students who have been receiving special education in one LEA in Louisiana who transfer to another LEA within Louisiana shall be enrolled in the appropriate special education program in the receiving LEA with the current IEP or the development of a review IEP within five school days of the transfer.

B. Additional Notes about Timelines

1. Summer Recess. When an initial evaluation report has been completed within the 30 days prior to the summer recess or during the recess, the LEA may request, through written documentation, parental approval to delay the initial IEP Team meeting until the first week of the next school session. However, when the parents wish to meet during the summer recess, the LEA shall ensure that the appropriate IEP Team members are present.

2. Children with Disabilities Approaching Age 3

a. Children with disabilities receiving Part C services (EarlySteps) who are “turning three-years-old” suspected of being eligible for Part B services shall be referred to the LEA when the child is 2 years, 2 months through 2 years, 9 months of age. The Part C Family Service Coordinator will notify the LEA of the date for the transition meeting to determine whether the student shall be evaluated for Part B services. The LEA will begin the evaluation process to determine eligibility. When the child meets eligibility criteria according to *Bulletin 1508, Pupil Appraisal Handbook*, the IEP Team must develop and implement the IEP by the child's third birthday.

b. If the child's birthday occurs during the summer months, the child's IEP team will determine the date when services will begin. Services shall begin no later than the start of the next school year.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2332 (November 2009), amended LR 37:885 (March 2011).

§107. IEP Team Participants

A. At any IEP Team meeting, the following participants shall be in attendance: an officially designated representative of the LEA, the student's regular education and special education teachers, the student's parents, and a person knowledgeable about the student's evaluation procedures and results. The student, as well as other individuals the parents and/or LEA may deem necessary, should be given the opportunity to attend. Documentation of attendance is required.

1. An officially designated representative (ODR) of the LEA is one who is qualified to provide or supervise the provision of specially designed instruction to meet the unique needs of students with exceptionalities, is knowledgeable about the general education curriculum, and is knowledgeable about the availability of resources of the LEA. The LEA may also designate another LEA member of the IEP Team to serve as the agency representative, when the above criteria are satisfied. A LEA shall have on file and shall disseminate within the agency a policy statement naming the kinds of persons who may act as the official representative of the LEA. Representatives may include the director/supervisor of special education, principals, instructional strategists, teachers, or any other LEA employee certified to provide or supervise special educational services. A member of the student's evaluation team may serve in this capacity. A special education teacher

may not serve as the ODR for a student's IEP when he or she is also the student's teacher.

2. Parents are equal participants in the IEP process in discussing the educational and related services needs of the student and in deciding which placement and other services are appropriate. As such, one or both of the student's parents should participate in the initial IEP/placement meeting(s). Other team members shall rely on parents to contribute their perspective of the student outside of school. Parental insight about the student's strengths and support needs, learning style, temperament, ability to work in various environments, and acquired adaptive skills is of vital importance to the team in making decisions about the student's needs and services. The concerns of the parents for enhancing the education of their child shall be documented in the IEP.

a. Parent is defined as a biological or adoptive parent of a child; a foster parent; a guardian, generally authorized to act as the child's parent or authorized to make educational decisions for the child, but not the state if the child is a ward of the state; an individual acting in the place of a biological or adoptive parent of a child (including a grandparent, stepparent, or other relative) with whom the child lives or an individual who is legally responsible for the child's welfare; or a surrogate parent who has been appointed to act in the child's behalf.

b. The LEA shall take measures to ensure that parents and all other team members, including sensorially impaired and non-English-speaking participants, can understand and actively participate in discussions and decision-making. These measures (i.e., having an interpreter or translator) should be documented. LEAs shall further ensure that, for those parents who cannot physically attend the IEP Team meetings, every effort is made to secure parental participation.

c. However, if every documented attempt fails and the IEP/placement document is developed without parental participation, the parents still shall give written informed consent for initial placement before any special education or related services may begin.

i. When conducting IEP Team/placement meetings, the parents of a student with an exceptionality and the LEA may agree to use alternative means of meeting participation such as videoconferences and conference calls.

ii. Visits may be made to the parents' home or place of employment to receive parental suggestions.

iii. Electronic mail. A parent of a student with an exceptionality may elect to receive notices/communication by electronic mail communication, if the LEA makes that option available. Documentation of these communiqués should be kept in the student's IEP folder.

d. When a student with an exceptionality has a legal guardian or has been assigned a surrogate parent by the LEA, that person assumes the role of the parent during the IEP process in matters dealing with special educational services. When a student with an exceptionality is emancipated, parental participation is not mandated. Additionally, when the LEA has been informed that a parent is legally prohibited from reviewing a student's records, that parent may not attend the IEP Team meetings without permission of the legal guardian.

e. Beginning at least one year before the student reaches the age of majority, by the student's seventeenth birthday; the parents will be informed that the rights under Part B of the Act will transfer to the student, unless the student is determined incompetent under state law.

3. An evaluation representative is a required participant at an initial IEP Team meeting. The person may be a member of the pupil appraisal team that performed the evaluation or any person knowledgeable about and able to interpret the evaluation data for that particular student. The evaluation coordinator who coordinated the activities for the reevaluation shall be present at the next scheduled IEP Team meeting when there is a change in classification, or initiation of additional services, or more restrictive environment is proposed for the student. For gifted and/or talented reevaluations, the gifted or talented teacher may serve as the evaluation coordinator.

4. A regular education teacher is at least one of the student's regular teachers (when the student is, or may be, participating in the regular education environment). The teacher must, to the extent appropriate, participate in the development, review, and revision of the student's IEP, including the determination of accommodations, appropriate positive behavioral interventions, supports and other strategies, the determination of supplementary aids and services, program modifications, and supports for school personnel that will be provided for the student.

5. A special education teacher is at least one of the student's special education teachers, or when appropriate, at least one special education provider of the student.

a. When a student's only disability is speech or language impairment, then the speech/language pathologist is considered the special education provider.

6. The student should be given the opportunity to participate in the development of the IEP. In many cases, the student will share responsibility for goals and objectives.

a. The LEA shall invite a student with a disability at any age to attend his or her IEP Team meeting if the purpose of the meeting will be the consideration of postsecondary goals and the transition services needed in reaching those goals. The LEA shall invite the student and, as part of the notification to the parents of the IEP Team meeting, inform the parents that the LEA will invite the student to the meeting.

b. Beginning at least one year before the student reaches the age of majority, by the student's seventeenth birthday, the student shall be informed that his or her rights under Part B of the Act will transfer to him or her unless he or she has been determined incompetent under state law.

7. Other individuals can be invited, at the discretion of the parent or LEA, who have knowledge or special expertise

regarding the student, including related service personnel as appropriate. The LEA also shall inform the parents of the right of both the parents and the agency to invite other individuals who have knowledge or special expertise regarding the child, including related service personnel as appropriate to be members of the IEP Team. The LEA may recommend the participation of other persons when their involvement will assist in the decision-making process.

a. It is also appropriate for the agency to ask the parents to inform the agency of any individuals the parents will be inviting to the meeting. Parents are encouraged to let the agency know whom they intend to invite. Such cooperation can facilitate arrangements for the meeting and help ensure a productive, child-centered meeting.

b. The determination of the knowledge or special expertise of any individual described above shall be made by the parent or LEA who invited the individual to be a member of the IEP Team.

c. When the LEA responsible for the initial IEP/placement process considers referring or placing the student in another LEA, the responsible LEA must ensure the participation of a representative of the receiving LEA at the IEP Team meeting.

d. The LEA shall ensure the attendance of a representative of a private school when the student is voluntarily enrolled in a private school. When the representative cannot attend, the LEA shall use other methods to ensure participation by the private school or facility, including individualized or conference telephone calls.

B. IEP Team Member Excusal

1. A member of the IEP Team is not required to attend an IEP Team meeting, in whole or in part, when the parent of the student with an exceptionality and the public agency agree, in writing, that the attendance of the member is not necessary because the member's area of the curriculum or related services is not being modified or discussed in the meeting.

2. A member of the IEP Team may be excused from attending an IEP Team meeting, in whole or in part, when the meeting involves a modification to or discussion of the member's area of the curriculum or related services, when:

a. the parent, in writing, and the public agency consent to the excusal; and

b. the member submits, in writing to the parent and the IEP Team, input into the development of the IEP prior to the meeting.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2332 (November 2009).

§109. Accessibility of the Student's IEP

A. The student's IEP is accessible to each regular education teacher, special education teacher, related services provider, and any other service provider who is responsible for its implementation; and

1. Each teacher and provider is informed of:

a. his or her specific responsibilities related to implementing the student's IEP; and

b. the specific accommodations, modifications, and supports that shall be provided for the student in accordance with the IEP.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2334 (November 2009).

§111. The Three Types of IEPs for Students with Exceptionalities

A. The *Initial IEP* is developed for a student with an exceptionality who has met criteria for one or more exceptionalities outlined in *Bulletin 1508, Pupil Appraisal Handbook* and who has never received special educational services, except through an interim IEP, from an approved Louisiana school/program.

B. The *Review IEP* is reviewed and revised at least annually or more frequently to consider the appropriateness of the program, placement, progress in the general education curriculum and any related services needed by the student.

C. The *Interim IEP* shall be developed for students who have severe or low incidence impairments documented by a qualified professional concurrent with the conduct of an initial evaluation according to *Bulletin 1508, Pupil Appraisal Handbook*.

1. An interim IEP may also be developed for students who have been receiving special educational services in another state concurrent with the conduct of an initial evaluation.

2. An interim IEP may also be developed concurrent with the conduct of an initial evaluation for a student out-of-school, including students ages three- through- five, who are suspected of having a disability and for former special education students, through the age of twenty-two, who have left a public school without completing their public education by obtaining a state diploma.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2334 (November 2009).

§113. IEP Amendments

A. In making changes to a student's IEP after the annual IEP Team meeting for a school year, the parent of a student with a disability and the public agency may agree not to convene an IEP Team meeting for the purposes of making

those changes, and instead may amend or modify the student's current IEP.

1. Procedural safeguards for reconvening the IEP Team meeting shall be followed.

2. If changes are made to the student's IEP, the LEA must ensure that the student's IEP Team is informed of those changes.

3. Changes to the IEP may be made either by the entire IEP Team at an IEP Team meeting or by amending the IEP rather than by redrafting the entire IEP.

4. A parent must be provided with a revised copy of the IEP with the amendments incorporated.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2335 (November 2009).

§115. Placement Considerations

A. The IEP Team, following a discussion of the student's educational needs, shall choose a setting in which the educational needs will be addressed. The official designated representative shall be knowledgeable about placement considerations and shall be responsible for informing the IEP Team members. The IEP Team, including the parent, shall participate in discussions and decisions made about the placement. The term placement refers to the setting or class in which the student will receive special educational services.

B. Placement Considerations for Students with Disabilities whose ages are 6-21.

1. For the location of instruction/services, IEP Team members should consider the following.

a. Where would the student attend school if he or she did not have a disability?

b. Has the student, as a special education student, ever received special educational instruction or services within the general education environment?

c. What accommodations and/or modifications have been used to support the student as a special education student in the general education class?

d. After a review of the accommodations and/or modifications provided, what additional strategies and supports have been determined to facilitate the student's success in the general education setting?

e. When the student is not currently receiving instruction and/or services in a general education setting, what strategies could be used for providing services in the general education classroom?

f. Based on IEP goals and/or objectives/benchmarks, what instructional settings would support the achievement of these goals and/or objectives/ benchmarks?

g. When the decision has been made to provide the student with instruction and/or services outside the general education setting, what specific opportunities will the student have for integration in general education activities?

C. Placement Considerations for Students with Disabilities whose ages are 3-5.

1. For the location of instruction/services, the IEP Team should consider the following.

a. Where would the student spend the majority of the day if the student did not have a disability (natural environment)?

b. Can the services identified on the IEP be provided in the student's natural environment?

i. If not, what changes should be made in that environment to enable the required services to be delivered there?

ii. If not, what programming and/or placements/services options are necessary to meet the student's identified needs while providing meaningful opportunities for interactions with peers without disabilities?

c. What accommodations, supports, and/or related services are needed to meet the student's identified needs?

D. Placement Considerations for Students who are Gifted and/or Talented whose ages are 3-21.

1. For the location of instruction/services, IEP Team members should consider the following.

a. Where the student would attend school if he or she did not have an exceptionality?

b. Based on IEP goals, what instructional settings would support the achievement of these goals.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2335 (November 2009).

§117. Placement/Least Restrictive Educational Environments

A. For Students with Exceptionalities ages 6-21. The Educational Environments are listed below in a continuum from least to most restrictive. This list is not a continuum of least restrictive environment for the deaf or hard-of-hearing students. The list should not be considered a continuum of least restrictive environment for students receiving gifted and talented services.

1. Inside the regular class 80 percent or more of the day

a. A regular class with special education/related services provided within regular classes; a regular class with special education/related services provided outside regular classes; or a regular class with special education services provided in resource rooms.

2. Inside regular class no more than 79 percent of day and no less than 40 percent of the day

a. Resource rooms with special education/related services provided within the resource room; or resource rooms with part-time instruction in a regular class.

3. Inside regular class less than 40 percent of the day

a. Self-contained special classrooms with part-time instruction provided in a regular class, or a self-contained special classroom with full-time special education instruction on a regular school campus.

4. Separate School

a. Public and private day schools for students with disabilities; public and private day schools for students with disabilities for a portion of the school day (greater than 50 percent) and in regular school buildings for the remainder of the school day; or public and private residential facilities when the student does not live at the facility.

5. Residential Facility

a. Public and private residential schools for students with disabilities; or public and private residential schools for students with disabilities for a portion of the school day (greater than 50 percent) and in separate day schools or regular school buildings for the remainder of the school day.

6. Hospital/Homebound

a. Hospital programs or homebound programs—students should be receiving a minimum of 4 hours of services per week. Refer to Bulletin 741, §1103 for more information.

7. Correctional Facilities

a. Short-term detention facilities (community-based or residential); or correctional facilities

B. For Students with Exceptionalities Ages 3-5. In determining the appropriate setting for a preschool-aged student, each setting noted shall be considered; but the list should not be considered a continuum of least restrictive environment. The settings for preschool-aged students, three through five years, are defined as follows.

1. For Students with Disabilities Ages 3-5

a. Attending a regular early childhood program at least 10 hours per week:

i. receives the majority of special education and related services in the regular early childhood program;

(a). regular early childhood programs include, but are not limited to Head Start, kindergarten, private kindergarten or preschools, preschool classes offered to an eligible pre-kindergarten population by the LEA (e.g., LA 4, Title I); and group child development center or child care;

ii. receives the majority of special education and related services in some other location.

b. Attending a regular early childhood program less than 10 hours per week:

i. receives the majority of special education and related services in the regular early childhood program;

ii. receives the majority of special education and related services in some other location.

c. In early childhood special education—separate class:

i. attends a special education program in a class that includes less than 50 percent nondisabled children. Special education programs include, but are not limited to special education and related services provided in special education classrooms in regular school buildings; trailers or portables outside regular school buildings; child care facilities; hospital facilities on an outpatient basis; and other community-based settings.

d. In early childhood special education—separate school:

i. receives special education in a public or private day school designed specially for children with disabilities.

e. In early childhood special education—residential facility:

i. receives special education in a public or privately operated residential school or residential medical facility on an inpatient basis.

f. Receiving special education and related services at home:

i. when the child does not attend a regular early childhood program or special education program, but the child receives some or all of his/her special education and related services in the home. Children who receive special education both in a service provider location and at home should be reported in the home category.

g. Receiving special education and related services at service provider location:

i. when the child receives all of their special education and related services from a service provider and does not attend an early childhood program or a special education program provided in a separate class, separate school, or residential facilities. For example, speech therapy is provided in private clinicians' offices; clinicians' offices located in school buildings; hospital facilities on an outpatient basis, and libraries and other public locations.

2. For Students who are Gifted and/or Talented Ages 3-5

a. Attending a regular early childhood program at least 10 hours per week:

i. receives the majority of special education and related services in the regular early childhood program;

(a). regular early childhood programs include, but are not limited to Head Start, kindergarten, private kindergarten or preschools, preschool classes offered to an eligible pre-kindergarten population by the LEA (e.g., LA 4, Title I), and group child development center or child care;

ii. receives the majority of special education and related services in some other location.

b. Attending a regular early childhood program less than 10 hours per week:

i. receives the majority of special education and related services in the regular early childhood program;

ii. receives the majority of special education and related services in some other location.

c. In early childhood special education—separate class:

i. attends a special education program in a class that includes less than 50 percent nondisabled children. Special education programs include, but are not limited to special education and related services provided in special education classrooms in regular school buildings; trailers or portables outside regular school buildings, and child care facilities.

d. In early childhood special education—residential facility:

i. attends a public or privately operated residential school or residential medical facility on an inpatient basis.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2335 (November 2009), amended LR 37:885 (March 2011).

§119. Parental Consent

A. A LEA shall obtain formal parental and/or student consent before it can initially provide a student with special education and related services in any setting.

1. The student's consent is needed once the student reaches the age of majority, which is age eighteen (18) in Louisiana. When a student reaches the age of majority that applies to all students, except for a student who has been determined to be incompetent under state law, the student shall be afforded those rights guaranteed at such age.

B. Consent includes the following:

1. the parent and/or student has been fully informed of all relevant information in a manner that is clearly understandable to the parent and/or student, and

2. the parent and/or student formally agree in writing.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2336 (November 2009).

§121. Parental Disagreement with Provision of Services/Placement

A. Parents may disagree with all or some parts of the program, placement, or related services proposals. The LEA and the parents should make conciliatory attempts to resolve the disputes, including making modifications to the proposed program, placement, and related services. A LEA may not use a parent's refusal to consent to one service or activity to deny the parent or student any other service, benefit, or activity of the LEA.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2337 (November 2009).

§123. Parental Withholding of Consent

A. When the parent of the student refuses to consent to the initial provision of special education and related services, or the parent fails to respond to a request to provide consent for the initial provision of special education and related services, the LEA:

1. may not use the procedures in *Bulletin 1706*, Chapter 5 (including the mediation procedures under §506 or the due process procedures under §508-§517) in order to obtain agreement or a ruling that the services may be provided to a student;

2. will not be considered to be in violation of the requirement to make FAPE available to the student for the failure to provide the student with the special education and related services for which the public agency requests consent; and

3. is not required to convene an IEP Team meeting or develop an IEP for the student for the special education and related services for which the public agency requests such consent.

B. If, at any time after the initial provision of special education and related services, the parent of a child revokes consent in writing for the continued provision of special education and related services the LEA:

1. may not continue to provide special education and related services to the student, but must provide prior written notice in accordance with *Bulletin 1706* before ceasing the provision of special education and related services;

2. may not use the procedures in *Bulletin 1706*, Chapter 5 (including the mediation procedures under §506 or the due process procedures under §508-§517) in order to obtain agreement or a ruling that the services may be provided to a student;

3. will not be considered to be in violation of the requirement to make FAPE available to the student because of the failure to provide the student with further special education and related services; and

4. is not required to convene an IEP Team meeting or develop an IEP for the student for further provision of special education and related services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.
HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2337 (November 2009).

§125. Dispute Resolution Options

A. The LDE has adopted written procedures regarding the resolution of any complaint related to the identification, evaluation, educational placement, the level of services or placement, the provision of a free appropriate public education (FAPE) or payment for services that the parent has obtained for a student with a disability. The *Parent's Guide to Special Education Dispute Resolution* is designed to assist parents in understanding the Louisiana dispute resolution systems. The guide can be located at www.doe.state.la.us/lde/eia/2114.html.

B. IEP Facilitation is a new dispute resolution method. This option is available to parents and school districts when they both agree that it would be valuable to have a neutral person (IEP Facilitator) present at an IEP Team meeting to assist them in discussing issues regarding the IEP. Typically, an IEP Facilitator is brought in when parents and school district staff are having difficulties communicating with one another about what the student needs.

C. Informal Complaints/Early Resolution Procedures (ERP). It is the policy of the LDE to encourage and support prompt and effective resolution of any administrative complaint in the least adversarial manner possible. The implementation of the ERP by each LEA draws on the traditional model of parents and schools working cooperatively in the educational interest of the students to achieve their shared goal of meeting the educational needs of students with disabilities.

1. Formal administrative complaints are procedures developed under the supervisory jurisdiction of LDE to address allegations that an LEA is violating a requirement of Part B of the Act.

D. *Mediation* is an informal, voluntary process by which the parent and the LEA are given an opportunity, through the help of a trained mediator, to resolve their differences and find solutions to enhance the overall learning environment for the student. Differences may arise in the planning and implementing of an individualized educational program for a student with an exceptionality. It is important for parents and LEAs to have an opportunity to present their viewpoint in a dispute. See *Louisiana's Educational Rights of Children with Disabilities Handbook* or *Louisiana's Educational Rights of Gifted/Talented Children in Public Schools* and the *Mediation Services for Students with Exceptionalities* brochure for more information.

E. The parents and the LEA both have the right to an "impartial due process hearing" when disagreements arise between the parent and the LEA, relative to initiating or changing the identification, evaluation, or educational services and placement of a student with an exceptionality. Due process hearings may be initiated by the parent or the LEA. See *Louisiana's Educational Rights of Children with Disabilities Handbook* or *Louisiana's Educational Rights of Gifted/Talented Children in Public Schools* and the *Special Education Impartial Due Process Hearing* brochure for more information.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2337 (November 2009).

§127. Three-Year Age Span

A. Unless specifically permitted by the State Board of Elementary and Secondary Education, there shall not be a chronological age span of more than three years within a special education class.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2338 (November 2009).

§129. Site Determination

A. When the site at which the student will receive services is not determined at the IEP Team meeting, within 10 calendar days, the site determination form shall be completed. The LEA has the right to select the actual school site at which the student will receive services.

B. In addition to the questions on the IEP and Site Determination Form, the following issues shall be considered:

1. students should be placed in programs on the basis of their unique special education needs, not as a result of their particular disabling condition; and

2. placement cannot be based either on a particular LEA's special education delivery system or on the availability of related services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2338 (November 2009).

§131. Additional Clarification

A. Although throughout Louisiana most students with exceptionalities are served in their neighborhood schools there are some extenuating circumstances that influence the decision to serve a student in a school other than his or her neighborhood school.

B. For Students with Disabilities. The following is provided as an example: In a small LEA, there may be only four multidisabled students who need a multidisabled self-contained class. The LEA may establish one classroom within the LEA. Those multidisabled students could be grouped together on a centrally located campus as age-appropriate as possible. Because of the limited number of students, the age span may be greater than the 3-year span. In this situation, ages may be from 10-14 years—with two children being 10-years-old, one being 11, and one being 14. When the administration decides to locate this class on an elementary K-6 campus because the majority of the class is of elementary age, there could be adequate justification to allow the 14-year-old to remain on the elementary campus.

This placement is not a desirable situation, but a necessity in some cases.

C. For Students who are Gifted and/or Talented. The following is provided as an example: A Resource Center for Gifted/Talented is a type of instructional setting, designed or located in one school, that provides instructional services to students who are gifted/talented from two or more schools and in which special education is provided by an individual certified in accordance with *Bulletin 746*; pupil/teacher ratios established in Bulletin 1706, Part B, are used.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2338 (November 2009).

Chapter 3. IEP Development

§301. Responsibilities

A. The responsibility for offering FAPE is met through the process of developing an IEP. This process includes:

1. communication between the LEA and the parents;

2. IEP Team meetings at which parents and school personnel make joint decisions and resolve any differences about the student's needs and services;

3. a completed IEP/placement document, which describes the decisions made during the meetings, including the special education and related services that are to be provided;

4. a formal assurance by the LEA that the services described in the document will be provided;

5. written parental consent for initial placement;

6. procedural safeguards for differences that cannot be resolved mutually;

7. initial placement and provision of services as described in the IEP/ placement document; and

8. consideration and/or determination of eligibility for Extended school year (ESY) services for students with disabilities. Refer to ESY section of this handbook (Chapter 7) for further guidance.

B. The IEP Team has the responsibility for determining the student's special educational and related services needs and placement.

C. A student dually identified with a disability and gifted and/or talented shall have his/her individualized educational program developed on the IEP for students with a disability.

D. A LEA is required to initiate and conduct IEP Team meetings periodically, but not less than annually, to review each student's IEP in order to determine whether the annual goals for the student are being achieved and to revise the IEP as appropriate. The LEA shall notify parents of the review IEP Team meeting in accordance with the same procedures as the initial IEP.

E. An additional IEP/placement review meeting is not required when a LEA elects to move the student to another school site within the agency when all of the information on the IEP remains the same and the effect of the program has not been changed.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2338 (November 2009).

§303. Initial IEPs

A. Program Considerations for Students with Disabilities. Program decisions shall be made and written on the IEP in the following areas that form the basis for the placement.

1. General information about the student, including

2. the student's strengths; and

3. the concerns of the parents for enhancing the education of their child; and

4. the results of the initial evaluation or most recent reevaluation of the student; and

5. the student's present levels of academic achievement, developmental, and functional needs; and

a. how the student's disability affects the student's involvement and progress in the general education curriculum; and

b. how to determine when the student with a disability needs instructional materials in accessible formats (e.g., large print , Braille, digital, and/or audio); and

c. for preschool students, as appropriate, how the disability affects the student's participation in appropriate activities; and

6. as appropriate, the results of the student's performance on any general state- or district-wide assessment program.

7. The IEP Team shall also consider any of the following special factors:

a. for a student whose behaviors impede his or her learning or that of others, consider the use of positive behavioral intervention and supports, and other supports to address that behavior;

b. for a student with limited English proficiency, consider the language needs of the student as those needs relate to the student's IEP;

c. for a student who is blind or visually impaired, provide for instruction in Braille and the use of Braille unless the IEP Team determines, after an evaluation of the student's reading and writing skills, needs, and appropriate reading and writing media (including an evaluation of the student's future needs for instruction in Braille or the use of Braille), that instruction in Braille or the use of Braille is not appropriate for the student;

d. the communication needs of the student, and in the case of a student who is deaf or hard-of-hearing, consider the student's language and communication needs, opportunities for direct communications with peers and professional personnel in the student's language and communication mode, academic level, and a full range of needs, including opportunities for direct instruction in the student's language and communication mode;

e. whether the student requires assistive technology devices and services based on assessment/evaluation results;

f. for a student who has health problems, the needs to be met during the school day. These needs would include such medical conditions as asthma, diabetes, seizures, or other diseases/disorders that may require lifting and positioning, diapering, assistance with meals, special diets, or other health needs.

8. The measurable annual academic and functional goals, designed to meet the student's needs that result from the student's disability to enable the student to be involved in and make progress in the general education curriculum,

a. shall be based on the academic standards for the grade in which the student is enrolled; and

b. shall be based on each of the student's other educational needs that result from the student's disability; and

c. short-term objectives/benchmarks shall be required for students with significant cognitive disabilities or functions like a student with significant cognitive disabilities at all ages and grade levels, including preschool-aged students;

i. short-term objectives/benchmarks shall be required for students who participate in LAA 1 (the alternate assessment aligned to alternate achievement standards);

ii. IEP Teams may continue to develop short-term instructional objectives or develop benchmarks that should be thought of as describing the amount of progress the student is expected to make within a specified segment of the year. Generally, benchmarks establish expected performance levels that allow for regular checks of progress to coincide with the reporting periods for informing parents of their child's progress toward achieving the annual goals. An IEP Team may use either short-term objectives or a combination of the two, depending on the nature of the annual goals and needs of the child.

d. The participation in appropriate activities for the preschool-aged student.

9. The special educational and related services and supplementary aids and services to be provided to the student, or on behalf of the student, and the program modifications or supports for school personnel will be provided for the student

a. to advance appropriately toward attaining the measurable annual goals; and

b. to be involved and make progress in the general education curriculum and to participate in extracurricular and other nonacademic activities; and

c. to be educated and participate with other students with and without disabilities in the activities.

10. An explanation is given to the extent in which the student will not participate with students without disabilities in the regular class and extracurricular and other nonacademic activities.

11. The participation in the annual statewide assessment for the student in grades 3-11; and

a. the need for any individual accommodations in the administration of state- or district-wide assessments of academic achievement; and

b. when the IEP Team determines the student shall participate in an alternate assessment instead of the regular statewide assessment, a statement of why

i. the student cannot participate in the regular assessment; and

ii. the particular assessment selected as appropriate for the student.

12. The anticipated frequency, location, and duration of the special educational services and modifications.

13. The type of physical education program to be provided.

14. For each student beginning at age 16, transition service needs that focus on the student's courses of study; and

a. for each student not later than the first IEP to be in effect when the child turns 16, or younger, when determined appropriate by the IEP Team, and updated annually thereafter, the needed transition services including any interagency responsibilities or linkages.

15. The need for extended school year services (refer to Chapter 7) based on student performance on academic/functional goals and/or objectives/ benchmarks.

a. The IEP Team will consider the criterion/criteria to make the ESY determination and what data must be collected to make that decision. The data collected through progress monitoring (e.g., grades, progress reports, behavior checklists, task analyses, teacher observation logs, etc.) shall be reviewed to determine the progress the student makes toward acquisition of the measurable annual goals and/or objectives/benchmarks, and whether the data supports that, the student meets any of the criteria for ESY eligibility.

B. Program Considerations for Students who are Gifted and/or Talented. Program decisions shall be made and written on the Gifted/Talented IEP in the following areas that form the basis for the placement.

1. General information about the student, including student interests; and

a. in the case of a student with limited English proficiency, whose language needs relate to the student's IEP;

2. the student's strengths;

3. the concerns of the parents for enhancing the education of their child;

4. as appropriate, the results of the student's performance on any general state- or district-wide assessment program for students in grades 3 -11;

5. the results of the initial evaluation or most recent reevaluation of the student;

6. input from the regular education teacher regarding student classroom performance, including academic achievement and social skills;

7. any pertinent social and emotional needs;

8. the student's present levels of educational performance, including the student's academic achievement and social/emotional needs;

9. the measurable annual academic and/or enrichment and/or social goals;

a. meeting the student's needs that result from the student's exceptionality and progress in an accelerated and enriched curriculum, and

b. meeting each of the student's other educational needs that result from the student's exceptionality, and

i. in the case of a student whose behaviors impede his or her learning or that of others, consider the use of positive behavioral intervention strategies and other supports to address that behavior;

c. the participation in appropriate activities for the preschool-aged student;

10. the related services, which may include transportation and counseling;

11. the accommodations needed for instructional and statewide assessment purposes must be documented on the *Section 504 Individual Accommodation Plan* (IAP). A copy of the IAP should be kept in the student's IEP folder;

12. and the anticipated frequency, location, and duration of the special education services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2338 (November 2009).

§305. Review IEPs

A. Program Considerations for Students with Disabilities. The IEP Team shall review and revise the IEP for students with disabilities to address:

1. any lack of expected progress toward achieving the annual goals and objectives/benchmarks;

2. any lack of expected progress in the general education curriculum (e.g., the student is making failing grades or through progress monitoring the student's lack of progress in the general education curriculum is evident);

3. the results of the student's performance on any state- or district-wide assessment;

4. the results of any reevaluation;

a. for any additional concerns, the procedures for evaluation established in *Bulletin 1508, Pupil Appraisal Handbook* shall be followed; and

b. in the event the parent signs the triennial reevaluation waiver, a statement must be included on the next IEP.

c. in the event the results of the reevaluation indicate *no exceptionality*, an IEP will not be developed and special education and related services cease;

5. information about the child shall be provided to, or by, the parents;

6. the student's anticipated needs;

7. the student's special educational and related service needs; for the preschool-aged child, his or her developmental needs shall be addressed;

a. to determine when the student with a disability needs instructional materials in assessible formats (e.g., Braille, large print, digital, and/or audio);

8. any positive behavior interventions and strategies that should be used, as needed;

9. updated decisions about the student's program, placement, and related services;

10. consideration of special factors as listed in §303.A.6.a-f;

11. for each student beginning at age 16, discuss transition service needs that focus on the student's courses of study;

a. for each student beginning not later than the first IEP to be in effect when the student turns 16, discuss the needed transition services including any interagency responsibilities or linkages;

12. consideration of location of instruction/services, refer to §115-117.

13. the need for extended school year services. This need shall be based on student performance on academic/functional goals and/or objectives/ benchmarks. Refer to the ESY section of this handbook (Chapter 7).

a. The IEP Team will consider the criterion/criteria to make the ESY determination and what data must be collected to make that decision. The data collected through progress monitoring (e.g., grades, progress reports, behavior checklists, task analyses, teacher observation logs, etc.) shall be reviewed to determine the progress the student makes toward acquisition of his or her goals, and/or

objectives/benchmarks, and whether the student's progress meets any of the criteria for ESY eligibility.

14. Discuss any other matters.

B. A review meeting shall be conducted in addition to the required annual review when

1. the student's teacher feels the student's IEP or placement is not appropriate for the student; or

2. the student's parents believe their child is not progressing satisfactorily in the general education curriculum or that there is a problem with the student's IEP;

3. the LEA proposes any changes regarding program or placement, such as to modify, add, or delete a goal or objective; to add or delete a related service;

4. the student has been determined to be eligible for ESY and will receive ESY services;

5. the behavior of the student warrants a review by the IEP Team to decide on strategies including positive behavioral intervention, strategies, and supports to address the behavior;

6. either a parent or a public agency believes that a required component of the student's IEP should be changed;

7. the LEA determines that a change in the IEP may be necessary to ensure the provision of FAPE;

a. a hearing officer orders a review of the student's IEP/placement document;

8. in the case in which the IEP/placement document is entirely rewritten, the date of that meeting shall become the anniversary date for the next annual review meeting.

C. Program considerations for Students who are Gifted and Talented. The IEP Team shall review and revise the IEP for students who are gifted and talented to address:

1. any lack of expected progress toward achieving the annual goals;

2. any lack of expected progress in the general education curriculum;

3. the results of the student's performance on any state- or district-wide assessment;

4. the results of any reevaluation;

a. for any additional concerns, the procedures for evaluation established in *Bulletin 1508, Pupil Appraisal Handbook* shall be followed;

b. in the event the results of the revaluation indicates *no exceptionality*, an IEP will not be developed and gifted and/or talented services cease;

5. information about the student provided to, or by, the parents;

6. the student's anticipated needs;

7. the student's special educational needs; for the preschool-aged child, address his or her developmental needs;

8. any positive behavior interventions and strategies that should be used, as needed;

9. updated decisions about the student's program and placement;

10. in making decisions for location of instruction/services, refer to §115-117;

11. any other concerns.

D. A review meeting shall be conducted in addition to the required annual review when:

1. a student's teacher feels the student's IEP or placement is not appropriate for the student; or

2. the student's parents believe their child is not progressing satisfactorily or that there is a problem with the student's IEP; or

3. the LEA proposes any changes regarding program or placement, such as to modify, add, or delete a goal; to add or delete a related service; or

4. either a parent or a public agency believes that a required component of the student's IEP should be changed; or

5. the LEA determines that a change in the IEP may be necessary to ensure the provision of FAPE; or

a. a hearing officer orders a review of the student's IEP/placement document; and

b. a review IEP Team meeting shall be conducted as part of the reevaluation process.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2340 (November 2009).

§307. Interim IEPs

A. Placement Decisions. Local directors/supervisors of special education may approve enrollment in special education after pupil appraisal personnel have reviewed existing student information.

1. An interim IEP may be developed for students transferring from out-of-state who were receiving special educational services, concurrent with the conduct of an initial evaluation according to the *Bulletin 1508, Pupil Appraisal Handboo*k.

2. An interim IEP may be developed concurrent with the conduct of an initial evaluation for students out of school, including students ages three-through-five who are suspected of having a disability, and for former special education students, through the age of twenty-two, who have left a public school without completing their public education by obtaining a state diploma.

3. Formal written parental consent shall be obtained for a multidisciplinary evaluation to be conducted according to *Bulletin 1508, Pupil Appraisal Handboo*k and an interim IEP may be developed.

a. During the time the evaluation is in process, all regulations shall apply.

b. If an interim IEP were developed, it–may be amended as necessary.

4. Parents of these students shall be informed at the interim IEP Team meeting that the evaluation results must classify a student as exceptional for that child to remain in the special education program.

5. An interim IEP shall not be developed when a student has a current IEP or evaluation.

B. Parental Consent. Parental consent for the interim placement and related services shall be obtained by parental signature on the IEP form.

1. Parents shall be informed that the student will exit from the special education program when the student is found to be ineligible for special educational services according to the criteria in *Bulletin 1508, Pupil Appraisal Handbook*. A statement stating the above should be written in the comment section of the IEP when it is developed.

2. When the student is eligible for special educational services, an initial IEP/placement meeting will be conducted within 30 calendar days from the date of dissemination of the written evaluation to the LEA's special education administrator.

C. Program Considerations. In the development of the IEP, the IEP Team's discussion about the current performance and goals for the student will have to be conducted without the benefit of integrated assessment data or teacher observation.

1. To gather information about current performance, the parent may be the prime source of information about the student's skills, development, motivation, learning style, etc.

2. The goals should address the student's educational program during the assessment process.

3. When available information indicates that related services are required, services should be provided.

4. The student's performance during an interim placement shall be documented by the teacher and pupil appraisal personnel. This documentation should provide meaningful data for determining an appropriate program and placement.

D. Extended School Year

1. Students on interim IEPs shall be considered for extended school year services. The IEP Team will consider the criterion/criteria to make the ESY determination and what data must be collected to make that decision. Student performance on academic/functional goals and/or objectives/benchmarks on the IEP are monitored on an ongoing basis throughout the school year. The data collected through progress monitoring (e.g., grades, progress reports, behavior checklists, task analyses, teacher observation logs, etc.) shall be reviewed to determine the progress the student makes toward acquisition of his or her goals, benchmarks, objectives, and whether the student's progress meets any of the criteria for ESY eligibility.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2341 (November 2009).

§309. Related Services Considerations

A. *Related Services for Students with Disabilities* means transportation and such developmental, corrective, and other supportive services as are required to assist a student with a disability to benefit from special education. A LEA, as part of its requirement to provide FAPE, shall provide any related service for which there is a documented need. However, for certain related services, specific eligibility criteria shall be met according to *Bulletin1508, Pupil Appraisal Handbook*. The decision regarding related services shall be made in view of each student's unique needs. Sources of documentation can be the individual evaluation report and any subsequent evaluation reports submitted by therapists, physicians, psychologists, parents, etc. Examples of support and related services may include speech/language pathology services, assistive technology, physical or occupational therapy, audiological services, orientation and mobility services, interpreting services and counseling, including rehabilitation counseling, psychological services, recreation, including therapeutic recreation, early identification and assessment of disabilities in children and transportation services. Medical services for diagnostic or evaluation purposes may also include school health services and school nurse services, social work services in schools, and parent counseling and training.

1. Exception; services that apply to students with surgically implanted devices, including cochlear implants;

a. related services do not include a medical device that is surgically implanted, the optimization of the device's functioning (e.g., mapping), maintenance of the device, or the replacement of the device;

b. nothing limits the right of a student with a surgically implanted device (e.g., cochlear implant) to receive related services that are determined by the IEP Team to be necessary for the child to receive FAPE;

c. nothing limits the responsibility of the LEA to appropriately monitor and maintain medical devices that are needed to maintain the health and safety of the student, including breathing, nutrition, or operation of other bodily functions, while the student is transported to and from school or is at school; or

d. nothing prevents the routine checking of an external component of a surgically implanted devise to make sure it is functioning properly.

2. The IEP Team shall consider each related service that is recommended on the evaluation reports and document and the decisions on the IEP form. For example, the team shall:

a. list all services recommended by the team and the service provision schedules, dates, and location, etc.;

b. explain the team's decisions not to include a recommended related service;

c. explain delays in providing any related service listed on the IEP.

i. This delay, or hardship, in no way relieves a LEA from providing the service and from documenting every effort to provide it in a timely manner.

d. The participation of related service personnel is extremely important during the IEP Team meeting. Involvement should be through either direct participation or written recommendations.

3. Additional Notes about Related Services

a. Adapted physical education (APE) is not a related service; APE is a direct instructional program. A student who requires only adapted physical education may be eligible for related services, since adapted physical education is a direct instructional program.

b. A student who is identified with only a speech or language impairment may be eligible for other related services, since in this case speech therapy is the direct special educational program.

c. Considerations for related services provided during ESY are the same as for the IEP.

B. Related Services for Students who are Gifted and/or Talented may include transportation or counseling, which must be addressed on the IEP. The decision regarding related services shall be made in view of each student's unique needs. Sources of documentation can be the individual evaluation report and any subsequent evaluation reports submitted by therapists, physicians, psychologists, parents, etc.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2342 (November 2009).

Chapter 4. Alternative Pathways to Promotion and Graduation

§401. Eligible Students and IEP Team Responsibilities

A. Beginning with the 2014-2015 school year, IEP teams shall determine promotion and may establish an alternative pathway for fulfilling graduation requirements, pursuant to regulations set forth in this Chapter.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:24.4, R.S. 17:183.2, R.S. 17:183.3, R.S. 17:1941 et seq., and R.S. 17:2925.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 40:2531 (December 2014).

§403. Requirements for Promotion

A. Beginning in spring 2015 and in accordance with procedures set forth by the LDE, IEP teams shall determine promotion to the next grade level for a student with a disability who fails to meet state or local established performance standards on any assessment for purposes of promotion. Such determination shall be made only if, in the school year immediately prior to each grade level in which the student would otherwise be required to demonstrate certain proficiency levels in order to advance to the next grade level, the student has not otherwise met the local requirements for promotion or has not scored at or above the basic achievement level on the English language arts or mathematics components of the required state assessment and at or above the approaching basic achievement level on the other.

B. If an IEP team determines that the student is not required to meet state or local established performance standards on any assessment for purposes of promotion, it shall:

1. identify rigorous educational goals for the student;

2. include diagnostic information, appropriate monitoring and intervention, and other evaluation strategies;

3. include an intensive instructional program;

4. provide innovative methods to promote the student’s advancement including flexible scheduling, alternative learning environments, online instruction, or other interventions that are proven to accelerate the learning process and have been scientifically validated to improve learning and cognitive ability; and

5. identify a course of study that promotes college or workforce readiness, or both, career placement and advancement, and transition from high school to postsecondary education or work placement.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:24.4, R.S. 17:183.2, R.S. 17:183.3, R.S. 17:1941 et seq., and R.S. 17:2925.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 40:2531 (December 2014).

§405. Requirements for Graduation

A. Beginning with the 2014-2015 school year, by the end of eighth grade, the IEP team of a student with a disability shall begin to develop an individual graduation plan pursuant to Bulletin 741 and the provisions of this Chapter.

B. Beginning with the 2014-2015 school year, if a student with a disability has not met state-established benchmarks on state assessments for any two of the three most recent school years prior to high school, or for the two most recent administrations of any state-established assessments required for graduation, the IEP team may determine if the student is required to meet state or local

established performance standards on any assessment for purposes of graduation.

C. Students with disabilities shall be afforded the same opportunities to pursue a standard diploma and to exit with all course credits, honors, and financial awards as other students. A student is not guaranteed a diploma and shall meet either the standard requirements for graduation or those established by his IEP team to be awarded a diploma.

D. Pursuant to the Elementary and Secondary Education Act (ESEA), the state academic content standards shall apply to all public schools and public school students in the state and include the same knowledge and skills expected of all students and the same level of achievement expected of all students, with the exception of students with the most significant cognitive disabilities who may access alternate academic achievement standards and achievement levels. Only diplomas earned by students who have pursued the regular academic state standards and who have earned all state-required Carnegie credits shall be considered regular diplomas in the state and district accountability system, pursuant to federal laws and regulations.

E. If an IEP team determines that state-established benchmarks on the required state assessments are no longer a condition for graduation for a student, it shall:

1. within 30 days of the start of the next school year or course, establish minimum performance requirements in the student's IEP relevant to graduation requirements. The LDE shall make available a list of multiple appropriate assessments and guidance for use in establishing minimum score requirements on the assessments that an IEP team may, but shall not be required to, use for this purpose. The IEP team shall consider establishing minimum performance requirements for annual academic and functional goals designed to meet the student's needs that result from the student's disability and that will enable the student to be involved in and make progress in the general education curriculum, and to meet other educational needs of the student that result from the student's disability, including the student's postsecondary goals related to training, education, employment, and where appropriate, independent living skills;

2. provide the student and his parent or legal guardian with information related to how requirements that vary from standard expectations may impact future educational and career options;

3. require the student to successfully complete IEP goals and requirements and to ensure that the student meets at least one of the following conditions, consistent with the IEP:

a. employment in integrated, inclusive work environments, based on the student's abilities and local employment opportunities, in addition to sufficient self-help skills to enable the student to maintain employment without direct and continuous educational support from the school district;

b. demonstrated mastery of specific employability skills and self-help skills that indicate that he does not require direct and continuous educational support from the school district; or

c. access to services that are not within the legal responsibility of public education or employment or education options for which the student has been prepared by the academic program.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:24.4, R.S. 17:183.2, R.S. 17:183.3, R.S. 17:1941 et seq., R.S. 17:2925, 20 U.S.C. 6301 et seq., and 20 U.S.C. 1400 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 40:2532 (December 2014).

Chapter 5. Participation in Statewide Assessments

§501. Participation in Statewide Assessments

A. All special education students shall participate in statewide assessments in grades 3-11.

B. Students are to take the test that corresponds to the grade in which they are enrolled.

C. The decision as to which test a student with disabilities participates in is made on an annual basis by the IEP team.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2343 (November 2009).

§503. Types of Alternate Assessments

A. LEAP alternate assessment (alternate assessment), was developed for students with disabilities who are served under IDEA for whom there is evidence that the student has a significant cognitive disability. The alternate assessment is a performance-based assessment designed for students whose instructional program is aligned with the Louisiana Connectors standards.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2343 (November 2009), amended LR 41:535 (March 2015), LR 45:527 (April 2019), LR 45:1171 (September 2019).

§505. Alternate Assessment Participation Criteria

A. LEAP Alternate Assessment (Alternate Assessment). To be eligible to participate in the LEAP Alternate Assessment (alternate assessment), the IEP team must verify the student (in grades 3-11) meets the criteria listed in this subsection.

1. For students entering a high school cohort on or before the 2019-2020 school year, the student has a disability that significantly impacts cognitive function and/or adaptive behavior. This may be demonstrated in the following ways.

a. For students who have not completed the fifth grade, an eligible student is functioning three or more standard deviations below the mean in cognitive functioning and/or adaptive behavior.

b. For students who have completed fifth grade, an eligible student is functioning 2.3 or more standard deviations below the mean in cognitive functioning and/or adaptive behavior.

c. Students who have completed the fifth grade functioning between 2.0 and 2.29 or more standard deviations below the mean in cognitive functioning and/or adaptive behavior may be eligible for alternate assessment participation if the IEP team provides additional empirical evidence an alternate assessment identification is appropriate for the student.

2. For students entering a high school cohort during the 2020-2021 school year and beyond, the student has a disability that significantly impacts cognitive function. This may be demonstrated in the following ways.

a. For students who have not completed the fifth grade, an eligible student is functioning three or more standard deviations below the mean in cognitive functioning.

b. For students who have completed fifth grade, an eligible student is functioning 2.3 or more standard deviations below the mean in cognitive functioning.

c. Students who have completed the fifth grade functioning between 2.0 and 2.29 or more standard deviations below the mean in cognitive functioning and with deficits in adaptive behavior may be eligible for alternate assessment participation if the IEP team provides additional empirical evidence an alternate assessment identification is appropriate for the student.

3. The student requires direct individualized instruction and substantial supports to achieve measurable gains on the challenging state academic content standards for the grade in which the student is enrolled.

4. The decision to include the student in an alternate assessment is not solely based on the following:

a. student's educational placement;

b. excessive or extended absences;

c. disruptive behavior;

d. English language proficiency;

e. student's reading or academic level;

f. student's disability according to Bulletin 1508;

g. social, cultural, and/or economic differences;

h. anticipated impact on school performance scores;

i. administrative decision;

j. expectation that the student will not perform well on the LEAP 2025 or other statewide assessments; or

k. the student's previous need for accommodation(s) to participate in general state or district-wide assessments.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2343 (November 2009), amended LR 37:886 (March 2011), LR 41:535 (March 2015), LR 45:527 (April 2019), LR 45:1463 (October 2019).

§507. Test Accommodations

A. The assessment in which the student is to participate and any accommodations the student is to receive for instruction and assessment shall be documented annually on the program/services page of the student's IEP.

B. Test accommodations cannot be different from or in addition to the accommodations indicated on the student's IEP and provided in regular classroom instruction and assessment.

C. Test accommodations are described in Bulletin 118, Statewide Assessment Standards and Practices.

D. For Students who are gifted and/or talented, any accommodations the student is to receive for instruction and assessment shall be documented annually on the student's IAP. A copy of the IAP should be kept in the student's IEP folder.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2343 (November 2009).

Chapter 7. Extended School Year Services

§701. Overview

A. Extended school year (ESY) services are the provision of special education and related services to students with disabilities beyond the normal school year of the LEA .The LEA must utilize specific eligibility criteria to determine the need for extended school year services to ensure the provision of FAPE. Services are provided in accordance with an IEP and at no cost to the parents of the student.

B. Once a student's extended school year services have been planned through the IEP process, the services shall be implemented. LEAs should provide extended school year instruction in a location that is the least restrictive environment option for that student. The services necessary to meet the goals and objectives targeted on the ESY section of the IEP are to be provided.

C. Careful documentation should be kept in order to evaluate the student's performance and progress toward the completion of the ESY goals and objectives. Accurate records of student performance will assist the IEP Team in the upcoming school year to continue the educational program with a minimum of interruption and disruption.

D. Ongoing student performance assessment is always an integral part of any educational program, and it should be documented on appropriate data collection forms (e.g., grade book, checklist, task analysis form) and progress reports.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2344 (November 2009).

§703. Responsibilities

A. The IEP Team is responsible for developing the extended school year services for the student. The IEP Team shall consider the student's educational needs according to the criterion/criteria by which that student qualified for ESY services. Throughout the planning phase, the team is involved in a very individualized decision-making process based on the student's specific needs identified throughout the regular school year data collection.

B. At the IEP Team meeting, the IEP Team shall discuss any and all pertinent criterion/criteria and examine student performance data. The IEP Team shall consider student performance on critical skills as they relate to ESY eligibility criteria.

1. The decision regarding ESY eligibility should not be made before January 1 of the current school year unless there is sufficient data to make that decision prior to January.

2. Extended school year services shall be provided only when a student's performance data indicate that the services are necessary for the provision of FAPE.

3. The LEA may not limit extended school year services to particular categories of disability; or unilaterally limit the type, amount, or duration of those services.

C. ESY services are available for students who meet the eligibility criteria and meet the following conditions:

1. are between the ages 3-21;

2. are identified with a disability according to the *Bulletin 1508, Pupil Appraisal Handbook*; and

3. have a current IEP.

D. ESY services are:

1. based on student's unique educational needs;

2. designed to address critical skills of the student;

3. tailored to fit the needs of each qualifying student; therefore, the length of ESY services varies;

4. considered and determined on a yearly basis; and

5. provided sometimes in non-traditional settings.

E. All LEAs shall utilize the specific eligibility criteria to determine the need for ESY and service planning guidelines to design, implement and evaluate the extended school year service provided to the student by:

1. evidence related to the student performance of critical skills as it relates to ESY eligibility criteria; and,

2. the probability that the student could master/maintain the goals and/or objectives/benchmarks stated on the IEP with the provision of ESY services.

F. LEAs should continue to address LRE needs of the student in the implementation of ESY services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2344 (November 2009).

§705. ESY Eligibility Criteria

A. ESY eligibility criteria shall be used in the determination of eligibility for ESY services.

B. The determination of eligibility shall be made prior to the start of summer ESY services.

C. Three criteria are used to determine a student's need for ESY services: Regression-Recoupment, Critical Point of Instruction, and Special Circumstances.

1. Regression-Recoupment (R-R) Criterion

a. This criterion shall be applied to all students with significant cognitive disabilities or who functions like students with significant cognitive disabilities at all ages and grade levels, including preschool aged students.

b. This criterion should be considered for all students suspected of having difficulty with recoupment of skills.

i. When the IEP Team decides to monitor a student using Regression-Recoupment criterion who is not participating in LAA 1, the team shall target specific critical goals and/or objective/benchmarks on the IEP as a basis to determine eligibility at the next IEP.

c. Definitions

i. *Pattern of Regression-Recoupment Problems*—following a break in instruction, there is a failure to regain the performance level for an objective/skill such that the highest post-break score is lower than the highest pre-break score for any objective (i.e., critical skill) across two breaks in instruction.

ii. *Break in Instruction*—a break of at least five instructional days.

iii *Highest Pre-Break Score*—the highest score (of at least two data points) in the two-week period immediately preceding the break in instruction.

iv. *Highest Post-Break Score*—the highest score (of at least two data points) in the two-week period immediately following the break in instruction.

d. Steps for applying the R-R Criterion

i. The teacher/instructional personnel reviews student performance data before and after a minimum of two breaks in instruction. The method and frequency of data collection will depend on the objectives/benchmarks.

ii. Following extended breaks in instruction (i.e., full summer), it is expected the student will recoup the skills within 4 weeks.

iii. The teacher/instructional personnel determines whether there is a regression-recoupment problem such that the highest of the post-break score is lower than the highest of the pre-break score for "any" objective/benchmark and/or break.

iv. The student is eligible for ESY services when the performance data demonstrates a pattern of problems with recouping performance on any objective/skill across any two breaks within the current IEP.

2. Critical Point of Instruction (CPI) Criterion

a. This criterion shall be considered for all students.

b. Definitions

i. *Critical Point of Instruction-1* (CPI-1)—in the absence of extended school year services, the student would be at risk of losing general education class time or increasing special education service time because of a lack of academic or social skill development.

ii. *Critical Point of Instruction-2* (CPI-2)—in the absence of extended school year services, the student would be at risk of losing significant progress made toward acquisition, fluency, maintenance, and/or generalization of skills relevant in the pursuit of critical life areas (i.e., self-help, community access, or social/behavioral skill areas). Behaviors to be considered for CPI-2 include self-injurious, ritualistic, and/or aggressive behaviors that negatively impact the health, well being and/or delivery of instruction to the student.

c. Steps for Applying the CPI Criteria

i. The teacher/instructional personnel examines student performance data and determines whether in the absence of extended school year services, the student would be at risk of losing general education class time or increasing special education service time because of a lack of academic or social skill development (CPI-1) or would be in danger of losing significant progress made toward acquisition, fluency, maintenance, and/or generalization of skills relevant in the pursuit of critical life areas (i.e., self-help, community access, or social/behavioral skill areas) (CPI-2).

ii. CPI-1: The teacher/instructional personnel determines that the student is projected to be at a critical stage in the general education curriculum, and special education services provided during an extension of the regular school year will allow the student to maintain the level of services indicated in the regular year IEP.

iii. CPI-2: The teacher/instructional personnel determine that the student will require extended school year services to achieve meaningful benefit in the goal area.

(a). Students exhibiting interfering behaviors and qualifying under CPI-2 should have a goal and/or objectives/benchmarks on the IEP to address those behaviors; and documentation shall include a description of the behavior, baseline data, copy of the behavior intervention plan, and when available, a copy of the functional behavior analysis.

iv. The student is eligible for ESY when there is evidence the impact of providing ESY services could enable the student to maintain and/or achieve grade-level expectations and reduce the loss of skill acquisition, fluency and/or maintenance.

3. Special Circumstances (SC) Criterion

a. Employment

i. Students ages 16-21 shall be considered for ESY services when there is documentation (i.e., job performance data) that the student is in need of support to maintain paid employment. *Paid Employment* refers to pay commensurate/minimum wage or has an alternate wage certificate from the Department of Labor to be paid at a reduced level.

ii. A written statement from the student's employer signifying his or her intention to employ the student throughout the summer months; and

iii. a current IEP with goals and action steps targeted for transition in the area of employment.

iv. The student is eligible for ESY services when there is evidence the student is in need of support to maintain paid employment during the summer months.

b. Transition from Early Steps to Part B (Preschool)

i. Students transitioning from Early Steps to Part B preschool services who have spring/summer birthday shall be considered for ESY services.

ii. The student is eligible for ESY when there is evidence from the performance data on the Individualized Family Service Plan (IFSP) that the student will fail to maintain performance skills and will regress without ESY services.

c. Transition to Post-school Outcomes

i. Students who have a transition plan and who are expected to exit the LEA at the end of the school year shall be considered for ESY services. The teacher/instructional personnel shall examine the documentation of the incomplete action steps and corresponding goals that are the responsibility of the LEA.

ii. The student is eligible for ESY when the student is in need of services to complete the action steps that are the responsibility of the LEA that are not expected to be completed by the end of the student's final year in school.

d. Excessive Absences

i. A student with a disability who has documented absences during the school year, in excess of 25 days, for health-related conditions without the provision of hospital/homebound services and who has failed to make projected progress shall be considered for ESY services.

ii. A student is eligible for ESY services when there is evidence that failure to acquire the goals and/or objectives/benchmarks will seriously jeopardize the overall educational progress of the student; and

iii. the ESY services could have a significant impact on the student's ability to make progress toward the acquisition of established goals and objectives/benchmarks.

e. Extenuating Circumstances

i. There may be unusual situations or circumstances when ESY services may be needed, but the student does not meet any of the eligibility criteria.

ii. The teacher/instructional personnel shall use professional judgment to make the decision whether the student needs ESY services in order to receive FAPE. The teacher/instructional personnel shall determine if a break in instruction will negatively impact or cause the student to lose skills that will restrict the student's ability to function as independently as possible.

iii. Two steps to determine eligibility for an extenuating circumstance are:

(a). consider the previously described ESY eligibility criteria, and

(b). determine there is a need for ESY services through the examination of student performance data.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2344 (November 2009).

§707. ESY Eligibility Determination

A. The ESY eligibility decision for each student is to be made between January 1 and the onset of ESY services for the current school year unless there is sufficient data to make that decision prior to January.

B. After examining the student's performance data one of the following decisions shall be made:

1. the student is eligible for services;

2. the student is eligible for services, and the parent declines;

3. the student is ineligible for services; or

4. ESY determination of eligibility will be made later during the same school year.

C. When the student is determined eligible for ESY services, the team must complete the ESY form of the IEP.

D. When the IEP Team decides not to make a determination it shall be documented on the IEP and the ESY decision must be prior to the start of ESY services.

E. When the student is determined ineligible for ESY services based on student performance data, the parents must receive notification of the determination and informed of their due process rights and procedures.

F. When consensus regarding ESY eligibility or services cannot be reached and the parents disagree with the decision, the parents shall be informed of their due process rights and procedures.

G. If the parents of a student with disabilities decline extended school year services, this does not affect other IEP services. ESY does not apply to students who are gifted and/or talented or students on Services Plans.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2346 (November 2009).

§709. Provision of ESY Services

A. It is the responsibility of the special education administration to schedule the specific days of the week and the beginning and ending date options to accommodate each student's ESY services. As indicated throughout this process, duration is based on the individual needs of the student.

1. Regression-Recoupment Criterion (R-R). The emphasis will be on the maintenance of essential skills. The breaks between ESY and the regular school year should not exceed the break periods upon which the student qualified for ESY services.

2. Critical Point of Instruction 1 (CPI-1). The emphasis will be on the skills the student needs in order to prevent loss of general education time or to prevent an increase in special education service time. The length of time will be based on the number of skills the student must acquire to maintain his LRE.

3. Critical Point of Instruction 2 (CPI-2). The emphasis is on acquisition or maintenance of critical skills. The number of sessions per week will be dependent upon whether the specific student needs acquisition or maintenance. Acquisition programs are usually shorter with more sessions per week, while maintenance programs are often longer in duration with fewer sessions per week.

4. Special Circumstances (SC). The emphasis of the ESY services is on mastery of specifically targeted goals and objectives to assist in ensuring the student will be on track to achieve his or her measurable annual goals. The sessions/week and duration of the extended school year services will depend upon which and how many goals and objectives have been targeted and the lack of expected progress toward the achievement of the annual goals during the last school year.

B. The focus of a student's ESY services would be based on the needs identified.

1. The IEP Team determines the services the student will need to receive during the extended school year and which personnel will be needed to provide the services.

2. Not all students need the same program length. Extended school year services are an individual, student-based decision.

3. There is no minimum or maximum number of goals and objectives to be identified for ESY instruction. The number of objectives identified for ESY instruction is based on individual student needs. The major purpose of ESY services is to extend instruction from the regular school year to maintain FAPE. The ESY is not a program aimed at remediating all areas of deficit.

a. If the IEP Team determines that a new goal and/or objectives are needed for ESY, then the IEP shall be amended and a new goal and/or objective written.

C. Location

1. The IEP Team discusses the location where the ESY service should take place to implement each ESY goal and/or the objectives/benchmarks. One or more locations may be recommended. The LEA shall determine the most reasonable location(s) for the provision of ESY services.

a. When the location selected is home, indicate the number of minutes under Community on the time-frame grid.

D. Date ESY to Begin

1. The amount or duration of ESY services cannot be unilaterally limited for all students. When planning ESY services, it would be appropriate to consider the LEA's summer calendar. When the LEA's summer calendar is not available at the time of the IEP Team meeting where ESY services are being discussed, the team may estimate the date to begin based on the duration of services determined to be needed by the student.

a. The IEP Team should discuss conflicts that could interfere with the student's attendance during the ESY. For example, there may be a family vacation or surgery scheduled. This information should be taken into account in scheduling the student's ESY services.

b. When a student meets eligibility criteria for ESY services under R-R, the breaks between regular school year and ESY services should not exceed the break periods used to determination eligibility.

E. Duration

1. The length of time ESY services is provided.

2. The criteria/criterion by which the student was determined eligible and the goals and/or objectives/benchmarks chosen to be addressed during the ESY services should dictate the duration of services.

F. Progress Reports

1. LEAs shall ensure that instructional personnel measure and report student outcomes. The student's progress toward achieving the measurable goal(s) during ESY services shall be recorded on the ESY form. A copy of the form with student progress indicated shall be sent to the parents within ten business days after the completion of ESY services.

2. A copy of the ESY form with the completed progress report information shall be placed in the student's IEP folder.

G. Transportation

1. Transportation shall be offered when necessary. As with other services, the IEP Team should recommend transportation services in the least restrictive, most appropriate mode available. The transportation recommended shall be reasonable and at no cost to the parents. Mileage reimbursement may be used as a transportation option only when the parents are willing to transport their child.

2. There may be cases in which students shall remain at a site longer than the time indicated on the ESY form of the IEP because of transportation limitations. When this is the case, the student shall be supervised at all times. The student's need to remain at the site because of transportation limitations shall be indicated in the comment box on the ESY form.

H. Evaluation

1. LEAs shall evaluate ESY services outcome data to determine overall effectiveness.

a. Effectiveness should be reflected in the match between the needs of the student and the services provided.

b. Effectiveness should be reflected in the criteria by which the students were determined to be eligible and whether the students mastered or maintained the goals/objectives/benchmarks chosen during the delivery of ESY services.

c. Effectiveness is evaluated from the individual student perspective, as well as system-wide.

d. Program operations should be examined to determine the effectiveness of the ESY services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2346 (November 2009).

Chapter 9. Services Plans for Parentally Placed Students in a Private School

§901. No Individual Right to Special Education and Related Services

A. No parentally placed private school student with disabilities has an individual right to receive some or all of the special education and related services that the student would receive when enrolled in a public school.

B. When a student with disabilities is enrolled in a religious or other private school by the student's parents and will receive special education or related services from an LEA, the LEA shall:

1. initiate and conduct meetings to develop, review, and revise a *Services Plan* for the student;

2. ensure the attendance of a representative of a private school when the student is voluntarily enrolled in a private school. When the representative cannot attend, the LEA shall use other methods to ensure participation by the private school or facility, including individualized or conference telephone calls.

3. Parentally placed private school students with disabilities may receive a different amount of services than students with disabilities in public schools.

4. Students with disabilities aged three-through-five are considered to be parentally placed private school students with disabilities when enrolled by their parents in private, including religious elementary schools, that meets the definition of elementary school in *Bulletin 1706/Subpart A-Regulations for the Implementation of the Children with Exceptionalities Act* §905.

C. When the LEA opts to provide special education services to students identified as gifted and/or talented, the Services Plan may be used to identify the services.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2347 (November 2009).

§903. Services Provided in Accordance with a Services Plan

A. Students with disabilities who have been designated to receive services shall have a Services Plan that describes the specific special education and/or related services that the LEA will provide to the student as determined through the consultative process.

1. The services plan to the extent appropriate will be developed, reviewed, and revised in accordance with the rules and regulations pertaining to the IEP as stated in this document.

2. For any additional questions regarding services for students with disabilities enrolled by parents in private school go to idea.ed.gov, and click on the Q and A documents.

AUTHORITY NOTE: Promulgated in accordance with R.S. 17:1941 et seq.

HISTORICAL NOTE: Promulgated by the Board of Elementary and Secondary Education, LR 35:2347 (November 2009).