I. **Policy:** Written policy, procedure, and practice provide that staff will design and complete the juvenile’s personal program plan within the first 21 days of admission. The plan is documented with staff and juvenile signatures and is shared with the juvenile’s parents as soon as possible.

II. **Procedure**

A. Upon admission each youth receives a Personal Program Plan within the first twenty-one (21) days of admission.

B. The Personal Program Plan will be developed by youth and designated staff members that may include, but are not limited to, the following:

1. Unit Supervisor;
2. Unit Counselors
3. Family Specialist Supervisor;
4. Family Specialist;
5. Treatment Specialist;
6. Team Leader
7. CAS Academy Team Member (when appropriate);
8. Juvenile’s parent(s)/guardian(s) (when available)

C. The Personal Program Plan is signed by youth and designated staff member upon completion.

D. The Personal Program Plan is provided to youth and parent within 10 days of completion.
I. **Policy:** Written policy, procedure and practice prohibit discrimination on the basis of disability on the provision of services, programs, and activities administered for program beneficiaries and participants.

Service programs and activities include, but are not limited to the following:
A. Academic and vocational education (including developmental and rehabilitative programs);
B. Work programs/work release programs (by providing reasonable accommodations or alternatives for juveniles with disabilities so that the benefit of these programs, including sentence-reduction credits, are available to juveniles with disabilities);
C. Recreation, exercise and activities;
D. Mail, telephone, and visiting;
E. Library;
F. Religious programs;
G. Reception and orientation
H. Transportation services (to provide for safety and security, and to avoid undue discomfort, in light of the juvenile’s disabilities);
I. Classification
J. Food Service;
K. Sanitation and Hygiene;
L. Health Care;
M. Social Services
N. Release;
O. Discipline, grievance procedures, and due process proceedings;
P. Safety and emergency procedures;
Q. Access to media, courts, council, and law library;
R. Commissary/canteen
S. Volunteer programs; and,
T. Psychological and psychiatric services

Program beneficiaries and participants include, but are not limited to: juveniles, family members, clergy, attorneys, volunteers, and other authorized visitors.

The institution may be required to take remedial action, when necessary, to afford program beneficiaries and participants with disabilities an opportunity to participate in, and enjoy the benefit of services, programs, or activities. Remedial action may include, but is not limited to:
A. Making reasonable modifications to policies, practices, or procedures;
B. Providing auxiliary aids and services to the hearing and visually impaired;
C. Constructing new or altering existing facilities; and,
D. Delivering services and so on at alternative accessible sites.
II. **Definition:**
   A. **Disability** - A physical or mental impairment that substantially limits one or more of the major life activities of an individual.

   B. **Classification** - A process for determining the needs and requirements of those whom confinement has been ordered and for assigning them to housing units and programming according to the needs and existing resources.

   C. **Program Beneficiaries & Participants** - Include but are not limited to juveniles, family members, clergy, attorneys, volunteers, and other authorized visitors.

III. **Procedure**
   A. The facility will not discriminate on the basis of sex, disability, race, creed, national origin, or gender in the provision of services, programs, and activities administered for program beneficiaries and participants.

   B. Program beneficiaries and participants needs will be assessed on an individualized basis in determining the need for additional or alternative services.

   C. The Director will contract with a home health care agency, health department, or other local health and/or service agency for limited or extensive assistance, if necessary.

D. **Remedial Action**
   1. The facility may take remedial action, when necessary, to afford program beneficiaries and participants with disabilities an opportunity to participate in, and enjoy the benefit of services, programs, or activities. As approved by an Administrator, remedial action may include, but is not limited to:
      i. Making reasonable modifications to policies, practices, or procedures;
      ii. Providing auxiliary aids and services to the hearing and visually impaired;
      iii. Constructing new or altering existing facilities; and,
      iv. Delivering services and so on at alternative accessible sites.
I. **Policy:** Written policy, procedure, and practice provide for staff and juvenile access to an appropriately trained and qualified individual who is educated in the problems and challenges faced by juveniles with physical and/or mental impairments, programs designed to educate and assist disabled juveniles, and all legal requirements for the protection of juveniles with disabilities.

II. **Interpretations:**
   A. *An appropriately trained and qualified individual* is interpreted as one who has been designated by the warden, superintendent, or other authority, to coordinate efforts to comply with and carry out responsibilities defined by the Americans with Disabilities Act.

III. **Definitions:**
   A. **American with Disabilities Act (ADA) of 1990:** Recognizes and protects the civil rights of people with disabilities. Regulations issued under the different titles by various Federal agencies set requirements and establish enforcement procedures.

   B. **Disability** - A physical or mental impairment that substantially limits one or more of the major life activities of an individual.

   C. **Classification** - A process for determining the needs and requirements of those whom confinement has been ordered and for assigning them to housing units and programming according to the needs and existing resources.

IV. **Procedure**
   A. The facility will not discriminate on the basis of sex, disability, race, creed, national origin, or gender in the acceptance of referrals or in making decisions regarding admission.

   B. Juvenile’s needs for services will be assessed on an individual basis to determine the services needed during placement.

   C. The appropriately trained and qualified individual for Montgomery County Juvenile Court is the Intervention Specialist.

      1. The Intervention Specialist is licensed through the Ohio Department of Education and is the designated liaison to provide access to program services designed to educate and assist disabled juveniles, and all legal requirements for the protection of juveniles with disabilities.
I. **Policy:** Written policy, procedure, and practice provide that a classification system specifies the type of program needed and level of control required for the juvenile and provides for regular review of each classification.

II. **Definitions:**

A. **Youth Level of Service Inventory** – an assessment that examines youth offenders in eight different areas (i.e. prior and current offenses, family circumstances and parenting, education/employment, peer relations, substance abuse, leisure/recreation, personality/behavior, and attitudes/orientation) to determine their level of risk: low, moderate, high, or very high.

B. **Ohio Youth Assessment System** - an assessment designed to assist juvenile justice professionals in providing the most effective interventions for youth based on their likelihood to reoffend, criminogenic needs, and barriers to services, using the least restrictive alternative.

C. **Criminal Sentiment Scales – Modified** – a pre/post test assessment designed to measure antisocial attitudes, values, and beliefs related to criminal activity.

D. **Classification** - A process for determining the needs and requirements of those whom confinement has been ordered and for assigning them to housing units and programming according to the needs and existing resources.

III. **Procedure**

A. **Classification Process:**

   i. Youth are classified according to the Ohio Youth Assessment System (OYAS), Youth Level of Service-Inventory (YO-LSI), and Montgomery County Juvenile Court Formal Review Team.

   ii. These assessment tools are used in conjunction with the Formal Review Team process to determine classification that specifies the program needs for each youth.

   1. Collateral documentation reviewed during this process is comprised of, but not limited to, the following: Court records, probation reports, treatment history and/or psychological reports (typically includes family, social, education, and work history; crisis care assessment, personality, motivation scale, etc.).
iii. Youth’s Cognitive Behavioral Treatment Program is based upon the needs identified in the criminogenic need’s assessment(s). Youth are placed in the following core program components:
   1. Orientation (Motivation to Change & Introductory CBT sessions)
   2. EQUIP
   3. Skillstreaming
   4. Advanced Practice
   5. Problem Solving
   6. Re-Entry (Relapse Prevention)
   7. Leave with Permission

   If youth demonstrates a need for family focused treatment per the OYAS (moderate or high) or other collateral documentation, youth are also placed in the Strengthening Families phase of the program.

B. Level of Control:
   i. Supervision of all youth within the facility is based upon youth status within the program.
      1. Youth in the following program components are limited to the secure areas within the facility:
         A. Orientation (Motivation to Change)
         B. EQUIP
         C. Strengthening Families
         D. Skillstreaming
      2. Youth in the following program components are permitted in the non-secure areas within the facility with staff supervision.
         A. Re-Entry
         B. Leave with Permission

   ii. Increased privileges and rewards are obtained throughout youth’s assigned program components.

C. Classification Review
   i. Progress in the program is determined by each youth’s demonstrated performance and behavior, as measured in a variety of ways.
   ii. Juvenile’s progress in the program may be reviewed in the following manner:
      1. Personal Program Reviews;
      2. Daily and Weekly Progress Evaluation Sheets from Group, School, Community, and Family Session (if applicable);
      3. Program Summary Report
Montgomery County Juvenile Court  
Center for Adolescent Services

Chapter: Classification  
Subject: Classification Plan  
Policy: 5B-03  
Pages: 1 of 1  
Standards: ACA 3-JCRF-5B-03  
Issue Date: 12/2001  
Reviewed: October 2014, December 2015, April 2016  
Authorized by: Mike Garrett, Director

I. **Policy:** It is the written policy, procedure, and practice of the Center for Adolescent Services (CAS) that juveniles have input into planning, problem solving and decision-making related to their participation in the program.

II. **Procedure**  
A. Upon admission, each youth’s assigned Family Specialist is responsible for the development of an Initial Personal Program Plan within a maximum of twenty-one (21) days of admission. This will be completed in conjunction with the youth and their parent(s)/guardian(s).

B. Every thirty (30) days the Family Specialist will lead the youth, parent(s)/guardian(s), and Treatment Team members in the completion of a Thirty (30) Day Personal Program Plan Review(s).

C. Each treatment plan is comprised of the following:  
   1. Unit Supervisor;  
   2. Unit Counselors assigned to living unit;  
   3. Family Specialist;  
   4. School Principal;  
   5. Special Education Teacher (when appropriate);  
   6. Juvenile;  
   7. Juvenile’s parent (s)/guardian (s)

D. Participants in each treatment team meeting will sign and date the Treatment Plan to signify that they participated in formulating the plan and/or changes in the plan.

E. Youth will be offered multiple opportunities to have input into planning, problem-solving and decision-making related to their participation in the program. Included, but not limited to, are the following examples:
   1. Participation in Personal Program Plan and Thirty (30) Day Personal Program Plan Review(s) Meetings;  
   2. Review of Weekly Progress Reports in Groups, School, Community, and Family Session;  
   3. Written input on Behavioral Infractions;  
   4. Participation in Residential Treatment Council Reviews;  
   5. Completion of Grievance Forms;  
   6. Completion of Medical Request Forms
I. Policy: Written policy, procedure, and practice provide that juvenile progress in the program is reviewed either through staff meetings or by individual staff at least every two weeks, and that the outcome of each review is documented.

II. Procedure
   A. Youth are classified according to the level of progress they have attained in each of their assigned phases.

   B. Youth performance in their phases is evaluated at least every two (2) weeks by the assigned Unit Supervisor and/or assigned Family Specialist.
      
      i. Unit Supervisor- meets individually with assigned youth to review youth’s overall progress within program. This review will include but is not limited to the following categories: Community, School, CBT Groups, Family/Individual Sessions, and Behavioral Infractions. This review is documented in JCS as a Classification Plan Review.

      ii. Family Specialist- meets individually with assigned youth in Individual and/or Family Sessions. This review includes but is not limited to Community, School, CBT Groups, Communication, Problem Solving, Family Interaction, Practicing Boundaries, and Behavioral Infractions. This review is documented in JCS as a Classification Plan Review or on the Personal Program Plan Review form.
I. **Policy:** It is the written policy, procedure, and practice of the Center for Adolescent Services that any change in a personalized program is reviewed and discussed with the juvenile. This review is dated and documented by staff and juvenile signatures.

II. **Procedure**
A. Upon admission, each youth’s assigned Family Specialist will be responsible for the development of an Initial Treatment Plan within the first twenty-one (21) days of admission.

B. The treatment plan will be lead by the Family Specialist and include participation from the following individuals:
   1. Unit Supervisor;
   2. Unit Counselors assigned to living unit;
   3. Family Specialist;
   4. School Principal;
   5. Special Education Teacher (when appropriate);
   6. Juvenile;
   7. Juvenile’s parent(s)/guardian(s) (when available)

C. The Family Specialist will complete a Thirty (30) Day Treatment Plan Review(s) at least once every thirty (30) days.
   1. Progress, including completion of goals, will be documented in the Treatment Plan Review.
   2. Modifications to goals appropriate to current circumstances and experiences will be made and documented.

D. All participants will sign and date the Treatment Plan and Thirty (30) Day Treatment Plan Review(s) to signify that they participated in formulating the plan and/or changes in the plan.
I. Policy: It is the written policy, procedure, and practice of the facility that the program will systematically and periodically identify the needs of its juveniles.

II. Procedure
   A. Screening
      i. Formal Review
         1. The Formal Review Team serves as a centralized place for screening youth of high/moderate and high risk/needs offenders.
         2. When staff formally reviews a case, the goal will be to provide the least restrictive treatment options for the court that will impact the youth’s criminogenic behavior in accordance with the continuum of care.
         3. The Director or designee reviews the referral information to determine if youth is appropriate for placement.
         4. If youth is found appropriate the Director or designee provides referral information to the Family Specialist Supervisor or designee to complete assessment(s).
         5. The Director or designee prepares for the youth’s admission into CAS.

   B. Family Specialists interview and identify newly referred youth to determine the risks and needs of each individual youth entering the program in the following:
      1. Completion of the OYAS tool.
      2. Completion of the Criminal Sentiment Scales –Modified.
      3. Completion of the initial Personal Program Plan.
      4. Completion of 30-Day Personal Program Plan Review.

   B. Family Specialists reevaluate the needs of youth and parent(s)/guardian(s) through Thirty (30) Day Treatment Plan Review(s). These provide for the continued identified risks, needs, responsivity factors, and strengths.

   C. Unit Supervisors and Family Specialists report the progress and continuing needs of each youth on their unit at the weekly team meetings.

   D. Youth and their parent/guardian complete “Evaluation of Service” forms to evaluate Program Staff, the Program, Information about themselves, and suggested areas for program improvements. These Evaluation of Service forms are reviewed by Family Specialists and Administrative Team, to generate program improvements.
I. **Policy:** It is the written policy, procedure, and practice of the facility that juveniles can initiate a review of progress and program status.

II. **Procedure**

A. Youth receive continual updates on their progress on a weekly basis, through progress reports in group, school, community (unit), and family sessions. Youth also providing immediate feedback from staff about their progress in the program via the Treatment Council Summary Report and Behavioral Infractions.

B. All youth receive weekly updates of their progress. If any youth makes a request to review their status and progress in the program at any time, they can be made to the Unit supervisor, Family Specialist, or during Unit Treatment Council and Residential Treatment Council meetings.

C. Reviews will be handled internally by the youth’s Unit Supervisor unless the youth specifically requests court involvement.

D. Requests by the youth for a review by their Magistrate or Judge will be forwarded to said Magistrate or Judge.
I. **Policy:** It is the written policy, procedure, and practice of the Center for Adolescent Services where a literacy or communication problem exists that can lead to a juvenile’s misunderstanding of agency rules and regulations, assistance is provided to the juvenile either by staff or another qualified individual under the supervision of a staff member.

II. **Procedure**

A. **Orientation to Rules and Expectations**
   1. Upon admission, each resident receives a copy of the CAS Resident and Parent Handbook of which is designed to inform the residents and parent/guardian of the rules and regulations of the Treatment Program.
      
      a. Family Specialist will discuss and review the Resident and Parent Handbook with youth and parent(s)/guardian(s).
      b. The review includes program expectations, guiding principles (rights), specific phase requirements, treatment councils, behavioral rule infractions, reward system, and resident personal property.

B. **Language or Literacy**
   1. When a literacy or communication barriers exist, the following method(s) are implemented to assist the resident in understanding the material.
      a. Reading the material to the youth;
      b. Provide material in language of origin;
      c. Obtaining an interpreter
Center for Adolescent Services

Chapter: Classification
Subject: Classification Plan
Policy: 5B-09
Pages: 1 of 2
Standards: ACA 3-JCRF-5B-09
Issue Date: January 2007
Reviewed: October 2014, December 2015, April 2016
Authorized by: Mike Garrett, Director

I. Policy: Written policy, procedure, and practice require that the classification plan specifies that prior to a release hearing, a progress report is made available to the release authority. The report includes a current and complete history of the juvenile’s activities in the facility and proposed release plan.

II. Definitions
A. Re-Entry Leave with Permission - the process in which youth are released from CAS to the community pending their official re-entry release hearing before Judge/Magistrate.

B. Re-Entry Leave with Permission Service Plan - the terms and conditions in which a youth is granted Re-Entry Leave with Permission from CAS to the community.

C. Report and Recommendation - report submitted to the Judge/Magistrate illustrating a youth’s progress, recommendation for Re-Entry Leave with Permission, statement youth is ready for Re-Entry leave with Permission, and scheduled released date.

III. Procedure
A. A Re-Entry Service Plan meeting is conducted prior to a youth being granted Re-Entry Leave With Permission. The assigned Family Specialist invites the following people to the meeting:
   1. Youth (required);
   2. Parent(s)/Guardian(s) (required);
   3. Unit Supervisor(s);
   4. Family Specialist(s) (required);
   5. Family Specialist Supervisor;
   6. Program Manager(s);
   7. Administrator; (required)
   8. Children’s Services Worker(s) (if applicable);
   9. Probation Officer(s);
   10. Other Program Provider(s).

B. The Family Specialist(s) will complete the following documentation when requesting a youth’s Re-Entry Leave with Permission:
   1. Re-Entry Leave with Permission Service Plan - the assigned Family Specialist completes this form indicating the terms and condition of Re-Entry Leave with Permission.
      a) The Family Specialist contacts the assigned Judge/Magistrate’s Case Management Specialist (CMS) to schedule a Re-Entry hearing. The hearing should be scheduled between thirty (30) to forty-five (45) days upon a youth’s release on Re-Entry Leave with Permission.
2. Report and Recommendation
   a) Report - the following information must be included in an effort to demonstrate a youth’s progress and to justify consideration for Re-Entry Leave with Permission:
      1. Original Ohio Youth Assessment System (OYAS) Residential Tool Risk Level;
      2. Subsequent OYAS Re-Entry Tool Risk Level;
      3. Academic Performance
      4. Wide-Range Achievement Test (WRAT) Pre/Post Scores
      5. Treatment Summary regarding progress in Family Specialist’s family/individual sessions, individual services provided by other program providers, overview of phase treatment groups, any other miscellaneous information pertinent to the consideration of youth’s release, and the services that are arranged for youth upon release (i.e., school, counseling, and so on).
      6. Statement indicating youth is ready for Re-Entry Leave with Permission
   b) Recommendation
      1. The recommendation will request that the Court grant a youth a Re-Entry Leave with Permission and be ordered to return to Court for scheduled Re-Entry Hearing.

C. The assigned Family Specialist expedites the completed Community Re-Entry Service Plan with release date and hearing date and time and the Report and Recommendation to the assigned Judge/Magistrate’s Case Management Specialist (CMS). The CMS will expedite the documentation for Judge/Magistrate review and file the documentation with the Clerk’s Office. The Clerk’s office will forward all filed documentation to CAS prior to a youth’s scheduled release.

D. Release
   1. The assigned Family Specialist will provide the youth and parent/guardian with a time-stamped copy of the Re-Entry Leave with Permission Service Plan and Notice of Hearing upon the youth’s release.
I. **Policy:** It is the written policy, procedure, and practice of the Center for Adolescent Services (CAS) that transfers or removals follow due process and allow for juvenile appeal.

II. **Procedure**

A. Transfers or removals from CAS occur as a result of a pattern of behavior resulting in a lack of progress, significant and repeated disruption to the program and/or a pattern of behavioral infractions that places the juvenile and others at significant risk for harm.

1. When recommended by the Treatment Team in consultation with the juvenile’s Probation Officer, a Violation of Court Order (VCO) is filed with the Court. The Probation Officer is responsible for filing the VCO.

2. Youth appealing the recommendation for a VCO are permitted to file a written Grievance Form. The Grievance will be heard by the Grievance Officer.

3. As a result of a hearing on the VCO, the Court determines a date for a Court hearing.

4. During the Court Hearing, the youth will have an opportunity to object to the any transfer or removal from the program.