



DIVISION of YOUTH CORRECTIONS REGIONAL AUDIT STANDARDS

REVISED MARCH 2015

68 REGIONAL STANDARDS FISCAL YEAR 2014/15

GENERAL ADMINISTRATION

RGA 1.0:

Within the context of the Division of Youth Correction's "Vision", "Mission Statement", and "Master Goals" each Regional Office shall develop goals and measurable objectives appropriate to its purpose and aligned to the 5 Key Strategies and 5 Core Values. The goals and objectives shall be reviewed annually and updated as necessary. All regional staff shall have an understanding of the goals.

AUDIT MEASURES:

- A. Review of goals.
- B. Interview staff.

FISCAL MANAGEMENT

RFM 2.0:

Financial implementing procedures shall cover at a minimum:

- Petty cash is appropriately spent, tracked and documented.
- Signature control for purchase orders.
- Gift cards are signed for, receipts are present and balanced.
- Procurement card has appropriate expenditures, statements signed by authorized person, audit responses are timely.

AUDIT MEASURES:

- A. Review of procurement card.
- B. Review of gift cards.
- C. Review of petty cash.
- D. Review of budget.
- E. Review (CDHS) state audit results.

RFM 3.0:

TRIENNIAL monitoring shall be conducted for non-residential parole services for all parolees receiving such services in each region.

AUDIT MEASURES:

- A. Review of non-residential monitoring reports.
- B. Tracking system assuring all services billed have been provided.

RFM 4.0:

Contract files include signed billing documents, copy of contract, copy of current insurance and monitoring reports.

AUDIT MEASURE:

- A. Review of contract files.

HUMAN RESOURCES

RHR 1.0:

Copies of Division of Youth Corrections' Policies and specific Regional Implementing Procedures shall be available and accessible. All staff shall sign a statement acknowledging access to the policies and implementing procedures and his/her own responsibility for being aware of the contents.

AUDIT MEASURES:

- A. Availability of current policies and procedures.
- B. Signed acknowledgements of policies and applicable implementing procedures.

RHR 2.0:

The Regional Office shall maintain a current, accurate, confidential personnel record for all staff. Records shall be kept in a locked file. Each file shall contain an emergency contact sheet, signed and CURRENT PDQ, current PMAP, signed acknowledgement of policies, and signed confidentiality, PREA and HIPAA statements.

AUDIT MEASURE:

- A. Staff personnel files.

RHR 3.0:

An annual PMAP review and mid-year review of all staff shall be conducted within the established time line. The review shall be based on defined criteria and the results discussed with the staff.

AUDIT MEASURE:

- A. Copies of performance evaluations with appropriate signatures in personnel files.

RHR 5.0:

A staff shall be assigned who is responsible for operating the intern and volunteer service program, to include background screening when applicable, training and orientation prior to assignment, identification badge when applicable, and copies of licensure or certification when preformatting professional services.

AUDIT MEASURES:

- A. Name of assigned staff.
- B. Review files for application, agreement, orientation, background clearance, licensing etc...
- C. Review sign-in process.
- D. Review identification process.
- E. Review training records.

RHR 10.0:

Interns and volunteers shall agree in writing to abide by the Regional policies and procedures, particularly those relating to the security and confidentiality of information. Signed acknowledgements of policy and procedure, PREA, HIPAA, child abuse reporting and confidentiality shall be completed by all volunteers working in the Region.

AUDIT MEASURE:

- A. Signed acknowledgements in the files for interns and volunteers working in the Region.

TRAINING AND STAFF DEVELOPMENT

- A. To be in compliance, 100% of each respective staff classification must meet applicable training standards as stated in the Division of Youth Corrections' Policy 4.2, or must have an individualized make-up plan adhering to the following requirements.
- B. Proof of training must be provided to support documentation in the COLORADO Trails database.

RTS 1.0:

The Regional staff development and training program shall be planned and coordinated by a designated regional staff member. All training delivered on-site shall be done by a qualified and/or certified trainer in the area in which he/she is presenting.

AUDIT MEASURES:

- A. Name(s) of assigned staff.
- B. Trainer certificate(s).
- C. Compliance with Division of Youth Corrections' Policy 4.2 requirements.

RTS 2.0:

The Regional training plan shall be developed, evaluated, and updated based on an annual assessment that identifies current job-related training needs and aligns with state-wide initiatives. All trainings mandated by the Central Office shall be identified in the annual training plan.

AUDIT MEASURE:

- A. A copy of the current annual training plan.

RTS 3.0:

Newly hired Division of Youth Corrections' Client Managers who provide services to juveniles shall receive 120 hours of training their first year of employment. The academy subjects must be completed within 60 days of their employment starting date.

RTS 4.0:

The above listed job group shall receive 40 hours of annual training each subsequent year of employment to include at a minimum the Division of Youth Corrections' Policy 4.2 listed annual trainings.

RTS 5.0:

Newly hired Division of Youth Corrections' personnel who have minimal/no juvenile contact shall receive 88 hours of training their first year of employment. The academy subjects must be completed within 60 days of their employment starting date.

RTS 6.0:

The above listed job group shall receive 16 hours of annual training each subsequent year of employment to include at a minimum the Division of Youth Corrections' Policy 4.2 listed annual trainings and other subjects as determined.

RTS 7.0:

Newly hired Division of Youth Corrections' Administrative/Management personnel shall receive 84 hours of training their first year of employment. The academy subjects must be completed within 90 days of their employment starting date.

RTS 8.0:

The above listed job group shall receive 40 hours of annual training each subsequent year of employment to include at a minimum the Division of Youth Corrections' Policy 4.2 listed annual trainings and other subjects as determined.

RTS 9.0:

Personnel that directly supervise subordinate staff complete trainings required in Policy 4.2.

SAFETY AND EMERGENCY PROCEDURES

RSE 2.0:

The office shall conform to applicable federal, state, and/or local fire safety codes. Compliance is documented by the authority having jurisdiction. A fire alarm and automatic detection system shall be required, as approved by the authority having jurisdiction, or there shall be a plan for addressing these or other deficiencies within a reasonable time period. The authority having jurisdiction shall approve any variances, exceptions, or equivalencies that do not constitute a serious life safety threat to the occupants of the office.

AUDIT MEASURES:

- A. Copies of inspections and exception.
- B. Documentation of request of inspection if not available.
- C. Documentation of correspondence with maintenance or building manager.

RSE 4.0:

There shall be a quarterly fire and safety inspections of the office and fire safety equipment.

AUDIT MEASURES:

- A. Documentation of qualifications of THE staff fire and safety inspector.
- B. Documentation of quarterly inspections showing 75% compliance.
- C. Documentation of deficiencies addressed and/or reported.

RSE 4.1:

Annually, 70% of the regional staff shall participate in a fire drill. Completion of the fire drill shall be conducted at least five months apart from the completion of the annual emergency disaster drill.

AUDIT MEASURE:

- A. Documentation of fire drill.

RSE 4.2:

Annually, 70% of the regional staff shall participate in an emergency disaster drill. Completion of the emergency disaster drill shall be conducted at least five months apart from the completion of the annual fire drill.

AUDIT MEASURE:

- A. Documentation of emergency disaster drill.

RSE 5.0:

State owned offices shall be equipped with non-combustible receptacles for smoking materials located at least 15 feet away from the building. All State employees shall be at least 15 feet away from state owned and leased offices when smoking.

AUDIT MEASURE:

- A. Visual observation.

RSE 7.0:

The office shall have a written safety program manual per Policy 8.2 prepared in the event of fire or major emergency. The manual shall be reviewed annually and updated as needed. The manual shall include all areas noted in Policy 8.2, to include the following:

- Location of building/room floor plan.
- Use of exit signs and directional arrows for traffic flow.
- Location of publicly posted plan.
- Annual emergency drills.
- Annual fire drills.

AUDIT MEASURE:

- A. Review of manual.

RSE 8.0:

The office shall maintain a safe and sanitary environment with all mechanical, plumbing and electrical systems in proper working order, and furniture and equipment in good condition.

AUDIT MEASURES:

- A. Visual observation.
- B. Documentation showing maintenance or building manager notified of deficiencies.

RSE 9.0:

All doors and hallways shall be kept free from obstruction.

AUDIT MEASURE:

- A. Visual observation.

RSE 11.0:

First-aid kit(s) shall be available in the office and in the vehicles used by the Regional Office. First-aid kits shall be inspected at minimum twice per year.

AUDIT MEASURES:

- A. Documentation regarding location, contents, and periodic inspection of first aid kits
- B. Inspection of first-aid kit(s)

RSE 12.0:

AED'S shall be available in offices and inspected monthly.

AUDIT MEASURE:

- A. Documentation of inspection.

SECURITY AND CONTROL

RSC 1.0:

There shall be specific procedures to govern the availability, control, and use of security devices such as cuffs and shackles, with quarterly inspection of the devices.

AUDIT MEASURES:

- A. Inventory of security devices.
- B. Sign-out and sign-in log for security devices.
- C. Quarterly inspection of security devices.

RSC 2.0:

All Critical Incidents within Regional Office responsibility are to be reported in the Colorado Trails database. The report shall be reviewed and locked in the Colorado Trails database by the Regional Director or designee. All COLORADO Trails DATABASE entries shall be completed within 5 business days of the incident.

AUDIT MEASURES:

- A. Incident Reports/Critical Incident Reports documented in the Colorado Trails database.
- B. Review of completion date.
- C. Review of date locked.

RSC 4.0:

There shall be specific policies and procedures to govern the use and security of vehicles.

AUDIT MEASURES:

- A. Review of vehicle use logs.
- B. Copy of current procedures.

RSC 6.0:

Regional Offices shall monitor the entrance and exit of visitors.

AUDIT MEASURES:

- A. Written procedures.
- B. Review of system.

RSC 7.0:

An implementing procedure shall be in place to address Client Manager Safety while in the community, to include signing out, location and cell phone availability.

AUDIT MEASURE:

- A. Review of procedure.

RSC 8.0:

All safety protocol shall be followed in the office, to include locking external doors and securing vehicle keys, file cabinet keys, and office equipment/supply closets while employees are not present.

AUDIT MEASURE:

- A. Visual observation.

CASE MANAGEMENT SERVICES

RCS 1.0:

In the event of a traumatic incident (such as, a suicide attempt or injury resulting in severe traumatic injury to staff or juveniles) a trained professional or agency (from outside the Region) shall be asked to provide critical de-briefing to help affected parties as necessary.

AUDIT MEASURES:

- A. Review of Regional Office procedures.
- B. Review of Critical Incident.

RCS 2.0:

A Discrete Case Plan (DCP) is designed and updated within the time frame of the policy for each juvenile that includes measurable criteria of expected behavior and accomplishments based on the Colorado Juvenile Risk Assessment (CJRA) and other assessment results. A time schedule for achievement is included. The DCP shall be input into the Colorado Trails database and updates to the DCP shall be clearly documented on the MDT/DCP review section in COLORADO Trails DATABASE.

AUDIT MEASURES:

- A. Review of files.
- B. Review of COLORADO Trails DATABASE.

RCS 4.0:

Regional Office supervisors shall complete four field supervisions, one MDT, REVIEW one MI coding and four quarterly case reviews per PMAP year for each client manager within their supervision.

AUDIT MEASURE:

- A. Review of the Regional Office supervisor's documentation and process of review.

RCS 5.0:

The Client Manager/Parole Officer shall form a Multidisciplinary Team (MDT) for juveniles on their caseload. All juveniles shall have an MDT for assessment. MDT/DCP meetings are documented in COLORADO Trails DATABASE and denote member participation.

AUDIT MEASURE:

- A. Review of the MDT/DCP review notes.

RCS 7.0:

The Client Manager shall review the DCP monthly, completing information on the monthly review form and in Colorado Trails DATABASE. The monthly review shall include progress changes to services, transition, changes to placement, and safety of the juvenile.

AUDIT MEASURES:

- A. Review of monthly review forms.
- B. Review of Colorado Trails database.

RCS 8.0:

Each juvenile shall have a current Colorado Juvenile Risk Assessment (CJRA), which is updated when preparing for a community review board hearing, prior to transition to higher or lower level of care, within sixty days prior to the transition MDT/DCP review meeting. A CJRA SHALL ALSO BE COMPLETED between 30-90 days following the release to parole, and at discharge.

AUDIT MEASURE:

- A. Review of CJRA.

RCS 9.0:

Length-of-stay (los) shall be kept current in COLORADO Trails DATABASE and supervisors shall have a means to monitor accuracy.

AUDIT MEASURES:

- A. Review of COLORADO Trails DATABASE.
- B. Supervisor Review.

RCS 10.0:

Documentation demonstrates attempts made to involve the family

AUDIT MEASURES:

- A. Review of Colorado Trails database.
- B. Review of client file.

RCS 11.0:

Specific policy and procedures require the reporting of all instances of child abuse and/or neglect WITHIN ONE HOUR, to include third party allegations of abuse, consistent with appropriate state or local laws.

AUDIT MEASURE:

- A. Critical Incident and Incident/Informational reports documented in the Colorado Trails database

GENERAL PROGRAMS

RGP 1.0:

Restorative Community Justice Values and principles are integrated into the overall Regional philosophy by the following measures; RCJ PROJECTS, REGIONAL GOALS, MEETING MINUTES, LOCAL COMMUNITY INVOLVEMENT, AND STAFF KNOWLEDGE OF RCJ.

AUDIT MEASURES:

- A. RCJ projects, documentation.
- B. Regional RCJ goals.
- C. Local community involvement.
- D. STAFF INTERVIEWS.

RGP 2.0:

Each Division of Youth Correction's Regional Office shall establish a Victim Notification Program to ensure proper identification of and notification to victims of committed juveniles in accordance with the Colorado

Victim Rights Act, enabling legislation (C.R.S. 24-4.1-301 through 304) and the Division of Youth Corrections' Policy 1.12B.

AUDIT MEASURES:

- A. Interview with staff responsible for program.
- B. Review of victim notification files.
- C. Review of COLORADO Trails database.
- D. Review regional quality assurance process.

RGP 2.1:

The confidentiality of any identifying information regarding victims shall be securely maintained.

AUDIT MEASURE:

- A. Review of victim notification files.
- B. REVIEW OF CASE FILES.

RGP 2.2:

Client Managers shall be responsible for notification to the Regional Victim Notification Coordinator of critical stages identified in C.R.S. 24-4.1-301 through 304 and Division of Youth Corrections' Policy 1.12B. This includes hearings, movements and status changes of the juvenile in accordance with the time frames identified by Division of Youth Corrections' Policy 1.12B. Notification to the Regional Victim Notification Coordinator must be in writing either by fax or e-mail and shall be maintained in the Victim Notification file.

AUDIT MEASURES:

- A. Review of victim notification program files.
- B. Review of victim notification tracking sheet.
- C. Review of current victim notification forms.

RGP 2.3:

The Regional Victim Notification Coordinator shall send all identified victim(s) the initial victim notification and accompanying documents within thirty (30) days of a juvenile entering assessment. The victim shall receive subsequent notification regarding critical stages identified in C.R.S. 24-4.1-301 through 304 and Division of Youth Corrections' Policy 1.12B including hearings, movements and status changes of the juvenile. Notifications to victims shall be made within 24 hours of receipt of the notification from a Client Manager, excluding weekends and holidays. If requirement per Policy 1.12 is less than 24-hours, the timeframe in policy shall be followed.

AUDIT MEASURES:

- A. Review of Colorado Trails database letter history.
- B. Review of victim file.
- C. Review of victim notification tracking sheet.
- D. REVIEW OF REGIONAL QUALITY ASSURANCE PROCESS.

RGP 2.4:

Enrolled victims shall be notified immediately of any escape, and notified as soon as possible of any return from escape.

AUDIT MEASURES:

- A. Review of victim file.
- B. Review of Colorado Trails database letter history.

C. Review of victim notification tracking sheet.

RGP 4.0:

Juveniles moved to a more secure setting are afforded due process within the timeframe noted in policy.

AUDIT MEASURE:

A. Review of file.

RGP 5.0:

Residential contract facilities are monitored within the required time frames. Action plans submitted by the contract agency shall be reviewed during the following monitoring visit and documentation shall be made on the monitoring report.

AUDIT MEASURES:

- A. Interview with assigned staff.
- B. Review of monitoring documents.

JUVENILE RECORDS

RRC 1.0:

The Regional Office maintains a record on each juvenile; the contents of the hardcopy records are identified and separated according to an established format in Policy 6.1 attachment A.

AUDIT MEASURE:

A. Review of juvenile's file.

RRC 2.0:

Regional Offices shall maintain a log identifying all juvenile records that have been transferred to the Division's closed records unit. The log at a minimum shall contain:

- The juvenile's name.
- The date the case was closed.
- The date the file was sent to closed records.
- The Client Manager/Parole Officer sending the closed file.

AUDIT MEASURES:

- A. Review of Region's tracking log.
- B. Review of discharge summary in Colorado Trails database.
- C. Review of the closed records office receipt log.

RRC 3.0:

All confidential client information shall be kept secure.

AUDIT MEASURE:

A. Visual observation.

RRC 4.0:

Client Managers shall complete client documentation filing in a timely manner, not to exceed 60 days.

AUDIT MEASURES:

- A. Visual observation.
- B. Review of files.

RRC 5.0:

Client Manager will request and maintain copies of transcripts from all schools attended while a student is committed and keep in the master file upon release.

AUDIT MEASURE:

- A. Copy of transcripts.

RELEASE/REINTEGRATION

RRL 1.0:

All juveniles shall have a transition MDT/DCP transition meeting WITHIN 90 days prior to their movement to the community or lower level of care. The plan shall be noted on the MDT/DCP review form. Meetings completed outside of the timeframe shall have documentation noting the reason on the MDT/DCP review form.

AUDIT MEASURE:

- A. Review of the MDT/DCP and monthly review documentation.

RRL 2.0:

Client Managers shall ensure that all of their caseload is paroled no later than the authorized mandatory parole dates, the correct discharge date is noted in COLORADO Trails DATABASE, and notifications made to the courts when applicable.

AUDIT MEASURES:

- A. Review of Colorado Trails database.
- B. Review of file.

RRL 3.0:

CLIENT MANAGERS SHALL ENSURE COURT RESTITUTION AND PAYMENTS TO THE COURT ARE ENTERED INTO TRAILS FOR CLIENTS ON THEIR CASELOAD.

AUDIT MEASURES:

- A. Review the Discrete Case Plan (DCP)/ Parole Plan monthly review/MITTIMUS.
- B. Review of Restitution data in COLORADO Trails DATABASE.

RRL 4.0:

Client Managers shall comply with Policy 16.11 for all juveniles on their caseload who are placed in the community and are required to register as a sex offender. PROOF OF REGISTRATION BY A SEX OFFENDER WITH LOCAL LAW ENFORCEMENT WITHIN FIVE DAYS OF PLACEMENT SHALL BE KEPT IN THE FILE. CLIENT MANAGERS SHALL COMPLETE A NOTICE TO REGISTER WHEN A JUVENILE IS PLACED IN A COMMUNITY PLACEMENT, UPON PAROLE AND AT DISCHARGE FROM NYC. DOCUMENTATION OF THE NOTICE TO REGISTRATION WITH LOCAL LAW ENFORCEMENT WHERE THE JUVENILE PLANS TO RESIDE UPON DISCHARGE SHALL BE KEPT IN THE FILE.

AUDIT MEASURES:

- A. Review of Colorado Trails DATABASE.
- B. Review file for documentation FOR PROOF IN DCP REVIEWS OR FROM LOCAL LAW ENFORCEMENT that the juvenile is registered.
- C. Review of parole plan.
- D. COMPLETED NOTICE TO REGISTER FORM AND FAX TO LOCAL LAW ENFORCEMENT FOR DISCHARGED JUVINELES.

RRL 6.0:

Levels of parole supervision are approved by the Client Manager's supervisor. Documentation supports the Client Manager meets the minimum number of contacts required.

AUDIT MEASURES:

- A. Review of file.
- B. Review of supervisor notes.
- C. Review of COLORADO Trails database.

RRL 7.0:

The parole plan is located in the client file and includes all required signatures.

AUDIT MEASURES:

- A. Review of parole plan in file.
- B. Review of COLORADO Trails database.

REGIONAL OFFICE OPERATIONS

ROO 1.0:

The Region conducts monthly staff meetings.

AUDIT MEASURE:

- A. Review of meeting minutes.

ROO 2.0:

The Region meets with contract providers (residential and non-residential) at least twice per year. Minutes of the meetings are maintained.

AUDIT MEASURE:

- A. Review of meeting minutes.

ROO 3.0:

The Region surveys juveniles and families at least once per year to measure satisfaction. Survey results are reviewed, assessed, and action plans are created to address trends.

AUDIT MEASURE:

- A. Review of surveys and action plans.

ROO 4.0:

All health related information and protected personal information is kept confidential, following all HIPAA regulations.

AUDIT MEASURES:

- A. Visual observation.
- B. Interview with staff.

ROO 5.0:

The Region has programs in place to provide staff appreciation.

AUDIT MEASURES:

- A. Review of programs.
- B. Interview with staff.

ROO 12.0:

The region reviews and addresses noted ARD deficiencies.

AUDIT MEASURES:

- A. Review of ARD web-based report.
- B. Regional director or designee interview.