

IDJC Classification and Case management

IDJC Levels of Care & Custody

Public safety is an obligation of all juvenile justice agencies. This obligation is especially difficult for agencies that must balance demands for public safety with resource concerns and the desire to rehabilitate offenders. Recognizing that virtually all juvenile offenders will return to the community, most to their families, and that the time under the authority of the juvenile justice system carries with it an obligation to provide needed treatment, each juvenile's time in custody must be better spent than merely controlling and managing offenders' behavior.

The question becomes 'How are decisions regarding placement, service levels, and the identification of treatment targets made by agencies seeking to best satisfy what are often considered conflicting goals?'

Generally called case classification, juvenile justice agencies devote considerable resources toward the development and utilization of information capable of informing and guiding such decisions. Reductions in offender recidivism rates are a primary focus of juvenile justice agencies. Recidivism reductions are a means by which to achieve public safety (Gendreau and Cullen, 2000) and are used as an outcome measure to assess the effectiveness of rehabilitation programs (Jones, 1996).

The crux of classification involves the assessment of offender risk and needs (Bonta, 1996). Agencies must assess, classify, and treat offenders based upon those factors actually related to offending if they are to reduce the likelihood of re-offending.

In the absence of formal actuarial tools for these tasks, practitioners rely on professional judgment that is based on their experiences, knowledge, and philosophies regarding delinquent behavior. While professional judgment should play a role in classification and case-management, when it is the sole means for such decisions, it can result in wide disparity in the disposition of cases, and how resources are allocated.

The IDJC Classification and Case Management process promotes informed decision making by providing:

- A consistent structure for making placement and case management decisions;
- A validated tool, that if used properly helps to assure integrity in the placement/case management process;
- Criteria for decisions that are more open and obvious for stakeholders;

- The capacity to consider risk management as one element in placement decisions;
- Tools to support the optimal use of department resources; and
- Tools that contribute to measurable outcomes related to decisions made.

Three types of classification instruments are used for these purposes: risk assessment, needs assessment and placement or custody assessment. Although elements of all three types of classification are incorporated into IDJC's classification system, the primary purpose of those tools is placement or custody assessment.

Placement or Custody Assessment may include predictive items but are generally driven by short-term policy decisions related to public safety rather than long-term recidivism concerns. These instruments typically include measures of current and prior offense severity and factors related to criminogenic risk and need.

IDJC uses the Initial Custody Level Assessment (ICLA) and Progress Assessment-Reclassification (PA-R) to guide placement from Observation & Assessment (O&A) to an appropriate level of custody and care, and to guide decisions about movement of juveniles to higher and lower levels of care based upon their documented progress in their assigned treatment programs.

The Initial Custody Level Assessment (ICLA) is only a guide for placement from Observation and Assessment (O&A) to an appropriate level of custody and care, or to provide a clear basis for override. The Progress Assessment/Reassessment (PA/R) tool helps the department document progress made; and, thus, also helps to justify recommendations for release or transfer to lower levels of custody and care. These classification tools offer one source of information to support decisions made in partnership with community and facility treatment teams.

The Levels of Care and Custody defined in this document are closely related to the classification system and are intended to help avoid the "compartmentalizing" of juveniles strictly by diagnosis. IDJC's concern has been that such compartmentalizing has contributed to the need for multiple placements and increased lengths of stay for individual juveniles. The Levels of Care and Custody document describes the five levels of custody driven by the classification system. Cut-off scores were established and tested to determine the percentage of juveniles to be managed at each custody level.

LEVELS OF CARE AND CUSTODY

The purpose of this document is to **DESCRIBE** the conditions of custody, care and treatment at different levels based upon assessed juvenile risk and need.

The following information applies to all five Levels of Care and Custody and should be considered minimum procedures and practices across all levels. Those items that distinguish one level from another will be specifically described by level.

The purposes of all five Levels of Care and Custody are to:

- Teach and reinforce safe behavioral controls.
- Address specific risks and needs identified in the assessment provided by the department.
- Provide these services at the lowest appropriate level of care possible.
- Thoroughly consider and specifically plan for the safety of victims and potential victims in moving juveniles through these levels back to the community.

While the descriptions which follow identify the levels as distinct, it is recognized that juveniles and programs function within a range of needs and levels. All of the programs operated by or contracted with the department must be prepared to manage acting-out behavior, regardless of the custody level of the program. Juveniles classified outside of the custody level limits of a program should not be accepted for care without specific, written plans, developed in advance, for dealing with changes in the circumstances that supported the placement decision.

Juveniles may be placed at higher levels of care and custody than indicated by the classification tools without the need for a formal **OVERRIDE** as long as there is documentation of the circumstances supporting the placement decision.

Juveniles may be placed at lower levels of care and custody than indicated by the classification tools. In these cases, an **OVERRIDE** of the custody level is required and must include a detailed justification that outlines why the chosen level of care, considering both risk and need as documented, is the best option for the juvenile.

LEVEL 5 – MAXIMUM RISK

Purpose of a Level 5 Facility

- Teach and reinforce safe behavioral controls.
- Level 5 facilities are reserved for long-term juveniles who have demonstrated a documented pattern of violence or other serious incidents of non-compliance within a level 4 facility.
- Administrative due process is afforded juveniles at the time of transfer to a Level 5 facility because of the very limited services resulting from this assignment.

Operational Description (Specific terms will be established in each contract.)

- Locked secure setting.
- Intensive staff supervision 24 hours per day.
- Staffing ratios should be a minimum of 1:8 during waking hours and at least 2 staff on duty during sleeping hours.
- Jails and detention facilities must provide staff ratios consistent with state and federal rules and regulations.
- Close monitoring of juveniles isolated in their rooms is mandatory in order to minimize the risk of self-harming behavior.
- On-site nursing services must be available at least 12 to 16 hours per week. This number of hours may be reduced by 50% for facilities with 12 beds or less.
- Routine health and mental health (medication monitoring) services must be provided on-site under the highest levels of supervision.

Assignment Criteria

- Juveniles identified as not being able to benefit from treatment based on the following criteria:
 - Age
 - Criminal history.
 - Length of stay.
 - Documented history of serious incidents of violence, escape or repeated non-compliance that threatens the safety and security of a lower level facility.
 - Juveniles experiencing serious mental health needs may require a level of services beyond those typically available at a level 5 facility.
- Education, health, and mental health services as required by state and federal rule and regulation.
- Limited additional services that allow the juvenile to earn transfer to a lower level of care.
- Maximum supervision and control.

Program Services and Delivery

- Minimal levels of counseling will be provided.

- Group work will focus on managing behaviors and group living tasks.
- No routine activities in the community are authorized.
- Education and/or vocations must be offered on site for those with an Individual Education Plan (IEP) under the highest levels of supervision.

LEVEL 4 – HIGH RISK

Purpose of a Level 4 Facility

- Teach and reinforce safe behavioral controls and begin to address the specific risks and needs identified in the O&A and included in treatment plan.
- Provide academic services including remedial and special education services.
- Provide older juveniles with the opportunity to develop basic job skills and job market entry preparation.
- Provide high levels of mental health care that may require attention from licensed professionals.
- May provide residential substance abuse treatment.
- May provide offense specific services for juveniles with sexually abusive behavior, assessed to present moderate to high risk for re-offending, and who have not substantially completed work on these issues. The program must provide supervision designed to protect the community.

Operational Description (Specific terms will be established in each contract.)

- Locked secure setting or high level of staff supervision in addition to a therapeutic culture.
- High levels of staff supervision 24 hours per day.
- Services offered are comprehensive and not limited to confinement and behavior management.
- Must provide some degree of closely supervised community contact.
- Staffing ratios must meet the requirements of applicable Administrative Rules for contract facilities. They must also be clearly described in the program description and/or contract.
- Case managers and/or counselors must be provided at the ratio required by applicable Administrative Rule and be clearly described in the contract and/or program description for contact providers.
- On-site nursing services must be available no less than 16 hours per week. This number of hours may be reduced by 50% for facilities with 12 beds or less.
- Routine health and mental health services must be provided on-site.
- Juvenile sexual offenders served at this level should be housed in individual rooms.

Assignment Criteria

- Documented pattern of violence or juveniles who have been adjudicated for numerous or serious crimes in the community.
- Documented history of serious incidents of violence, escape or repeated non-compliance that threatens the safety and security of a lower level facility.

Case Management

- Refer to the case management policy and handbook.

Program Services and Delivery

- Individual counseling provided as identified in the O&A included in the treatment plan.
- Group work addresses cognitive behavioral tasks, managing behavior, and practicing group living tasks.
- Education, special education and vocations must be offered on site and only under high levels of staff supervision.
- Juveniles who progress sufficiently to be considered for release or transfer may be considered for home passes and for community activities.
- Staff must provide direct supervision for individual and group activities in the community at all times.
- Staff must closely monitor home passes, though this may be by telephone and third party contact.

LEVEL 3 – MODERATE RISK

Purpose of a Level 3 Facility

- Teach and reinforce safe behavioral controls and begin to address the specific risks and needs identified in the O&A and included in treatment plan.
- Provide academic services including remedial and special education services.
- Provide older juveniles with the opportunity to develop basic job skills and job market entry preparation.
- May provide high levels of mental health care that may require attention from licensed professionals.
- May provide residential substance abuse treatment.
- May provide offense specific services for juveniles with sexually abusive behavior, assessed to present moderate to low risk for re-offending, and who have not substantially completed work on these issues. The program must provide supervision designed to protect the community.

Operational Description (Specific terms will be established in each contract.)

- Unlocked staff secured setting with high levels of staff supervision often supported by a therapeutic culture.
- Staff supervision is provided at a high level during waking hours.
- Staff ratios in the evening may be reduced to the lower limits of licensing standards as long as provisions are made for quick response from off duty staff.
- Staffing ratios must meet licensing requirements of 1:8 during waking hours and must not exceed 1:20 during sleeping hours.
- Case managers and/or counselors must be provided at the licensing standard of 1:20.
- If on-site nursing services are not provided routinely, access to nursing services must be readily available to assist staff with related training and to support staff in decision-making about access to the appropriate level of medical care.
- Routine health and mental health services must be provided on-site or in the community.

Assignment Criteria

- Juveniles with a documented pattern of noncompliance with community sanctions and who have been adjudicated for numerous crimes in the community.
- Juveniles with a documented history of repeated non-compliance that threatens the safety and security of a lower level facility may also be considered.

Case Management

- Because level three facilities are located in the community, work with the family or other identified reintegration resource should remain an important priority throughout the placement.

Program Services and Delivery

- Individual counseling provided as identified in the O&A included in the treatment plan.
- Group work addresses cognitive behavioral tasks, managing behavior, and practicing group living tasks.
- Education and vocational services may be offered on site or in the community. Staff supervision must be addressed for each juvenile receiving services in the community. Onsite education and special education services, provided by licensed or certified staff, must be available for juveniles not capable of receiving services in the community or where education in a community school is not otherwise available.
- Juveniles who have progressed beyond the initial stages of a program may be considered for home passes and for community activities as long as these activities do not violate terms of a court order.
- Staff must provide direct supervision for group activities in the community at all times.
- Staff must closely monitor home passes and individual community activities.

LEVEL 2 – LOW RISK AND COMMUNITY TRANSITION OR INDEPENDENT LIVING:

Purpose of a Level 2 Facility

- Teach and reinforce safe behavioral controls and begin to address the specific risks and needs identified in the O&A and included in the treatment plan.
- Reinforce, build upon, and practice existing skills that the juvenile has to exhibit safe behavioral controls.
- Provide academic services including remedial and special education services.
- Provide older juveniles with the opportunity to develop basic job skills and job market entry preparation.
- Address the specific risks and needs identified to finalize a successful return to the community.
- Provide opportunities to practice skills in a community setting and away from the facility even though the juvenile may still be residing in the facility.
- Facilitate and monitor successful reintegration into the community.
- May provide high levels of mental health care that may require attention from licensed professionals.
- Provide substance abuse services.
- May provide offense specific services for juveniles with sexually abusive behavior, assessed to present low risk for re-offending, and who have substantially completed work on these issues. The program must provide supervision designed to protect the community.

Operational Description (Specific terms will be established in each contract.)

- Unlocked setting with levels of staff supervision sufficient to meet the terms of the contract with the department and relevant child care licensing standards.
- Staff supervision must assure that juveniles involved in community services or activities are attending and participating as intended in those activities.
- Staff ratios in the evening may be reduced to the lower limits of licensing standards as long as provisions are made for quick response from off duty staff.
- Case managers and/or counselors must be provided at the licensing standard of 1:20.
- Routine health and mental health services must be provided on-site or in the community.
- As a part of a larger continuum, services may include an intensive, highly structured day treatment component for those juveniles not living at home. Plans for day treatment if adopted at this level must provide for rapid movement to a higher level of custody in response to specifically identified

and documented risk/behavior. Education on-site must be included as a part of the day treatment model at this level.

Assignment Criteria

- Initial assignment for Juveniles who have not been adjudicated for numerous crimes in the community but may have a documented pattern of noncompliance with community sanctions.
- Transfer from a higher-level facility following a documented custody level reassessment that supports the need for a lower level facility.
- Low risk for violence or escape.
- Juveniles with a documented history of compliance and progress in a higher level facility may also be considered for short-term work to finalize reintegration plans or to develop independent living skills.
- Failure by the juvenile to maintain his or her status in education, vocational or treatment services in the community may result in consideration for reassignment back to a higher level of care and custody.

Case Management

- Reintegration resources should remain an important priority throughout the placement. Reintegration resources should include the family when possible.
- The treatment plan or reintegration plan must be developed with and authorized by the department's case manager and must also reflect the concerns of the JPO.

Program Services and Delivery

- Community activities must include supervision.
- Activities in the community must be closely tied to the goals and objectives of the treatment plan or reintegration plan.
- Education and vocational services may be offered in the community. Staff supervision must be addressed for each juvenile receiving services in the community.
- Individual counseling may be provided by a community resource.
- Group work done may address a variety of cognitive behavioral tasks as well as on managing behaviors and practicing group living tasks.
- Juveniles should continually be refocused on those tasks that need to be accomplished to finalize their full return to the community and release from IDJC custody.
- Juveniles should be involved in home passes and regular participation in community education, vocations, and treatment services.
- Home passes must provide for close monitoring of the pass by staff, though this may not be by direct contact.
- Substance abuse services may be offered in the community, provided by a professional level counselor or by a support group such as AA/NA based on the level of need indicated.

- Outpatient services for juvenile sexual offenders may be offered in the community, provided by an appropriately licensed professional level counselor.

LEVEL 1 – MINIMUM RISK – NON- RESIDENTIAL SERVICES:

Purpose of a Level 1 Program

- Provide non-residential services that target a specific area of need. Programs and/or services are not intended to address a wide variety of needs in a thorough way.
- Teach and reinforce safe behavioral controls and begin to address the specific risks and needs identified in the O&A and included in treatment plan.
- Reinforce, build upon, and practice existing skills that the juvenile has to exhibit safe behavioral controls.
- Address the specific risks and needs identified to finalize a successful return to the community.
- Provide support for independent living and/or transition services in a setting that is not operated by the state or in a private residential contractor.
- Provide or arrange for support and reinforcement of families or other guardians as an important, integral, part of release.
- Arrange for academic services including remedial and special education services.
- Provide older juveniles with the opportunity to develop basic job skills and job market entry preparation.
- Provide or arrange for high levels of mental health care that may require attention from licensed professionals.
- Provide or arrange for substance abuse services.
- May provide or arrange for services for juveniles with sexually abusive behavior, assessed to present low risk for re-offending, and who have substantially completed work on these issues. The program must also provide services designed to address the particular needs of juvenile sexual offenders and the community.
- As a part of a larger continuum, services may include a highly structured DAY TREATMENT component. Plans for day treatment, if adopted at this level, must provide for movement to a higher level of custody in response to specifically identified and documented risk/behavior. Education off-site may be appropriate for some juveniles in day treatment at this level as long as close monitoring is provided.

Operational Description (Specific terms will be established in each contract.)

- Juveniles assigned to level one reside with family or other approved guardians.
- Staff supervision must assure that juveniles are attending and participating in activities and services prescribed in the treatment plan.
- Routine health and mental health services must be provided. These services should be arranged thru a community provider.

Assignment Criteria

- Juveniles may be assigned from a higher-level facility following a documented Custody Level Reassessment that supports the need for a lower level facility.
- Juveniles who have not been adjudicated for numerous crimes in the community but may have a documented pattern of noncompliance with community sanctions.
- Low risk for violence or escape.
- Juveniles with a documented history of compliance and progress in a higher level facility may also be considered for short-term work to finalize reintegration plans or to develop independent living skills.
- Failure by the juvenile to maintain his or her status in education, vocational or treatment services in the community may result in consideration for reassignment back to a higher level of care and custody.

Case Management

- The treatment plan or reintegration plan must be developed with and authorized by the department's case manager and must also reflect the concerns of the JPO.
- Work with the family or other identified reintegration resources should remain an important priority throughout the placement.

Program Services and Delivery

- Activities in the community must be closely tied to the goals and objectives of the treatment plan or reintegration plan.
- Education and vocational services are offered in the community. Staff supervision must be addressed for each juvenile receiving services in the community.
- Individual counseling may be provided by a community resource.
- Group work done may address a variety of cognitive behavioral tasks as well as on managing behaviors and practicing group living tasks.
- Juveniles should continually be refocused on those tasks that need to be accomplished to finalize their full return to the community and release from IDJC custody.
- Juveniles should be participating in regular community education, vocations, and treatment services.
- Home passes may be included in the treatment plan if the juvenile is not residing with a family.
- Substance abuse services may be offered in the community, provided by a professional level counselor or by a support group such as AA/NA based on the level of need indicated.
- Outpatient services for juvenile sexual offenders may be offered in the community, provided by an appropriately licensed professional level counselor.