

South Carolina Department of Juvenile Justice

Office of Policy and Planning

Reintegration Initiative

Program Manual

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Introduction

The process by which youth are prepared for their return to the community after a period of confinement and managed once they arrive home goes by many names: parole, aftercare, transitional care, and re-entry, for example. Absent effective interventions to achieve reintegration with the community, most youth who penetrate the juvenile justice system to the point of incarceration will continue their criminal behavior well into adulthood. In the process these young people will cost society millions of dollars when measured by non-productivity, crime victimization, and additional periods of incarceration, supervision, and treatment through public agencies. An effective reintegration initiative will reverse recidivism and dependency trends, thereby contributing to the Department of Juvenile Justice's (DJJ) dual goals of developing the capacity of juveniles to become responsible, productive citizens and fostering safe communities.

A recent federal funding initiative dedicating resources to improving this process and its results bore the title "Going Home: Serious and Violent Juvenile Reentry Initiative (SVORI)." DJJ is developing an initiative that will address the many complex issues associated with successfully returning incarcerated youth to the community. DJJ is promoting this new program as its "Reintegration Initiative." The term reintegration reflects the agency's commitment to the Balanced and Restorative Justice model, by its implication that neither the young juvenile nor the community is whole until a process of healing and reintegration occurs to the satisfaction of all parties to the original wrongdoing. The Reintegration Initiative will help to ensure that youth exit the juvenile justice system better prepared to become law-abiding citizens and contributory members of the community.

Statutory Responsibilities

South Carolina, like eight other states, specifically designates treatment as a philosophical goal in its juvenile justice code. Under the authority of a rehabilitation-oriented juvenile code, DJJ is committed to facilitating the reintegration of juvenile juveniles into the community once their sentences have been served. Section 20-7-8315(A) of the *South Carolina Code of Laws* establishes DJJ's responsibility to provide aftercare services. It reads in part: "The department is charged with the responsibility of making aftercare investigations to determine suitable placement for children considered for conditional release from correctional schools. The department shall also have the responsibility of supervising the aftercare program."

Program Model

DJJ's Reintegration Initiative is based on the Intensive Aftercare Program (IAP) model developed by David Altschuler, Ph.D and Troy Armstrong, Ph.D. This best practice model is based on the following underlying principles:

- Preparing juveniles for progressively increased responsibility through clear expectations, positive reinforcements, immediate accountability, and consequences for misconduct;
- Facilitating interaction and involvement between juveniles and the community in recognition of the critical role that family, peers, and significant others play in the initiation and maintenance of conventional, non-delinquent lifestyles;
- Working with juveniles and targeted community support systems (families, peers, schools, employers) on the qualities needed for constructive interactions that advance reintegration;
- Developing new resources and support as needed in the areas of work, education, training, and recreation as well as services geared to special needs; and
- Monitoring and testing the juvenile and the community on their ability to interact productively.

The principles underscore the fact that intervening with “high-risk” juveniles consists not only of intensive supervision and services following release, but also of programming within facilities that prepares youth for what they will confront in the community. Reintegration is a carefully orchestrated process keyed to performance and close collaboration with other needed support systems.

Central to the IAP model is the case management element. Case management consists of:

- **Assessment, classification, and selection criteria.** IAP focuses on “high-risk” juveniles in order to maximize its potential for crime reduction. The target population for the DJJ Reintegration Initiative will be that subgroup of institutionalized juveniles who pose the highest risk of repeating as juveniles once they return in the community.
- **Individualized case planning.** The IAP model specifies that aftercare planning staff assigned to correctional facilities work jointly with those operating in the community to identify youth's service needs shortly after commitment and to plan for how those needs will be addressed during incarceration, transition, and aftercare. Special attention to youth issues relative to families, peers, schools, and other social networks is critical.

- **Surveillance and service mix.** The IAP model embodies close supervision and control of “high-risk” juveniles in the community but also emphasizes the need for similarly intensive services and support. This approach requires that staff maintain small caseloads and that supervision and services be available not only on weekdays, but also in the evening and on weekends. In addition, the intent is that community-based aftercare services parallel those that were initiated in the facility.
- **Incentives and graduated responses.** By its very nature intensive supervision uncovers numerous technical violations and program infractions. The model requires a range of graduated sanctions tied directly and proportionately to the seriousness of the violation. At the same time, the model points to a need to reinforce youth progress consistently via a graduated system of meaningful rewards.
- **Brokerage and linkages.** This element is rooted in the conviction that the parole agency cannot effectively provide the range and depth of services required for “high-risk, high need” juveniles unless it brokers services through a host of community agencies and resources. Moreover, because interventions will focus on family, school, peer, and community issues, the case manager needs to create working relationships with these social networks.

Pilot Programs

DJJ is operating two pilot programs under its Reintegration Initiative, serving youth in a total of six counties. One pilot program is supported in 2003-2004 through the federal “Going Home” initiative. Continuation funding is expected for two additional years. The pilot counties include Calhoun, Florence, Dorchester, Orangeburg and Spartanburg. Committed youth from these counties will receive planning and preparatory services through a coordinator serving the correctional facilities and case managers in the local community.

The second pilot will work with youth from Kershaw, Marion and York counties, which were selected through consultation with Community Services Staff. The pilot will have no additional funding, but will be supported by applying the weighted caseload strategy and additional community support.

Linkage between the Reintegration Initiative and Performance Based Standards

The Council of Juvenile Correctional Administrators (CJCA) through its Performance Based Standards (PbS) project is working collaboratively with DJJ to adopt its Reintegration Standards. PbS is a dynamic and intricate system that requires attention to detail and dedication to the philosophical underpinnings of continuous improvement management. PbS provides a tool for self-evaluation of performance using outcome measures that allows facilities and states to compare progress over time and against other participating facilities. The outcome measures must be reviewed over time to

assess performance, plan for improvement, implement improvement and evaluate results.

Standards for the institutional phase of the Reintegration Initiative will help to ensure that DJJ develops and maintains appropriate programs and services for in-custody youth to address their needs prior to release. In addition, these standards will address the relationship between the Reintegration Coordinator, the youth and the family in developing an aftercare plan, as well as the linkage of the youth to community-based resources prior to release from the facility. The standards that apply to services for youth once they return to the community will address the supervision of youth and the continuity of treatment services.

Summary

DJJ's Reintegration Initiative will provide services and supervision to ensure a successful transition of juveniles from the correctional facility environment to the community. The expectation is that the high-risk juveniles receiving this level of support will be more likely to avoid further involvement with the courts, move toward self-sustained independence through work and/or school, and otherwise become responsible citizens. The successful transition of incarcerated youth is critical if South Carolina is to avoid the development of a young adult criminal underclass that is unemployable and unwilling to subscribe to societal norms. Such young people endanger the public, reduce the viable labor market, and victimize society as a whole and become a drain on state and local resources as inmates and welfare dependents. The Reintegration Initiative is consistent with the rehabilitative ethic embodied in the state's juvenile justice code. It is an opportunity to redirect the lives of young people toward productivity, self-sufficiency, and law-abiding behavior to their own benefit while at the same time making South Carolina's communities safer places to live.

Program Goals and Objectives

- Develop an effective system of transitional and aftercare services that begins at the juvenile's commitment to DJJ and continues through the juvenile's reentry and successful adjustment in the community.
- Prepare juvenile juveniles for successful reintegration into the community through the provision of best-practice social skills, life skills and educational and vocational interventions.
- Promote family strengthening by fully engaging juveniles and their families in the reintegration planning process and ensure both juveniles and their families clearly understand the conditions and responsibilities they must fulfill upon the juvenile's return to the community.
- Create a Community Support Team for each juvenile and their family prior to the juvenile's release to provide the primary support and services needed.
- Develop the necessary collaborative partnerships and memorandums of agreements with public and private agencies, organizations, and service providers in communities to ensure that needed services are offered to each juvenile and their family.
- Develop at least one Reintegration Planning and Review Team in participating local communities to assist in the development of treatment and aftercare plans, ensure required services, support, and supervision are in place prior to the juvenile's release. Also, staff and review progress of juvenile both while committed and returned to the community.
- Collect data for the purpose of assessing progress and reporting.

Target Population

- Male or female juvenile juveniles 14 to 18 years old committed to and released from the Department of Juvenile Justice.

Selection Criteria

The following criteria will be used to select participants for the Department of Juvenile Justice's Reintegration Initiative pilots:

- Male or Female Chronic juvenile delinquents
- Juveniles committed for a serious or violent offense or committed on a technical violation of parole related to a serious and violent offense.
- Juveniles at high risk to re-offend as determined by DJJ's Risk Assessment Instrument.
- Juveniles indeterminately sentenced for a minimum sentence of 3 to 6 months
- Juveniles determinably sentenced for at least 90 days with probation supervision to follow release.
- Juveniles assigned to a DJJ long-term facility or Wilderness Camp
- Juveniles returning to Orangeburg, Dorchester, Calhoun, Florence, York, Spartanburg, Marion or Kershaw Counties upon release and will be supervised by a DJJ Community Worker.

Program Design

The reintegration initiative is designed to operate in four Phases. The process will begin with the “end in mind” that is, preparing the juvenile and their family for juvenile’s return to the community and to reduce recidivism. The phases include coordination and delivery of services that involve working with Rehabilitative Services, Educational Services and Community Services divisions are a strong partnership with the SC Juvenile Parole Board. The initiative is also designed to enlist the help of service providers in the community to assist in DJJ’s mission to monitor and serve juveniles and their families upon the juvenile’s return to the community.

Phase One: Institutional Preparation Phase

The following objectives are to be accomplished while a juvenile is committed to a DJJ long-term facility or wilderness camp:

- Development of Institutional and Reintegration Treatment Plans to guide delivery of services to juvenile and family while Juvenile is committed.
- Provision of services to juvenile and family to help prepare them for successful reintegration into the community
- Development of Community Support Teams to help provide support to the juvenile and family.

Phase Two: Pre-Release Transition Phase

The Pre-Release Transition Phase begins 90 days prior to a juvenile’s release and continues until he/she returns to the community. **(Exception: A juvenile that has a 90-day determinate sentence will enter pre-release phase 45 days prior to release.)**

The following objectives are to be accomplished during this phase:

- Finalize Aftercare Treatment Plans
- Establish a close working relationship between Community Caseworker and the juvenile and his/her family.
- Prepare the juvenile, family and Community Support team for the juvenile’s return to the community.
- Link services between the commitment facility and the juvenile’s community to ensure a seamless transition of services upon return to the community.

Phase Three: Community Transition Phase

The Community Transition Phase begins the day of the juvenile's return to the community and will last a minimum 90 days. The following objectives are to be accomplished during this phase:

- Ensure that juveniles and their families receive the services, support and supervision as outlined on the Aftercare Treatment Plan
- Ensure the juvenile's successful adjustment and reintegration into the community

Phase Four: Continuing Care Phase

The Continuing Care Phase begins once a juvenile has successfully completed Phase Three and will continue as long as the juvenile is under parole supervision or DJJ probation. The following objectives are to be accomplished during this phase:

- The juvenile, family, and community support team will be prepared to function successfully when community supervision is no longer in place.
- The intensive levels of supervision and services will be gradually phased out.
- The Community Support Team will assume the primary support to the juvenile and his/her family.
- The Community Caseworker will monitor the juvenile's progress and re-initiate supervision and/or services as needed.

Management Plan

The administrative oversight of this initiative will be the responsibility of the Program and Grants unit housed in the Office of Policy and Planning. The Program and Grants unit employs a Reintegration Director whose responsibilities include coordination, oversight, monitoring and reporting for the initiative. The Reintegration Director works with lead staff in the agency as a liaison to bridge gaps in communication and develop processes that will enhance the agency's current reintegration practices. The Reintegration Director does not have responsibility for supervising staff. However, he/she provides input concerning Reintegration Coordinators performance evaluations.

The Program and Grants Director who reports to the Associate Deputy Director in the Office of Policy and Planning supervises the work of the Reintegration Director. The Program and Grants Director communicates important aspects of the initiative with senior divisional management staff.

Under the grant-funded initiative, each pilot county office has a County Director who will designate a worker who will be responsible for case managing the juveniles through each phase in the project. The Reintegration Coordinator will work in concert with facility staff during Phases I and II.

County Directors will operate in their official capacity supervising Reintegration Coordinators. Under the non grant-funded initiative, each pilot county will designate a worker who will be responsible for case managing the juveniles through each phase in the project. They will be responsible for general administrative oversight of the Reintegration Coordinators. This oversight will include approval of leave, travel and training. This oversight will also include all aspects of case management, establishment of partnerships, community coordination and service provisions.

The Regional Administrator has the responsibility to ensure all activity for this grant initiative is compliant with the rules and regulations as it relates to juvenile care, approval and/or denial of expenditure request, overall management of all activities within the region and collaborating with the Reintegration Director as needed.

Duties and Responsibilities

Reintegration Director's Responsibilities:

- Provide program oversight for the reintegration initiative in the Community, Education and/or Rehabilitative Service Divisions,
- Oversee and monitor all day-to-day activity. This includes, but is not limited to, budget matters, client care, problem resolution, grantor request, and management briefings,
- Conduct site visits and prepare written reports of findings, providing feedback to the appropriate division staff, developing corrective action plans when needed and monitoring the plan for compliance,
- Develop and ongoing enhancements of Reintegration Program Manual,
- Ensure seamless linkage between the youth's institutional preparation and reentry back into the community,
- Work with Research and Statistics staff to ensure that a mechanism is in place for the collection of data relevant to the program and conducive to statistical analysis.
- Oversee and monitor data collection process, program evaluation and reporting for the initiative, and
- Work closely with lead agency staff and community management to ensure programmatic stability and sustainment.

Reintegration Coordinators/Community Caseworker Responsibilities:

- Work with and coordinate services for family while juvenile is committed to the institution and after return to community,
- Function as liaison between the team and long-term facilities during institutional phase,
- Provide needed information to multidisciplinary team and ensure implementation of Phases I and II,
- Assist in development of juvenile's treatment and aftercare plans to be reviewed and approved by planning and review teams,
- Ensure all required services and linkages are in place before juvenile's reentry into the community,
- Develop Community Support Team for each juvenile,
- Work closely with county director to develop the Planning and Review Teams,
- Chair and serve as a member of the Planning and Review Teams,
- Advocate on behalf of juvenile and their families, and
- Follow procedures for Medicaid reimbursement,
- In the cases where juveniles will not be returning to these counties, Reintegration Coordinators will be responsible for updating new community caseworkers on all pertinent information that will assist in supervision and service provision. The Reintegration Coordinator should make every effort to communicate all changes to juvenile and/or family as applicable.

Grants Administrator

- Monitor the progress of the grant initiative
- Serve as advisor to ensure adherence to budget and program goals.
- Review and/or approve all requests for budget revisions, program changes, submission of grantor reports, and other related matters that are required to be submitted to the Grants Administrator.

Training Plan

All staff will receive training applicable to their roles. Council of Juvenile Corrections Administrators (CJCA) will play a lead role in providing training and technical assistance for DJJ's Reintegration Initiative. Training will focus on the following service categories:

Service Category	Technical Assistance Topic
Education	<ol style="list-style-type: none"> 1) Innovative educational methods for juvenile juveniles 2) Vocation/Employability skills training 3) Understanding and communicating with school officials
Substance Abuse	<ol style="list-style-type: none"> 1) Best Practice methods/models of substance abuse treatment for juveniles 2) Community Reintegration methods/models 3) Identifying needs for Substance Abuse Services
Mental Health	<ol style="list-style-type: none"> 1) Risk and Needs Assessments
Case Management	<ol style="list-style-type: none"> 1) Case Management Services 2) Intensive Aftercare Program 3) Graduated Sanctions 4) Risk and Needs assessments 5) Strength-based assessment and treatment planning 6) Balanced and Restorative Justice 7) Wrap/Support Services 8) Conflict Mediation 9) Life Skills Development 10) Empowering families to navigate and understand the educational systems 11) Building and Maintaining community collaboration 12) Cultural Sensitivity

<p>Working with Faith/Community Based Organizations Leveraging resources to ensure sustainability</p>	<ol style="list-style-type: none"> 1) Building and Maintaining community collaboration 2) Empowering families to navigate and understand the educational systems 3) Advocacy and Resources
<p>Other</p>	<ol style="list-style-type: none"> 1) Strengthening Multi-Ethnic Families 2) Teaching and Understanding appropriate school and workplace behavior/etiquette 3) Family Strengthening 4) Parent skills training 5) Suicide Prevention

Monitoring Plan

The Reintegration Director, along with staff in the Program and Grants Development Section of the Office of Policy and Planning, will provide ongoing monitoring of the Reintegration Initiative. The purpose of the monitoring is to ensure that the program is operating as intended that all required data is being collected and recorded, and that all required program activities are accomplished in a timely manner. The methods used to monitor the program will include, but are not limited to:

- Monthly reports submitted by reintegration case managers
- Monthly status reports prepared by DJJ research and statistics staff and reintegration director
- Site visits to the participating county offices
- Audits of juvenile case files
- Audits of Aftercare Treatment Plans
- Audits of reports submitted to the Juvenile Parole Board
- Observations of Juvenile Parole Board hearings for juveniles in the initiative
- Interviews and/or surveys of participating juveniles and their families
- Observations of multidisciplinary staffings at the long-term facilities
- Observations of Reintegration Planning and Review Team meetings

Evaluation Plan

A. Outcome Measures

DJJ's Reintegration Initiative will utilize the outcome measures developed by the Council of Juvenile Correctional Administrators (CJCA) Performance-based Standards (PbS) Project for Reintegration. They are as follows:

- Percent of youth confined for more than 60 days who have signed aftercare treatment plans.
- Percent of youths confined more than 60 days who have finalized and concrete written aftercare treatment plans prior to 30 days of release from the facility.
- Percent of youths who have an assigned aftercare case manager within 15 days of entry into the facility.
- Average time until aftercare case manager is assigned.
- Percent of youths who had in-person contact with aftercare case manager.
- Average rate of in-person contacts with aftercare case manager per youth per month.
- Percent of youths who know the name of their aftercare case manager and how to contact him/her.
- Percent of youths whose home has been assessed to determine its suitability for future placement.
- Percent of youths with contacts between parents/guardians and aftercare case manager.
- Percent of youths whose aftercare case manager made a family visit to the youth's home.
- Average frequency of treatment meetings per youth per month.
- Percent of youths undergoing treatment for a chronic or acute illness, injury or medical conditions at time of release whose aftercare treatment plan addresses the need for continued (or new) medical treatment.
- Percent of youths undergoing treatment for a mental health problem at time of release whose aftercare treatment plan addresses the need for continued (or new) medical treatment.

- Percent of youths undergoing treatment for a substance abuse problem at time of release whose aftercare treatment plan addresses the need for continued (or new) medical treatment.
- Percent of youths who have been referred.
- Percent of youths who needed follow-up treatment and were referred to at least one community-based service as outlined in their aftercare treatment plan.
- Percent of youths who needed follow-up health treatment and were referred to at least one community-based service as outlined in their aftercare treatment plan.
- Percent of youths who needed follow-up mental health treatment and were referred to at least one community-based service as outlined in their aftercare treatment plan.
- Percent of youths who needed follow-up substance abuse treatment and were referred to at least one community-based service as outlined in their aftercare treatment plan.
- Percent of youths who have been accepted/admitted to at least one community service agency/program prior to release.
- Percent of interviewed youths that know they are going to a community service/agency program upon release.
- Of those youths that know they are going to a program, the percent of youths that know the name and have information about the community services/agency staff he/she has been linked with before release.
- Percent of youth getting authorized leaves/passes/furloughs from the facility.
- Percent of non-English speaking youths who have reintegration plans written in an appropriate language.

B. Data Collection

1. A special database developed for the Reintegration Initiative by the office of Policy and Planning's Research and Statistics staff will be utilized to collect the data necessary to measure project performance. The database contains the information required to measure project performance.
2. Reintegration Coordinators are responsible for entering the required data onto the database.

3. The Reintegration Director is responsible for ensuring that all required data is entered onto the database within the stated time parameters and that the information is entered correctly.
4. In addition to the information collected on the database, staff in the Rehabilitative Services Division will be responsible for completing PbS Project Exit Surveys for all project juveniles two weeks or less prior to their release. These surveys are due to the Reintegration Director within 5 business days following the completion of the surveys.

C. Analysis of the Data

1. Research and Statistics staff is responsible for analyzing the data recorded on the database and on the exit surveys to determine the program's performance on each of the outcome measures.
2. Research and Statistics staff will provide quarterly updates on the program's performance, six-month progress reports, and a full written evaluation of the program on an annual basis.
3. The quarterly updates will be submitted to the Reintegration Director and the Director of Program and Grants Development the first week of the month following the month that is the subject of the report.
4. The first six month progress report is due by the end of the second week in January, and will report on the months of July to December. The second progress report is due by the end of the second week in July and will cover the months of January to June.
5. The annual written evaluation is due to the Director of Program and Grants Development by the end of August and will report on the period from June 1 to July 30 of the preceding fiscal year.

Fiscal Management Plan

All expenditures incurred in support of this initiative are subject to the rules and regulations set forth in DJJ policies, the State Comptroller General's Office and the Budget and Control Board for all staff. The grantor reserves the right to audit or decline reimbursement of any expense deemed unallowable; therefore, adherence to approved budget items is required.

1. Staff – The Reintegration Director and Reintegration Coordinators are considered Temporary Grant Employees and financial support through the SVORI grant.
 - The Reintegration Director is a member of the Office of Policy and Planning, Program and Grants Development Section and supervised by the Director of Program and Grants.
 - Reintegration Coordinators are supervised by County Directors and are subject to all rules and regulations set forth in policy as full-time staff. This means all office protocols for the approval of expenditures, leave, assignments, and other operational request must be followed.
 - The non-grant funded pilot sites are supported through regular state appropriation and are **not** subject to reimbursements through the grant.
2. Travel
 - A. Mileage is reimbursed for travel while on official business at a rate at the current allowable DJJ reimbursement rate, with supervisory approval. Each traveler must ensure the most direct routes are taken.
 - B. Hotel accommodations are reimbursable while on official business at the single room occupancy rate plus tax with supervisory approval.
3. Travel approval process – Travel documents are submitted in accordance with normal departmental operating procedures and forwarded to the Office of Fiscal Affairs for processing.
4. Requisitions – Procurement requisitions are processed in accordance with normal departmental operating procedures and forwarded to the Reintegration Director for final approval and tracking. The Reintegration Director will be responsible for forwarding the approved requisition the Office of Fiscal Affairs for processing.
5. Wrap Services – Approvals for wrap services are allowed in accordance with normal departmental operating procedures. Upon final approval, the Reintegration Coordinator is required to retain a copy of the approval form in a central file for future audit or budgetary reviews.

Operating Procedures

Note: Bold denotes lead person responsible

Phase One: Institutional Preparation Phase

Action	Persons Responsible	Timeframe
Juvenile Committed	Judge	N/A
Arrives at Agency's Admissions Center	Law Enforcement	Immediately
Complete Risk Assessment for committed juvenile	Community Case Worker	Within 24 hrs of commitment
Notify Community Caseworkers by email of the location of juvenile's commitment.	Juvenile Movement and Account Coordinator	Upon receipt of assignment list.
Determine if juvenile is eligible to participate in reintegration initiative.	Community Case Workers	Upon notification for movement
Make contact with Institutional Caseworker of initial treatment staffing and juvenile's progress.	Community Case Worker	Within 7 days of facility assignment.
Make initial contact with juvenile and family	Community Case Worker	Within 15 days of commitment assignment.
Gather and collect information pertaining to juveniles family, school and community	Community Case Worker	Within 15 days of commitment and ongoing.
Make in-person contact with juvenile and family	Community Case Worker	Within 30 days of commitment
Attend initial institutional staffing to assist in the development of Juvenile's Institutional Treatment Plan.	Community Case Worker	Within 30 days of commitment
Finalize Institutional treatment plans.	Chair of Multidisciplinary Teams	Within 30 days of commitment
Draft initial Aftercare Treatment Plan to be signed by juvenile/guardian	Community Case Worker	Within 30 Days of commitment
Chair and Coordinate Reintegration Planning and Review Team	Community Case Worker	September 30, 2003-Ongoing

Notify Reintegration Planning and Review team of juvenile's necessary community, family, and educational information.	Community Case Worker	Within 45 Days of commitment
Staff juvenile cases to review progress and determine if modifications need to be made to institutional treatment plan.	Community Case Workers, Multidisciplinary Teams, Planning and Review Teams	Quarterly
Staff juvenile cases to review progress and determine if modifications need to be made to aftercare treatment plan	Community Case Workers, Multidisciplinary Teams, Planning and Review Teams	Monthly
Visit juvenile at facility to establish and maintain relationship during commitment.	Community Case Worker	Every other month
Visit family/guardian and arrange and facilitate them meeting with juvenile.	Community Case Worker	Every other month
Broker and oversee service provision for family while juvenile is committed	Community Case Worker	Ongoing as needed
Maintain frequent communication with facility and institutional staff	Community Case Worker	Monthly
Ensure juvenile's educational progress by communicating with education staff.	Community Case Worker	Quarterly
Ensure juvenile's participation in victim impact classes	Institutional Social Worker	Weekly once session begins
Ensure juvenile has opportunities to receive based on Institutional treatment plan the following: <ul style="list-style-type: none"> • Life Skills Training • Anger Management/Conflict Resolution 	Community Caseworker	Ongoing as needed

<ul style="list-style-type: none"> • Social Skills Training • Employability Skills Training • Parenting • Communication Skills • Adventure-based Therapy • Money Management • Group or individual family counseling <p>Note: arrangement of service provision that is not available to juvenile at facility will be arranged.</p>		
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Phase Two-Pre-Release Transition Phase

Action	Persons Responsible	Timeframe
<p>Finalize aftercare treatment plan.</p> <p>This finalization will include establishing necessary dates and times for school admission, appointments with service providers, employer and role of Community Support Team etc.</p> <p>Level of surveillance and supervision that will be provided. Ensure all necessary appointments are made prior to release.</p>	<p>Community Case Worker, Multidisciplinary Team, Reintegration Team, Juvenile and Guardian</p>	<p>60 days prior to projected release.</p>
<p>Provide a copy of Aftercare Treatment to juvenile and Parent Guardian</p>	<p>Community Case Worker</p>	<p>60 days prior to anticipated release</p>

Forward Aftercare Treatment Plan to the Juvenile Parole Board Examiner. Note: The Aftercare Treatment Plan will be the official release plan recommended to Board of Juvenile Parole	Chair of Multidisciplinary Team	30 days prior to anticipated release
Meet with the Juvenile and family to finalize preparations for return to community.	Community Case Worker	Every two weeks
Develop Community Support Team for each juvenile and their family that will provide essential support and assistance to them following the return to the community.	Community Case Worker	60 days prior to anticipated release
If applicable, appear before Board of Juvenile Parole for release review. Note: Juvenile Parole Board is a separate entity and may not allow appearances.	Community Case Worker Juvenile, Guardian	Anticipated date of release
Upon release, meet to review the Aftercare Treatment plan and review guidelines of parole	Community Case Worker, Juvenile and Parent/Guardian	Anticipated date of release

Phase Three-Community Transition Phase

Action	Persons Responsible	Timeframe
Arrange Juvenile's Transportation Home	Community Case Worker	Date of Release
Maintain daily contact during week one. (At least 3 face to face visits)	Community Case Worker	Week one after released
Assist parent/guardian with enrollment of the juvenile in school and vocational job program.	Community Case Worker	Week one after released

Visit youth at educational and/or vocational site.	Community Case Worker	Weekly during month one and there after as needed
Advocate for juvenile and parent/guardian.	Community Case Worker	Ongoing as needed
Train and assist parents/guardians to advocate for their youth.	Community Case Worker	Ongoing as needed
Provide assistance in scheduling and accompanying and youth/family to meetings.	Community Case Worker	Ongoing as needed
Arrange for the provision of Wraparound Services as needed when regular interventions are beyond the ability of Community Caseworker, Community Support Teams and Community Partners.	Community Case Worker	Ongoing as needed
Ensure juvenile and family keep their scheduled appointments with service providers.	Community Case Worker	Ongoing as needed
Ensure that service providers are providing services as scheduled and that juvenile and family are engaged and benefiting from services	Community Case Worker	Ongoing as needed
Schedule the juvenile's case for review by Reintegration Planning and Review Team	Community Case Worker	Monthly in Phase III
Monitor Progress of juveniles following return from their communities <ul style="list-style-type: none"> • Team will staff the case at the first team meeting • Amend or modify Aftercare Treatment Plan as necessary. 	Community Case Worker & Reintegration Planning and Review Team	Monthly in Phase III
Provide incentives or implement graduated sanctions as directed by the Reintegration Planning and Review Team	Community Case Worker	Ongoing as needed

<p>Review case to access juvenile's readiness to move to Phase IV or extend Phase III. Readiness will be determined by juvenile's:</p> <ul style="list-style-type: none"> • Attendance/performance in school and or work; • Compliance with conditions of release such as: curfew, restitution, community service and adjustment in family/residence 	<p>Reintegration Planning and Review Team</p>	<p>90 days after juvenile is released.</p>
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Phase Four-Continuing Care Phase

Action	Persons Responsible	Timeframe
Provide minimal oversight and supervision to youth.	Community Case Worker	Three to Six Months
Reduce frequency of contact with youth as progress has been demonstrated	Community Case Worker	Once per month
Maintain regular contact with juvenile's school, vocational program, and/or employer to ensure fulfillment of their responsibilities and satisfactory progress	Community Case Worker	Ongoing as needed
Provide primary support and assistance for the youth/family.	Community Support Team	Ongoing as needed
<p>Review progress to determine the following:</p> <ul style="list-style-type: none"> • Juvenile continues to be in need of services, supervision or if services and supervision can be terminated. • If the juvenile continues to be in need to extend Phase IV for 90 	<p>Community Case Worker, Community Support Team & Reintegration Progress and Review Team</p>	<p>90 days after juveniles enter into Phase IV</p>

additional days. • If extension occurs another progress review.		
Upon successful completion of Phase IV, monitor juvenile's progress.	Community Case Worker	6 months following completion of this phase with monthly contact with juvenile/family.

Comparison Chart Current DJJ Aftercare Versus Reintegration Initiative

** PbS Standards are in bold*

Action/Activity	Current Practice	Reintegration Pilot	Results
Development of Institutional Treatment Plans	<p>Developed by Institutional Staff with limited input from DJJ Community Case Manager</p> <p>Institutional Treatment Plans contain minimal information that addresses a juvenile's return to the community</p>	<p>Community Case Manager provides detailed information to Institutional Staff on juvenile's and family's strengths and needs and release plan</p> <p>Community Case Manager attends institutional staffing to finalize treatment plan</p>	<p>Community Case Manager has significant input into Institutional treatment plans.</p> <p>Institutional treatment plans better address juvenile/ family strengths, home and community environment</p> <p>Each juvenile is treated in the context of his/her family and community situation</p> <p>Detailed release information is included in Institutional treatment plan.</p>
Communication between Institution and Community	Minimal communication via telephone and email	<p>Regular ongoing communication on juvenile/family status, progress, and needs</p> <p>Community Case Manager attends treatment team staffings at Institution</p>	<p>Community Case Manager has ongoing input into juvenile's treatment at institution</p> <p>Current information regarding juvenile's family situation and release plan is provided to institutional staff</p> <p>Community and institutional staff develop consistent treatment plans and recommendations concerning release to Juvenile Parole Board</p>

<p>Assignment of Community Case Manager</p>	<p>Assigned Community Case Manager may change while juvenile is in institution/ wilderness camp</p>	<p>Juvenile has same Community Case Manager while in institution/ wilderness camp and following his/her return to the community</p>	<p>Juvenile develops and maintains a personal relationship with Community Case Manager while in institution/ wilderness camp</p> <p>Provides continuity in programming and services for juveniles</p>
<p>Family involvement/services provided during juvenile's commitment</p>	<p>Community Case Manager has limited contact with juvenile's family during institutional commitment</p> <p>Institutional staff have limited contact/involvement with families during commitment</p> <p>Minimal services provided to address families' needs/ preparedness for juvenile's return home</p>	<p>Community Case Manager meets with and assesses family within 30 days of juvenile's commitment</p> <p>Community Case Manager develops Plan for Services to address family's strengths and needs</p> <p>Community Case Manager works with Multi-agency team in the community to provide services/support to family</p> <p>Community Case Manager develops support team for family to assist when juvenile returns home</p> <p>Families are asked for input regarding juvenile's treatment and updated concerning their progress</p> <p>Family input is included in the development of release plans</p>	<p>Families remain engaged with juveniles during their commitment</p> <p>Juvenile's home environment/family functioning is strengthened</p> <p>Release plans address family's strengths and needs</p> <p>Families are better prepared for the juvenile's return home</p> <p>Families have the support they need to be successful after the juvenile returns to the community</p> <p>All agencies working with the family develop unified treatment plans and coordinate the delivery of services</p> <p>Families are empowered – other children in the home benefit from services</p>

Community Case Manager visits to Institution	None/minimal	At a minimum, every 30 days during commitment	<p>Juveniles develop and maintain a personal relationship with their Community Case Manager</p> <p>Juveniles have input into their release plan</p> <p>Juveniles are regularly updated concerning their family and community situation</p>
Referrals and admittance to community/agency programs prior to release	<p>Institutional staff identify juvenile needs prior to release but often no referrals are made to community</p> <p>Community Case Managers often begin to make referrals after juveniles are released</p> <p>Services to juveniles are often delayed or not provided following their release – sometimes resulting in technical violations of their parole</p>	<p>Prior to release, Community Case Managers make referrals and set up appointments for services with community agencies/ service providers</p> <p>Community Case Managers ensure that juveniles have transportation to and from the service provider</p>	<p>Ensures that juveniles are referred to and admitted to community/agency programs prior to release.</p> <p>Juveniles receive the services they need to be successful following their return to the community.</p> <p>Reduction in the number of technical violations of parole for not attending or participating in community services</p>
Pre-release Community Staffing	None/minimal	Juveniles cases are staffed with Multi-agency team in the community on at least a quarterly basis while juveniles are committed to institution/wilderness camp	<p>Release plans are developed in coordination with other agencies working with the juvenile/family.</p> <p>Services needed by the juvenile are secured prior to their release.</p>
Community staff conduct a follow-up review of Juvenile's	<p>Minimal</p> <p>Focus of reviews is</p>	Community Case Manager continually monitors/reviews	Services/supervision are increased/decreased

<p>Aftercare Treatment Plan and progress made after release.</p>	<p>on compliance with conditions of parole, not necessarily progress or improvement</p>	<p>juvenile's progress once released.</p> <p>Juvenile's case is reviewed by Multi-agency team in the community within 30 days of release.</p> <p>Juveniles receive a clinical assessment of their progress at 60 – 90 days following release.</p> <p>Multi-agency team conducts quarterly review of juvenile's progress following release.</p>	<p>based on juvenile's progress</p> <p>Services are planned and coordinated with other services providers/agencies working with juvenile/family.</p> <p>Juveniles receive the services, supervision, and support they need to be successful.</p>
<p>Community Case Manager contact with juvenile and family following release.</p>	<p>1 to 2 times per month (1 face-to-face contact)</p>	<p>3 face-to-face contacts per week during first month following release – reduced as juvenile demonstrates progress.</p> <p>At a minimum weekly contacts with juvenile's family during first 30 days following release, with assistance from Community Support Team.</p>	<p>Juvenile receives the support/supervision needed to ensure he/she attends school, participates in treatment services, and complies with treatment plan/conditions of release.</p> <p>Families receive the support needed to adjust to juvenile's return and deal with problems as they arise.</p> <p>Fewer technical violations of parole.</p>
<p>Support Groups for Juveniles and Families</p>	<p>No requirement to form a support team for family.</p>	<p>Every Juvenile/Family will have a Community Support Team in place prior to the juvenile's release.</p>	<p>Families receive the support they need from caring individuals in their communities.</p> <p>Less reliance on DJJ/other agencies for</p>

			<p>support/ services.</p> <p>Support for family continues once DJJ is no longer involved with the juvenile.</p>
Use of Graduated Sanctions and Incentives	Limited	Reintegration Pilot will develop a range of graduated sanctions in pilot counties.	<p>Sanctions imposed will be in proportion to juvenile's risk/lack of progress.</p> <p>Fewer revocations/ commitments.</p>
Requests for Early Termination of Parole	Not often requested	When juveniles have demonstrated consistent progress and adequate community support is in place, requests for early termination of parole will be made to the Juvenile Parole Board.	<p>Lower community caseloads</p> <p>Fewer revocations for technical violations of parole</p>

Acronyms

(CC Worker)	Community Caseworker
(CST)	Community Support Team
(DJJ)	Department of Juvenile Justice
(IAP)	Intensive Aftercare Program
(MST)	Multisystemic Therapy
(PbS)	Performance Based Standards
(P&R Team)	Reintegration Planning and Review Team
(RP)	Reintegration Plan
(SVORI)	Serious and Violent Reentry Initiative

Glossary of Terms-Interpretations

Aftercare Case Manager

Aftercare Case Manager is the worker who is based in the community and has responsible for the youth's case once he/she is committed. The Caseworker also has responsibility for youth upon release. The Caseworker will follow the youth throughout their commitment and will also work with the family. Caseworker will also monitor and supervise youth and family situation once youth is transitioned back into the community.

Aftercare Treatment Plan

The plan developed by Reintegration coordinators 30 days after assignment to a DJJ facility. The Plan will

- Utilize "Strength Based Case Management" approach.
- Include educational/vocation, job acquisition/placement information with hours of work, transportation etc...
- Include role of community support, available service, approved recreation/leisure and youth's level of risk.
- Be approved by assigned Reintegration Planning and Review Team.

Community Caseworker

(See Aftercare Case Manager)

Community Services and Programs

Programs or services, regardless of whether or not they are residential, that a youth might go to once he or she leaves the facility.

Community Support Team

The person or a group of individuals and mentors who will serve as the primary source of support and assistance for youth/family once returned to the community during Phase IV. CST is comprised of family members, friends, business reps, local ministers and volunteers. CST will be committed to providing support in the following areas such as: mentoring, transportation, financial assistance, housing, career counseling, tutoring, school shadowing and afterschool supervision.

Intensive Aftercare Program

The model upon which DJJ's Reintegration Initiative is based. This best practice model is based on the following underlying principles:

- Preparing juveniles for progressively increased responsibility through clear expectations, positive reinforcements, immediate accountability, and consequences for misconduct;
- Facilitating interaction and involvement between juveniles and the community in recognition of the critical role that family, schooling, peers, and significant others play in the initiation and maintenance of conventional, non-delinquent lifestyles;
- Working with juveniles and targeted community support systems (families, peers, schools, employers) on the qualities needed for constructive interactions that advance reintegration;
- Developing new resources and support as needed in the areas of work, education, training, and recreation as well as services geared to special needs; and
- Monitoring and testing the juvenile and the community on their ability to interact productively.

Institutional Treatment Plan

Plan developed within first 30 days of juvenile's commitment to a facility. Plan identifies treatment services needed by juveniles while institutionalized.

Multisystemic Therapy

Multisystemic Therapy (MST) views individuals as being nested within a complex of interconnected systems that encompass individual, family, and extrafamilial (peer, school, neighborhood) factors. Behavior problems can be maintained by problematic transactions within or between any one or a combination of these systems. MST targets the specific factors in each youth's and family's ecology (family, peer, school, neighborhood, support network) that are contributing to antisocial behavior. MST interventions are pragmatic, goal oriented, and emphasize the development of family strengths. The overriding purpose of MST is to help parents to deal effectively with their youth's behavior problems, including disengagement from deviant peers and poor school performance. To accomplish the goal of family empowerment, MST also addresses identified barriers to effective parenting (e.g. parental drug abuse, parental mental health problems) and helps family members to build an indigenous social support network (e.g. with friends, extended family, neighborhoods, church members). To increase family collaboration and treatment generalization, MST is typically provided in the home, school, and other community locations by master's level counselors with low caseloads and 24 hours/day, seven days/week availability. The average duration of treatment is about four months, which includes approximately 50 hours of face-to-face therapist family contact. MST has been demonstrated as an effective treatment for decreasing the antisocial behavior of violent and chronic juvenile offenders at a cost savings---that is, reducing long-term rates of rearrest and out-of-home placement. Moreover, families receiving MST have shown extensive improvements in family functioning. (Chamberlain & Mihalic 1998)

Performance Based Standards

The Performance-based Standards (PbS) system is at the forefront of a movement within the juvenile justice and corrections field to utilize standards that focus on performance and the attainment of measurable goals. The U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention launched PbS as a project in 1995. It has been administered by CJA with technical assistance provided by Associates.

The PbS system of continuous learning and improvement provides:

1. A set of goals and standards that individual facilities and agencies should strive to meet;
2. Tools to help facilities achieve these standards through regular self-assessment and self improvement;
3. Reports that allow facilities to evaluate performance over time and in comparison to similar facilities; and
4. Promotion and sharing of effective practices and support among facilities.

CJCA's goal is to integrate PbS into daily facility operations to create a field-supported and self-sustaining continuous learning and improvement system in facilities nationwide. CJCA provides support to PbS sites through a variety of training and technical assistance efforts, which include a consultant assigned to each site to ease and guide PbS implementation.

Reintegration Coordinator

(See Aftercare Case Manager)

Reintegration Director

The staff who has responsibility for overseeing reintegration programs and is the liaison between institution and community.

Reintegration Plan

(See Aftercare Treatment Plan)

Reintegration Planning and Review Team

Composite of representatives from state and local agencies and organizations serving youth and their families in the county, including private, non-profit, and faith-based organizations, law enforcement, a solicitors office representative, probation worker and community case worker (DJJ). The team works with community case workers to help develop and review juveniles' institution and reintegration treatment plans, ensure that required services, support and supervision are in place prior to the juveniles' release. The team regularly reviews each juvenile's progress while they are in the institution and after release back into the community.

Risk Assessment Score

The risk assessment score is comprised of three elements. First element is a sub-score denoting the relative seriousness of any additional adjudicated offenses relative to either the current or past adjudication. The second element is a sub-score based on the number of prior referrals to the Family Court for delinquency. The third sub-score reflects the age of onset of delinquency based on the first recorded referral offense.

Supervision Service Plan

(See Institutional Treatment Plan)

Attachment A

Aftercare Treatment Plan

Date: _____
Name: _____ MIS: _____ DOB: _____ Age: _____
Parent/Guardian Name: _____ Phone #: _____
Parent/Guardian Address: Street _____ City _____ State _____
Zip Code: _____ County: _____
Juvenile's Current Facility/Placement: _____
Contact Person: _____ Phone # _____

Juvenile Phase Information:

Current Phase: Phase I _____ Phase II _____ Phase III _____ Phase IV _____
Phase I: Projected Completion Date _____ Actual Completion Date _____
Phase II: Projected Completion Date _____ Actual Completion Date _____
Phase III: Projected Completion Date _____ Actual Completion Date _____
Phase IV: Projected Completion Date _____ Actual Completion Date _____

ALERTS!! List any serious medical, psychological, substance abuse or other conditions:

- 1. _____
- 2. _____
- 3. _____

Release Information:

Where will the juvenile live upon release? Parent/guardian _____ Other _____
If placement is other than the parent's/guardian's home, provide the following information:
Name of placement _____
Address: _____
Person responsible for juvenile: _____
Relationship to juvenile: _____ Phone # _____

Parole/Sentencing Information:

Guidelines/Sentence: _____ Minimum/Release Date: _____
Type of Commitment: Indeterminate _____ Determinate w/Probation After Release _____
Date of Commitment: _____ Victim Notification Required? Yes _____ No _____
Restitution required? Yes _____ No _____ If yes, amount: _____
Community service required? Yes _____ No _____ If yes, # of hours: _____
Length of Probation/Parole Following Release: _____

Strengths: List the juvenile's/family's strengths

- 1. _____ 2. _____
- 3. _____ 4. _____

5. _____ 6. _____

Needs: List the juvenile's/family's needs

1. _____ 2. _____

3. _____ 4. _____

5. _____ 6. _____

Treatment Planning Section

Goals/Objectives:

Goal 1: _____

Activity/Service to Achieve Goal: _____

Projected Completion Date: _____ Person Responsible _____

Status of Goal: _____ Actual Completion Date: _____

Referred to: _____ Date: _____

Contact Person: _____ Phone # _____

Reason for referral: _____

Status of referral: _____

Approved for services? Yes _____ No _____ If no, why not? _____

Appointment made? Yes _____ No _____ If yes, date/time: _____

What service will be provided? _____

How long will services be needed? _____

Will transportation assistance be needed to access services? Yes _____ No _____

If "yes," who will provide transportation? _____

Goal 2: _____

Activity/Service to Achieve Goal: _____

Projected Completion Date: _____ Person Responsible _____

Status of Goal: _____ Actual Completion Date: _____

Referred to: _____ Date: _____

Contact Person: _____ Phone # _____

Reason for referral: _____

Status of referral: _____

Approved for services? Yes _____ No _____ If no, why not? _____

Appointment made? Yes _____ No _____ If yes, date/time: _____

What service will be provided? _____

How long will services be needed? _____

Will transportation assistance be needed to access services? Yes _____ No _____

If "yes," who will provide transportation? _____

Goal 3: _____

Activity/Service to Achieve Goal: _____

Projected Completion Date: _____ Person Responsible _____

Status of Goal: _____ Actual Completion Date: _____

Referred to: _____ Date: _____

Contact Person: _____ Phone # _____

Reason for referral: _____

Status of referral: _____

Approved for services? Yes ____ No ____ If no, why not? _____

Appointment made? Yes ____ No ____ If yes, date/time: _____

What service will be provided? _____

How long will services be needed? _____

Will transportation assistance be needed to access services? Yes ____ No ____

If "yes," who will provide transportation? _____

Goal 4: _____

Activity/Service to Achieve Goal: _____

Projected Completion Date: _____ Person Responsible _____

Status of Goal: _____ Actual Completion Date: _____

Referred to: _____ Date: _____

Contact Person: _____ Phone # _____

Reason for referral: _____

Status of referral: _____

Approved for services? Yes ____ No ____ If no, why not? _____

Appointment made? Yes ____ No ____ If yes, date/time: _____

What service will be provided? _____

How long will services be needed? _____

Will transportation assistance be needed to access services? Yes ____ No ____

If "yes," who will provide transportation? _____

Educational/Vocational Plan:

1. Will the juvenile attend school following release? Yes ____ No ____ If "yes," what school will he/she attend? _____

What grade? _____ What degree/program? Diploma ____ GED ____

Certificate: ____ Other: _____

If "no," why will he/she not be attending school? _____

What is the alternative educational plan? _____

2. Will he/she have a job following release? Yes ____ No ____ Undecided ____

a. If yes, where will he/she work? _____

b. What days/hours will he/she work? _____

c. At what salary/hourly wage? _____

- d. How will he/she get to and from work? _____
- e. Will he/she give a portion of earnings to parent/guardian? Yes _____ No _____
- f. If restitution is owed, what portion of earnings will go towards restitution? _____

Peer Associations

- A. List any "friends" or peers with whom the juvenile is no longer permitted to associate:
 - 1. _____ 2. _____
 - 3. _____ 4. _____
 - 5. _____ 6. _____
- B. List any friends or peers with whom the juvenile is permitted to associate:
 - 1. _____ 2. _____
 - 3. _____ 4. _____
 - 5. _____ 6. _____

Recreational/Leisure Activities:

What recreational or leisure activities will the juvenile participate in following his/her return to the community? At what dates/times and where will they take place?

- 1. Activity _____ Location: _____
 Dates/Times of Activity: _____
- 2. Activity _____ Location: _____
 Dates/Times of Activity: _____

Religious/Spiritual Activities:

What religious/spiritual activities will the juvenile participate in following his/her return to the community? At what dates/times and where will they take place?

- 1. Activity _____ Location: _____
 Dates/Times of Activity: _____
- 2. Activity _____ Location: _____
 Dates/Times of Activity: _____

Reporting Requirements:

How often will the juvenile be required to meet with his/her Case Manager? _____
 Where will the meetings take place? _____
 Will the juvenile require transportation to attend the meetings? Yes _____ No _____
 If yes, who will provide transportation? _____

Attachment B

Reintegration Planning and Review Team Description

The primary purpose of the Reintegration Planning and Review Team (P&R Team) is to staff, plan, monitor and provide supportive services to juveniles and their families in the project. The team will meet on a monthly basis and will have the following roles and responsibilities:

Phase I - Institutional Preparation Phase

The Institutional Preparation Phase begins when a juvenile is committed to a DJJ facility. The main objectives to be accomplished during the phase are:

- The creation of individualized Supervision and Service Plans to guide the delivery of services to juveniles while committed to a long-term facility.
- The creation of a Family Service Plan to guide the delivery of services to families while the juvenile is committed to a long-term facility.
- The provision of services to the juvenile to help prepare them for successful reintegration into the community.
- The provision of services to families to help prepare them for the juvenile's return to the community.

During this phase the Reintegration Planning and Review Team will be responsible for:

- Staffing a juvenile's case at the first team meeting following the juvenile's inclusion in the Reintegration Initiative.
- Assisting the Community Caseworker in the development of the juvenile's Aftercare Treatment Plan.
- Reviewing the juvenile's case quarterly during his/her time in the institution.
- Identifying the services needed by the juvenile and their family while juvenile is committed.
- Planning and coordinating services to the juvenile's family.

Phase II- Pre-Release Transition Phase

The Pre-Release Transition Phase begins 90 days prior to a juvenile's expected release from a DJJ long-term facility and continues until his/her return to the community. The main objectives to be accomplished during this phase are:

- The finalization of the Aftercare Treatment Plans to ensure that needed services and supervision are in place when the juvenile returns to the community;
- The establishment of a close working relationship between the Community Caseworker and the juvenile and his/her family;
- The final preparation of the juvenile's family and his/her Community Support Team for the juvenile's return to the community; and
- The linkage of services between the long-term facility and the juvenile's community to ensure a seamless transition of services as the juvenile returns to the community

During this phase the Reintegration Planning and Review Team will be responsible for:

- Assisting the Community Caseworker in finalizing Aftercare Treatment Plans, which must be completed 60 days prior to a juvenile's anticipated release.
- Ensuring that needed services and supervision are in place in the community prior to the juvenile's release.

Phase III -Community Transition Phase

The Community Transition Phase begins on the day juvenile returns to the community and continues for approximately 90 days. The main objectives to be accomplished during this phase are:

- Ensuring that juveniles and their families receive the services, support, and supervision that are outlined on the juvenile's Aftercare Treatment Plan;
- Ensuring the juvenile's successful adjustment and reintegration into the community;

During this phase the Reintegration Planning and Review Team will be responsible for:

- Staffing the juvenile's case on a monthly basis.
- Amending or modifying Aftercare Treatment Plans as necessary, offering additional services and/or supervision that may be needed based on the juvenile's progress.

- Providing incentives for juveniles whom are making satisfactory progress and recommending sanctions for juveniles that are not demonstrating satisfactory progress.
- Formally reviewing the juvenile's progress at 90 days following his/her return to the community to determine if he/she is ready to enter the next phase of the project or needs to continue in Phase III.

Phase IV-Continuing Care Phase

Juveniles enter the Continuing Care Phase of the project once they have successfully completed the Community Transition Phase and are recommended for Phase IV by the Reintegration Planning and Review Team. Juveniles will remain in this phase as long as they are under DJJ supervision.

The main objective to be accomplished during this phase is to prepare the juvenile, his/her family, and Community Support Team to function successfully once the juvenile is no longer under DJJ supervision.

The intensive level of services provided during the Community Transition Phase will be gradually phased out, although wraparound or other services may still be provided based on the juvenile's and/or his/her family's continuing needs.

The Community Support Team will provide the primary support and assistance for the youth and their family during this phase, with the Reentry Coordinator providing ongoing monitoring of the youth's progress.

During this phase the Reintegration Planning and Review Team will be responsible for:

- Continuing to monitor juveniles' cases on a monthly basis (Note: juveniles will not be required to appear before the team unless specifically requested to do so.)
- Recommending additional services or supervision as needed. The team may recommend a juvenile return to Phase III of the project based on his/her unsatisfactory progress in Phase IV. (If this occurs the team will staff the juvenile's case after 90 days to determine the juvenile's readiness to reenter Phase IV.)
- Please note that after successful completion of all phases the expectation is that a recommendation will be made to the Juvenile Parole Board to terminate the juvenile's probation or parole.