Title: Secure Care SAVRY

Type: B. Classification, Sentencing and Service Functions

Sub Type: 2. Classification

Number: B.2.14

Page 1 of 7

References:
US DOJ PREA Standard 115.341 (a); 2-CO-4A-01, 2-CO-4B-01 (Administration of Correctional Agencies); 4-JCF-3A-25, 4-JCF-3D-03, 4-JCF-3D-05, 4-JCF-3D-06-6, 4-JCF-4E-01, 4-JCF-4E-03, 4-JCF-5A-01, 4-JCF-5B-01, 4-JCF-5C-03 (Juvenile Correctional Facilities); YS Policies B.2.1 "Assignment, Reassignment, and Release of Youth", B.2.2 "Youth Classification System and Treatment Procedures", B.2.3 “Secure Care Intake”, B.2.16 “Assessment and Treatment of Youth Who Demonstrate Sexual Behavior Problems”, B.2.18 “Reintegration Process”, C.4.1 "Furlough Process", and D.9.13 “Case Assessment Process for Secure Care Placement”

STATUS: Approved

Approved By: William A. Sommers, Deputy Secretary

Date of Approval: 02/01/2022

I. AUTHORITY:

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

II. PURPOSE:

To set forth uniform policy and broad procedures governing the use of the SAVRY instrument.

III. APPLICABILITY:

Deputy Secretary, Assistant Secretary, Chief of Operations, Secure Facilities Director, Executive Management Advisor, Regional Directors, Director of Treatment and Rehabilitation, Facility Directors, Regional Managers, all YS employees, and Contracted Health Care Provider (CHP) staff assigned to make decisions concerning custody levels, furloughs and early release recommendations.

Facility Directors are responsible for developing written standard operating procedures to implement this policy.
IV. DEFINITIONS:

**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 youth’s identified needs.

**Community Based Services (CBS)** - Includes all regional probation and parole offices located throughout the state.

**Continuous Quality Improvement Services (CQIS)** – The Central Office performance-based and results-driven competency and efficiency management system.

**Individualized Intervention Plan (IIP) – Initial and Formal** – A statement of goals, objectives, and the methods used to obtain them that is created for each youth in secure care. The IIP is dynamic and is updated depending on the identified needs and specialized treatment required while in secure care. The IIP also identifies follow-up services needed by the youth on release and is coordinated with Community Based Services to provide the proper level of aftercare.

**Juvenile Electronic Tracking System (JETS)** – The centralized database used to track all youth under OJJ supervision or custody and to record youth case record activity.

**Progress Report** - A report submitted to youth’s court of jurisdiction on a quarterly basis specifying the youth’s SAVRY risk rating, and progress or status in the following areas: social/family/and interpersonal issues; behavioral adjustment; substance abuse; education/vocational/employment, peer/prosocial/recreational activities; mental health/medical issues. The report shall also include, (in the recommendation section of the form), the specific plan and Providers in the community where needed services could be obtained, if the youth would be released from secure custody, as well as recommendations by secure care/CBS staff concerning furloughs, modifications of disposition, early release and the justification for the recommendation.

**Quarterly Staffing** - A multidisciplinary treatment team meeting which occurs on a quarterly basis (no later than the last day of the third month following the previous quarterly staffing) between all staff working with or treating a youth for their specific needs. The youth’s family shall be encouraged to attend as well. The quarterly staffing addresses a youth’s IIP and helps monitor the youth’s progress, reveal any problem areas that need attention, discuss Code of Conduct violations during the quarter, and discuss interventions that can be utilized to change/alter the youth’s behavior; as well as eligibility for escorted absence, furlough, reassignment to non-secure or early release.
**Structured Assessment of Violence Risk in Youth (SAVRY)** - An evidence-based assessment designed to assist professionals in making judgments about a youth’s needs for case planning. The SAVRY utilizes a structured, professional judgment method of assessment, meaning the individual completing the assessment rates the youth on a number of evidence-based risk factors and then weighs all the information to come to a final judgment that the youth has a Low, Moderate or High Risk for future reoffending.

**Training Records Entry Completed (TREC)** – The database used to track training hours of some YS employees at some secure care facilities.

V. **POLICY:**

It is the Deputy Secretary’s policy that individual youth program planning shall encompass a concern for the primary objectives of providing protection for the public, staff, and youth, reducing the risk of delinquent behavior, and enhancing youth growth and development.

This may be accomplished through using evidenced based instruments to help determine the risk/needs of the youth. The SAVRY is used as a guide in professional risk assessments and intervention planning for violence and delinquency risk management in youth. The SAVRY assessment and subsequent reassessments provide emphasis on dynamic risk factors of youth, and aid in the development of an Individualized Intervention Plan, a reintegration planning, and in determining reassignment or early release recommendations.

VI. **PROCEDURES:**

A. Upon admission into secure care, the current SAVRY assessment rating form completed by CBS shall be forwarded to the intake staff at the assigned secure care facility along with all other information included in the packet. (Refer to YS Policy D.9.13).

If a youth is placed in YS custody and immediately assigned to a YS secure facility, prior to the PPO/J completing the SAVRY assessment, the PPO/J shall complete the SAVRY Social History and SAVRY Assessment within five (5) days. The PPO/J shall forward the documentation to the Secure Care Case Manager upon review and approval by the PPS/J.

B. The Case manager shall use information obtained from the SAVRY Assessment, social history, psychological and psychiatric evaluations, school records, etc. to develop the initial “Individualized Intervention Plan” in JETS within seven (7) days of the youth’s assignment to a YS secure care facility.
The SAVRY assessment includes social/contextual and individual/clinical risk factors that are dynamic, or subject to change. Risk factors are addressed in specific Need Areas (Disruptive Behavior, Substance Abuse, Family, Mental Health, Education, Peer, Community) to assist with case planning.

No more than three (3) need areas shall be identified on the IIP at any time. The Case Manager shall prioritize risk factors rated as “High” (especially critical) on the current SAVRY assessment to target for intervention and include in the IIP. If three (3) “High” risk factors are not indicated on the SAVRY, “Moderate” risk factors shall be included. The Case Manager shall include the interventions that will be instituted along with who is responsible for providing the intervention in the IIP. (Refer to YS Policy B.2.2).

C. SAVRY Reassessments – Secure Care

1. The Case Manager shall complete the SAVRY Reassessment and Supervision form in the following circumstances:

   a. 90 days – Quarterly Staffing:
      Every 90 days, the Case Manager shall complete the SAVRY Supervision/Level form in JETS identifying the supervision level of “secure”, with the next review date of 90 days.

   b. 6 months – SAVRY Reassessment and Quarterly Staffing:
      Every 6 months, the Case Manager shall complete the “SAVRY Reassessment – Secure” form in JETS.

      When the reassessment is completed, the Case Manager shall also complete a SAVRY Supervision Level/Change form in JETS (as explained above in Section VI.C.1.a).

      The Case Manager will follow these timelines throughout the youth’s assignment to a YS secure care facility.

2. The Case Manager shall forward all completed SAVRY Reassessment and Supervision form to their immediate supervisor for review and approval via electronic signature in JETS.

D. The SAVRY is NOT intended to predict reoffending risk for youth below the age of 12 or sex offenders based on past behavior and experiences. Do not use the SAVRY as a means to estimate risk of sexual reoffending. The SAVRY estimates risk for general violence and general delinquent reoffending only. Many sex offenders are low risk for general violence and general delinquent reoffending. This does NOT mean they are low risk for reoffending sexually. (Refer to YS Policy B.2.16 for psychosexual assessment).
E. In addition to case planning, the SAVRY Reassessment plays a vital role in placement recommendations during the Quarterly staffing process, furlough and early release consideration for all youth in secure care. Reassessments should focus on changes that have occurred in the dynamic risk factors that might lessen or exacerbate risk.

Youth who receive a summary risk rating of “Low” or “Moderate” should be considered for placement in a less restrictive setting. Youth who have a summary risk rating of “High”, may be considered as well. It is important to consider individual risk factor ratings to assist in placement recommendations. Consideration should be given to individual “high” risk ratings and especially “critical” that may indicate continued secure placement is warranted. It is important to note that the SAVRY is just one tool that should be used in assisting in placement recommendations. (Refer to YS Policies B.2.1 and C.4.1).

F. The current SAVRY Summary Risk rating, identified need areas, specific interventions and progress will be provided to the court in the “Progress Report”.

The completed SAVRY Assessment rating form SHALL NOT be provided to the court or anyone outside of YS. The specific individual risk and protective factor ratings SHALL NOT be outlined or included in any report.

VII. TRAINING AND STAFF DEVELOPMENT

A. Only YS employees who have completed the required SAVRY training shall complete, review or approve a SAVRY Assessment or Reassessment.

B. A documented three (3) day workshop received from either the author of the SAVRY tool, other qualified trainer or designated master trainer must be attended by all YS staff required to complete or approve SAVRY assessments or reassessments. This training shall be entered into the Training Records Entry Completed (TREC) or the Louisiana Employees Online (LEO) database.

C. Documented ratings on a minimum of four (4) standardized practice cases must have occurred, with feedback on ratings from a master trainer, prior to staff utilizing the tool. Documentation shall be maintained by the SAVRY Master Trainer.

D. Documented individual feedback from a master trainer for staff with more than an acceptable number of “incorrect” responses, shall be maintained by the SAVRY Master Trainer.
E. All staff responsible for completing a SAVRY assessment/reassessment shall receive additional documented training on the following policy issues:

1. YS Policy regarding when and for what cases the initial SAVRY risk/needs assessment and subsequent reassessments are to be conducted.

2. How the SAVRY Summary Risk rating and identified Needs are to be communicated in reports to the court.

3. How the results of a SAVRY assessment or reassessment should be used to select appropriate referrals and ongoing case management.

4. How the result of the SAVRY assessment or reassessment should be used to assist in placement, furlough and early release recommendations.

5. All policy training shall be entered into the TREC or LEO database.

F. Documented SAVRY booster trainings shall be conducted by a master trainer twice per year and shall be accomplished in one of two ways:

1. Utilizing another standardized practice case that all staff shall complete and receive feedback on from a master trainer; or

2. Utilizing a documented case presentation conducted during a staff meeting, where all staff score/rate the case with discussion about the most appropriate ratings.

Following either case rating, the SAVRY booster training shall include a discussion about how the results of the assessment should be used for case management in that particular case, updating the IIP and placement or early release consideration. All booster training shall be entered into the TREC or LEO database.

G. Staff with more than an acceptable number of “incorrect” item ratings at a booster training shall receive additional documented individual feedback from a master trainer, and shall complete an additional case to discern whether or not there has been improvement. The additional one-on-one training shall also be entered into the TREC or LEO database, and maintained by the SAVRY Master Trainer.

H. Each facility shall have two master trainers who shall receive extensive training of the SAVRY Risk Assessment. Additional trainers may be considered based upon the size of the facility and due to the potential turnover of master trainers.
VIII. QUALITY ASSURANCE – SECURE CARE

A. Quarterly JETS reports are available in Sharepoint. Facility Directors, Facility Treatment Directors and all Social Services Supervisors shall review to insure the following:

1. Youth are being reassessed every six months.

2. Review assessment of all SAVRY Summary Risk ratings by a Case Manager to insure staff is not routinely assigning a single risk category (e.g., all youth assigned come up as “Low”, “Moderate” or “High” Risk).

3. Review SAVRY assessments to ensure staff is not marking items as critical that they rated as “Low” or “Moderate”. Only items rated as “High” should be marked as critical items, and not all items rated as “High” will be critical risk factors.

4. The Facility Treatment Director shall review the SAVRY risk and identified need areas to insure youth are receiving the appropriate interventions and level of treatment.

5. Review SAVRY risk ratings and identified need areas to insure the reintegration plan addresses the appropriate interventions and level of treatment upon discharge/exit.

IX. QUALITY ASSURANCE – CENTRAL OFFICE

CQIS and the Director of Treatment and Rehabilitation shall be given Sharepoint access to the quarterly SAVRY reports generated from JETS.

Previous Regulation/Policy Number: B.2.14
Previous Effective Date: 01/16/2020
Attachments/References: