I. AUTHORITY

The Commissioner of Corrections adopts this policy pursuant to the authority contained in Title 34-A M.R.S.A. Section 1403.

II. APPLICABILITY

All Departmental Juvenile Facilities

III. POLICY

The facility Superintendent, or designee, shall implement the phase system, which shall provide a formal mechanism for providing committed residents with individual and common goals of criminogenic risk reduction during their stay and individual feedback on their progress toward achieving these goals. The Phase System shall also create opportunities, when appropriate, for residents to demonstrate the capacity to function increasingly independently, with a graduated decrease in supervision.

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Procedure A: Cognitive and Behavioral Goals

1. Staff must be aware of cognitive or behavioral goals specific to each committed resident and provide regular feedback to the resident on his or her progress on these goals. Residents shall also be aware of their specific cognitive or behavioral goals.

2. Behavioral goals shall be objective, observable, written in positive terms and be specific enough to ensure that the resident and staff understand what is expected. Cognitive goals shall be equally specific and based on assessment.

3. Cognitive and behavioral goals to be included in the initial case plan for each committed resident shall be established by the Unit Treatment Team (UTT), based on the resident’s presenting behavior, history, assessments completed during the assessment and orientation process, and any other pertinent information. The resident’s Unit Treatment Team shall review the case plan on an ongoing (usually monthly) basis. As goals are achieved, new goals shall be established as necessary. If goals are not achieved, the case plan shall be modified. The Juvenile Program Manager (JPM) shall oversee the creation, periodic review, and revision of case plans for each committed resident and ensure that these are completed in a timely manner.

Procedure B: Documentation of Resident Behaviors and Progress

1. Daily Behavior Sheet (Attachment A):

   a. The Daily Behavior Sheet (DBS) is the primary document for recording behavioral observations and progress in achieving behavioral goals for a committed resident during Phases 1 and 2, and for recording behavioral observations for all residents who are not committed.

   b. Each committed resident shall receive a new DBS each morning and shall carry the sheet on his or her person throughout the day. Unit staff shall collect the completed sheets at the end of each day and forward them to the resident’s coach. For a resident who is not committed, unit staff shall retain the DBS.

   c. The DBS shall contain the resident’s name, resident’s MDOC number, unit/room assignment, date, and target behaviors specific to the resident (if committed).
d. The DBS shall also contain a section for staff rating of a resident’s behavior. These ratings should be related, as much as possible, to behavior, including the use of coping skills and interpersonal interactions, in order to provide feedback and reinforcement specific to each resident. Rating periods for each resident shall be designated by the Unit Treatment Team and used by staff to provide feedback about the resident’s behavior.

e. The DBS shall also contain a section for staff to record comments relevant to behavior, including any discipline imposed and any commendable behavior, which is behavior that goes beyond expectations. Staff shall evaluate and record observations of behavior by residents under their supervision during each designated time frame.

f. A committed resident who has been approved by Classification to advance to Phase 3 may apply to the Unit Treatment Team to discontinue the use of the DBS. The Unit Treatment Team shall review the request and determine if the DBS is still required as part of the resident’s program. The DBS may be continued or reinstated if the Unit Treatment Team determines that tool is needed programmatically to assist the resident in Phase Advancement.

g. A committed resident who has been approved by Classification to advance to Phase 4 shall no longer be subject to the use of the DBS.

2. Cognitive Skills Group Rating Sheet (Attachment B)

   a. The Cognitive Skills Group Rating Sheet is the primary document for recording progress in achieving cognitive goals for a committed resident.

   b. The group facilitator for each cognitive skills group shall complete the Cognitive Skills Group Rating Sheet for each resident in the group.

   c. The group facilitator shall forward the Cognitive Skills Group Rating Sheet to the resident’s coach.


   a. Each resident’s Coach or, in the Coach’s absence, the Juvenile Program Manager, or designee, shall complete a Weekly Coach Report, which includes, but is not limited to:

      1. A summary of the resident’s behavior and progress in achieving behavior and cognitive goals based on a review of the Daily Behavior Sheets, Cognitive Skills Group Rating Sheet, the Coach’s observations of and interactions with the resident, reports from staff regarding the resident’s behavior and progress while participating in programs or receiving
services, any informal consequence forms, the unit log book, and any misconduct reports.

2. A qualitative assessment of progress made toward goals

3. A section to record commendable behaviors and discipline imposed

4. Any recommendations related to possible changes in phase and/or level for the resident, based on the resident’s progress in achieving treatment goals during preceding weeks.

   b. The Coach shall review the report with the resident. The resident shall have an opportunity to provide written comments on the Weekly Coach Report form.

   c. The Coach shall forward the report to the Juvenile Program Manager, or designee, for review, along with any DBS noting unacceptable behavior. All other DBSs shall be discarded appropriately, using precautions to protect resident confidentiality.

Procedure C: Phase Determination

1. The phase system reflects a resident's progress in achieving and maintaining adaptive behavior, meeting cognitive goals, and demonstrating an increased capacity for independence and positive role modeling.

2. The phase system shall be used only for residents committed for an indeterminate period.

3. A system of progressive phases, with each phase building on the behavioral and cognitive skills expected, progress achieved of the previous phase, and criteria for advancing in phases shall be implemented in accordance with the Criteria for Phase Advancement. (Attachment D)

4. Criteria for phase advancement shall include the maintenance of acceptable behavior, progress toward individualized cognitive goals, and demonstration of a capacity for increased independence and of positive role modeling in the facility.

5. Any recommendation for phase advancement shall be made by the resident’s Unit Treatment Team to the Director of Classification, or designee, who shall conduct a Phase Advancement Review pursuant to Juvenile Policy 18.2, Classification Committee.

6. Any recommendation for a drop in phase shall be made by the resident’s Unit Treatment Team to the Director of Classification, or designee, who shall conduct a Special Review pursuant to Juvenile Policy 18.2, Classification Committee. A drop
in phase is not intended as a punitive measure, but rather as an indication that the resident no longer meets the criteria for a higher phase.

7. Decision of the Classification Committee with regards to a resident’s phase are subject to change only by the Superintendent, or designee.

Procedure D: Levels and Privileges

1. The level system measures a resident’s short-term progress in achieving and maintaining appropriate behavior in Phase 1 and 2.

2. A system of progressive levels and privileges associated with each level shall be implemented in accordance with the Level Privileges list (Attachment E).

3. Each resident shall earn privileges commensurate with acceptable behavior and progress on target behaviors during the preceding seven (7) days. A resident may advance, stay at the current level, or be dropped in level, based on the resident’s behavior during the preceding seven (7) days.

4. A recommendation on the appropriate level for a resident shall be completed by the resident’s Coach or, in the Coach’s absence, by the unit Social Worker, and submitted to the Resident’s Juvenile Program Manager, on a weekly basis. The Juvenile Program Manager, or designee, may continue or adjust the resident’s level after reviewing the recommendation.

5. The Juvenile Program Manager, or designee, may adjust the resident’s level on an interim basis at any time during the seven (7) day period, to reflect the resident’s current behavior.

6. The Unit Treatment Team may make a recommendation for a resident who is unable to progress in level to have his/her level evaluated on a daily rather than weekly basis. The Juvenile Program Manager, or designee, shall determine whether to accept the recommendation and, if so, shall continue or adjust the resident’s level as appropriate. The Unit Treatment Team may make a recommendation for a resident’s evaluation to be returned to a weekly basis. The Juvenile Program Manager, or designee, shall determine whether to accept the recommendation.

7. A resident who has been approved for Phase 3 and discontinuation of the DBS or who has been approved for Phase 4 shall be awarded privileges as outlined for the highest level, unless the resident’s behavior results in a drop in Phase to Phase 1 or 2, or the reinstitution of the DBS. Reinstatement of the DBS automatically results in the reinstatement of the level system.
Procedure E:  Juveniles Returned for Violation of Community Reintegration

1. A resident who is returned to a facility for violating conditions of the community reintegration agreement shall be placed on Phase 1 until the Reclassification Conference. See Policy 18.2, Classification Committee.

2. At the Reclassification Conference, a determination shall be made regarding whether the resident will be re-released or remain at the facility. If the resident is to remain, the resident shall be assigned a temporary phase until the Special Review. At the Special Review, the resident shall be assigned a phase, based on information presented, to include a recommendation by the resident’s Unit Treatment Team.

3. A resident who has returned to the facility for a reason other than violating conditions of the community reintegration agreement shall be placed on the Phase the resident had achieved prior to placement on community reintegration status.

Procedure F:  Quality Assurance

1. A review of the resident privileges list shall be conducted as necessary, but no less than annually, by the Superintendent, or designee. Recommendations for changes shall be forwarded to the Department’s Policy Development Coordinator.

2. This policy and procedures shall be reviewed, at least annually, by the Superintendent, or designee. Recommendations for changes shall be forwarded to the Department’s Policy Development Coordinator.

VII. PROFESSIONAL STANDARDS:

ACA:

4-JCF-3B-01 Within 24 hours of admission, facility staff provide a rulebook and discuss with the juvenile:

1. Rules governing conduct
2. Chargeable offenses
3. The range of penalties
4. Disciplinary procedures
5. Incentives for good behavior

Receipt of the rulebook is documented by a statement signed and dated by the juvenile and staff. When a literacy or communication problem exists, a staff member assists the juvenile. Juveniles receive written orientation materials and/or translations in their language if they do not understand English. Interpreters are available, as required, for communicating with the juvenile in a manner the juvenile can understand.
4-JCF-3B-04  All personnel who work with juveniles receive sufficient training so that they are familiar with the rules of juvenile conduct, the rationale for the rules, and the sanctions available. Staff and juveniles are aware of the guidelines for informal resolution of minor misbehavior and reward by privilege for minor accomplishments.

4-JCF-3B-07  Juvenile rules and disciplinary regulations describe violations, sanctions, and penalties. Incentives for good behavior are described. Facility rules, regulations, and rewards are reviewed at least annually and updated, if necessary. All program rules and regulations and rewards or incentives pertaining to juveniles are conspicuously posted in the facility or included in a handbook that is accessible to all juveniles, parent/guardians, and staff.