

**DEPARTMENT OF JUVENILE JUSTICE**

**AND DELINQUENCY PREVENTION**

**Monitoring Review Report for**

**Juvenile Structured Day**

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| **PROGRAM INFORMATION** |
| County: |       |
| Sponsoring Agency: |       |
| Component Name: |       | Component Funding ID #: |       |

**Type of Structured Day Program** (Check one.)

*[ ]* Partial Day program operates at least 4 days per week for 3 or more hours per day.

 16. Juvenile Structured Day, C. b. i.

[ ]  Full Day program operates at least 5 days per week for 6 or more hours per day.

 16. Juvenile Structured Day, C. b. ii.

**Service Delivery**

[ ]  The program maintains 2 adult, direct services staff on duty supervising no more than 12 juveniles. Six additional juveniles may be served for each additional direct services staff person.

 16. Juvenile Structured Day, C. d

[ ]  Within 5 business days of receiving each referral, the program made initial contacts with referred juveniles and provided response to the referring agency.

 16. Juvenile Structured Day, C. g. b.

[ ]  The average optimal weeks and contact hours are within parameters specified for the SPEP Service Type indicated in the program agreement. Reference Appendix B: Dosage Parameters Cross Walk for JCPC-SPEP Service Types. 16. Juvenile Structured Day, C. c.

[ ]  The program has a protocol manual that details the structure, format and content through which program services are delivered, evaluated and maintained.

 2. Program Operational Requirements C. 2.

**Comments:**

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**Staff Recruitment**

## [ ]  The program follows all State and Federal workplace rules when recruiting, hiring and supervising full-time and part-time staff, including the recruitment and training of volunteers.

2. Program Operational Requirements, H. 1. b.

[ ]  The program has employment policies and procedures related to staff employment and supervision responsibilities. These policies include criteria regarding an individual’s eligibility for employment, contracting for services, volunteering and internships which keep in consideration the nature of the services to be delivered and the juveniles served.

2. Program Operational Requirements, H. 1. d.

[ ]  There is a personnel file for all full-time staff, part-time staff, volunteers, interns, and contractor(s) containing:

[ ]  A written job description detailing the primary duties and expectations of the position including those specifically related to the delivery of DPS JCPC-funded program services; and stating the minimum education and experience requirement.

 2. Program Operational Requirements, H. 1. f. i.

[ ]  A signed copy of the Contract for Professional Services Template (Form JCPC/PO 001).

 2. Program Operational Requirements, H. 1. f. ii.

 NOTE: Applies only to programs utilizing contractors to provide professional services.

[ ]  A completed Program Volunteer Application Template (Form JCPC/EA 001).

 2. Program Operational Requirements, H. 1. f. iii.

 NOTE: Applies only to programs utilizing volunteers.

[ ]  An annual performance evaluation to measure performance of duties.

 2. Program Operational Requirements, H. 1. f. iv.

 NOTE: Interns, volunteers and contractors are exempt from this requirement.

[ ]  A criminal background check that provides a clear record of any criminal conviction(s).

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|  2. Program Operational Requirements, H. 1. f. v.[ ]  Reference checks. 2. Program Operational Requirements, H. 1. f. vi.[ ]  An annual driver’s license history and/or drug screen history is available for all staff, interns, contractors, and volunteers who may transport juveniles or required to drive as  part of their duty assignment. 2. Program Operational Requirements, H. 1. f. vii.**Comments:**       |

# [ ]  Proof of education requirements from an accredited institution for the specific position.

 2. Program Operational Requirements, H. 1. f. viii.

[ ]  Current licensure and/or certification requirements, when applicable.

 2. Program Operational Requirements, H. 1. f. ix.

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| **Comments:**       |

# **General Qualifications**

[ ]  Education Oversight and Collaboration has staff that are North Carolina certified teacher(s) and provide a link between the Structured Day program and the juvenile’s home school.

 16. Juvenile Structured Day, D.1. b).

[ ]  The Program Manager has at least a Bachelor’s degree in a human services or related field, or a 4-year degree in any other field with at least 2 years experience as a direct service professional in a juvenile serving agency. 16. Juvenile Structured Day, D. 1. C).

[ ]  Program Staff have at least an Associate’s degree in a human services field, or a high school diploma with at least 1 year of Human Services experience. 16. Juvenile Structured Day, . D 1. d).

[ ]  Staff who are responsible for regular case oversight and supervision have at least a Bachelor’s degree in a human services field or related field, unless supervised by an individual meeting that criterion. 16. Juvenile Structured Day. D. 1. d.

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| **Comments:**       |

**Licensure/Certification Requirements and Notification**

***NOTE: This is a Critical Standard and applies to all JCPC funded programs.***

[ ]  Professionals providing direct services requiring licensure/certification are licensed and/or certified by the appropriate licensing or certification board(s) in their respective fields and in good standing with their respective governing board.

 2. Program Operational Requirements, H. 2. a. i..

[ ]  Licensure(s)/Certification(s) are current. 2. Program Operational Requirements, H. 2. a. ii.

[ ]  Licensure or certification violations are reported to the licensing board and DPS Consultant within 30 days of a violation being identified. 2. Program Operational Requirements, H. 2. a. iii.

**NOTIFICATION**

***NOTE: This is a Critical Standard and applies to all JCPC funded programs***

[ ]  In the event any program that has a staff member who is under investigation for any offense or conduct that may result in an action against a license or certification to practice must notify the DPS Area Office assigned to that county within three (3) business days when the investigation begins.

 2. Program Operational Requirements, H. 2. b. i.

[ ]  In the event any program that has a staff member who is under investigation for any abuse and/or neglect or who is charged with a criminal offense must notify the DPS Area Office assigned to that county in writing immediately.

 2. Program Operational Requirements, H. 2. b. ii.

[ ]  In the event any program that has a staff member whose license or certification to practice is suspended or revoked, or otherwise disciplined must notify the DPS Area Office assigned to that county in writing within three (3) business days of the revocation, suspension, or disciplinary action. 2. Program Operational Requirements, H. 2. b. iii.

[ ]  All items listed above under *Notification*: the agency must take immediate steps to ensure the safety of the juveniles. Active caseloads must be transferred to other qualified professionals or staff. The Program shall update the DPS Area Consultant with any progress made in the investigation. 2. Program Operational Requirements, H. 2. b. iv.

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| **Comments:**       |

# **Volunteer Program Staff**

# [ ]  Volunteers providing direct service have at least 1 year of experience working with at-risk youth.

 16. Juvenile Structured Day, . D 1. e.

[ ]  Each volunteer position has a job description. 16. Juvenile Structured Day, D. 1. e. i.

[ ]  A completed Program Volunteer Application *(Form JCPC/EA 001),* including 4 references has been provided, contacted, and documented on the completed form for each volunteer.

 16. Juvenile Structured Day, D. 1. e. ii.

[ ]  Each volunteer has been screened and the program determined that the volunteer possesses credentials/skills/experience commensurate to the requirements of the job description.

 16. Juvenile Structured Day D. 1. e. iii.

For each volunteer who is involved in supervision or transportation of juveniles, the program has:

16. Juvenile Structured Day, D. 1. e. iv.

# [ ]  A criminal background check is on file,

[ ]  A valid driver license is on file (a copy must be annually updated and on file); and

 [ ]  A drivers records check is on file.

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| **Comments:**       |

**Staff and Volunteer Orientation and Training**

[ ]  Orientation and training on policies, procedures, rules and regulations of the program and DPS are provided to program staff and volunteers within 30 days of employment.

 16. Juvenile Structured Day, D. 2. a.

[ ]  The program maintains documentation of program orientation and staff trainings.

 16. Juvenile Structured Day, D. 2. a.

[ ]  Program offers training opportunities for on-going development of service specific skills and knowledge. 16. Juvenile Structured Day, D. 2. b.

[ ]  Volunteers complete pre-service training specific to this program type prior to providing direct services to juveniles. 16. Juvenile Structured Day, D. 2. b.

[ ]  Programs providing treatment services employ staff who are eligible by degree or credential to provide such treatment, or who receive clinical supervision by someone who is eligible to provide such treatment. All professional and volunteer staff members, who lead program activities that require special skills or certification, are trained in the skills necessary for each particular activity. 16. Juvenile Structured Day, D. 2. c.

[ ]  Direct service staff shall participate annually in at least 12 hours of professional continuing education in an area related to the service type provided. 16. Juvenile Structured Day, D. 2. d.

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| **Comments:**       |

**Juvenile Records**

[ ]  The program has a written record for each juvenile admitted to the program.

 2. Program Operational Requirements, D. 3.

[ ]  Juvenile records are stored in a secure location. 2. Program Operational Requirements, D. 2.

[ ]  Juvenile records are maintained for a period of 5 years after the termination date.

 2. Program Operational Requirements, D. 2.

Participation Agreement includes: 2. Program Operational Requirements, D.5.b.

 [ ]  Name of the sponsoring agency and program name

[ ]  Program guidelines, requirements, and projected dates of completion

[ ]  Signed consent of parent(s)/legal guardian(s) for participation in the program

[ ]  Specific requirements of the parent(s)/legal guardian(s) and each family member, if applicable

[ ]  Results of any non-compliance

[ ]  The program has completed a written termination summary for each juvenile within 10 business days of termination from the program. 16. Juvenile Structured Day, i. Terminations, b.

[ ]  The program has submitted a copy of the termination summary for each juvenile within 10 business days of termination from the program to the parent(s)/legal guardian, Court Services, if applicable and other referring entities as appropriate. 16. Juvenile Structured Day, i. Terminations, b.

 [ ]  A copy of the termination summary is included in juvenile files.

 2. Program Operational Requirements, D. 5. o. and 16. Juvenile Structured Day, i. Referrals/Admissions/Terminations, b.

The termination summary includes:

16. Juvenile Structured Day, i. Referrals/Admissions/Terminations, b. i. – iii and i. Referrals/Admissions/Terminations, d. i. – ii.

 [ ]  Activities, results and recommendations

 [ ]  Date of last contact

 [ ]  The reason for termination

[ ]  Names of persons and agencies receiving notice of the termination

[ ]  The name of the program staff person completing the documentation.

[ ]  As needs were identified, the program developed (in collaboration with the juvenile, parent/legal guardian, juvenile court counselor, and/or other referring entities), prior to termination, an aftercare/termination service plan for each juvenile.

 16. Juvenile Structured Day, i. Referrals/Admissions/Terminations, j.

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| **Comments:**       |

[ ]  A review of 10 active and 10 terminated client records (randomly selected) has been conducted by the monitor. (If a program has less than 10 records in either category, review all records in that category.) The completed record review sheets for this component are attached.

 3. Program Oversight and Monitoring, D. 1. c. i – iii. and D. 2. a. i. – iii..

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| **Active Client File Review** | **All Programs** | **Structured Day** |
| **Client Name** | Admission Date (matches client tracking) | Referral Form | Referral Source (matches client tracking) | Referral Reason (matches client tracking) | Parental Consent to Participate | Medical / Medication Information (if applicable) | Consent for Release of Information (if applicable) | Individual Service Plan - ISP n/a for assessment only programs | ISP shows expected changes in behavior, attitude, performance, and/or skills  | ISP shows Interventions / Activities to be provided | ISP shows expected duration of services | ISP shows how progress/changes will be measured | Contact Record with activities, dates, times, duration, results each time the youth and/or family is seen | Hard Copy of Client Tracking Data in Record | Copy of Progress Reports to Juvenile Court Counselors at least every 30 days (if applicable) |  |
| 1.        | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| 2.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| 3.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| 4.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| 5.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| 6.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| 7.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| 8.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| 9.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| 10.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |  |
| **Terminated Client File Review** | **All Programs** | **Structured Day** |
| **Client Name** | Termination Date (matches client tracking) | Referral Form | Referral Source (matches client tracking) | Referral Reason (matches client tracking) | Parental Consent to Participate | Medical / Medication Information (if applicable) | Consent for Release of Information (if applicable) | Individual Service Plan - ISP n/a for assessment only programs | ISP shows expected changes in behavior, attitude, performance, and/or skills  | ISP shows Interventions / Activities to be provided | ISP shows expected duration of services | ISP shows how progress/changes will be measured | Contact Record with activities, dates, times, duration, results each time the youth and/or family is seen | Hard Copy of Client Tracking Data in Record | Copy of Progress Reports to Juvenile Court Counselors at least every 30 days (if applicable) | Termination Summary with date and reason for termination (matches client tracking) |
| 1.        | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 2.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 3.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 4.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 5.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 6.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 7.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 8.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 9.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |
| 10.       | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  | [ ]  |

**Record Review Comments:**

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**Summary of Comments:**

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