



State of Indiana
 Indiana Department of Correction
 Division of Youth Services

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**POLICY AND ADMINISTRATIVE
 PROCEDURE
 Manual of Policies and Procedures**

Title
YOUTH CLASSIFICATION

Legal References (includes but is not limited to) IC 11-8-2-5(a)(5) IC 11-8-2-5(a)(8) IC 11-8-2-5(a)(12) IC 11-10-2-1 <i>et seq.</i> IC 11-10-3-2 IC 11-10-4-1 <i>et seq.</i> IC 31-30-4-1 through 7 IC 31-37-19-6 IC 31-37-19-9 IC 31-37-19-10	Related Policies/ Procedures (includes but is not limited to) 00-01-103 00-01-104 00-02-301 00-03-201 00-03-301 01-01-103 01-02-101 01-02-106 01-04-102 01-04-104 02-01-101 through 105 02-01-108 02-03-105 02-04-104 02-01-115 03-02-101 through 103 03-02-105 through 110 03-02-112 through 114 03-03-101 04-01-104	Other References (includes but is not limited to) ACA: JTS: 1A-02, 3A-07, 3A-18, 3A-21, 3A-22, 3A-25, 3A-26, 3B-01, 3B-07 3C-17, 3D-03, 3D-05, 4C-01, 4C-03, 4C-05, 4C-27, 4D-01, 4D-02, 4D-03, 4D- 04, 4D-06, 4E-01, 4E-02, 4E-03, 4E-04, 4E-05, 4E- 06, 5A-01, 5A-02, 5A-03, 5A-04, 5B-01, 5B-02, 5B-04, 5C-01, 5C-02, 5C-03, 5C-05, 5C-07, 6A-03, 6A-04, 6A-09 CO: 4F-01
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I. PURPOSE:

The purpose of this policy and administrative procedure is to establish an organized classification process for receiving, processing, transferring, and assigning youth committed to the Department of Correction that will prepare each youth for a successful re-entry into the community.

II. POLICY:

The Division of Youth Services (DYS) shall establish a classification process for committed youth based on the uniform application of objective standardized information concerning the youth. The goal of the youth classification process is to place each youth in the least restrictive environment consistent with the needs of society and the youth.

The youth classification process controls the receiving, processing, transferring, and assigning of youth within DHS, including inter-facility transfers and intra-facility movement. The youth

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classification process also encompasses standardized procedures for transferring youth to the Division of Mental Health and Addictions, Pre-dispositional Diagnostic Services, or safekeepers.

III. DEFINITIONS:

For the purpose of this policy and administrative procedure, the following definitions are presented:

- A. **ADMINISTRATIVE REVIEW COMMITTEE (ARC):** A group of staff persons designated by the Warden who are the final approving authority and are responsible for youth progression from the Growth Phase to the Re-entry Phase and then to Release Phase from the facility. This committee is comprised of the Warden or designee, and three (3) administrative designees: One (1) representing educational services, one (1) representing therapeutic services, and one (1) representing custody.
- B. **ALTERNATIVE SENTENCE:** A sentence imposed on a youthful offender that has been waived to the adult justice system that orders the youthful offender be placed in a Division of Youth Services (DYS) facility until the youthful offender reaches the age of 18, when the court will review the sentence and the youthful offender’s progress, per Indiana Code 31-30-4-1 through 31-30-4-7.
- C. **ASSIGNED INTAKE STAFF (Intake Counselor/Case Manager):** The staff person responsible for overseeing the youth’s treatment assessments and case management needs while a youth is at the Intake Unit, which may include state employee and contract staff.
- D. **ASSIGNED TREATMENT STAFF (Treatment Counselor/Case Manager):** The staff person responsible for overseeing a youth’s treatment programming and case management needs at the receiving Treatment Unit/Facility, which may include State employee and contract staff.
- E. **ASSISTANT DIRECTOR, DIVISION OF YOUTH SERVICES:** The staff person overseeing the operation of inter-facility transfers and other classification decisions.
- F. **BUSINESS DAY:** Monday through Friday, excluding weekends and State holidays.
- G. **CLASSIFICATION:** The process used by the Department to successfully place a youth and which assists in the decision-making process regarding the facility planning, program development, and facility management.

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- H. **CLASSIFICATION COMMITTEE:** A group of staff persons designated by the Warden who are responsible for assigning youth to a facility/housing unit, program assignment, and security needs.
- I. **COMPREHENSIVE CASE MANAGEMENT SYSTEM (CCMS):** The electronic storage system used by the Department for the storing and maintenance of youth case management.
- J. **DETERMINATE SENTENCE:** Two sentencing options as prescribed by Indiana Code 31-37-19-9- and 31-37-19-10 which allow the committing judge to sentence a youth for a specific amount of time if the youth meets the criteria in the above-mentioned codes.
- K. **EXECUTIVE DIRECTOR, DIVISION OF YOUTH SERVICES (ED/DYS):** The Central Office staff member responsible for the oversight, coordination, and direction of the IDOC Division of Youth Services facilities and programs.
- L. **GROWTH PHASE:** The first phase of the Youth Case Management process in which the Individual Growth Plan is developed, implemented, and reviewed. This phase contains four (4) levels of growth that the youth must progress through successfully.
- M. **IDOC RECORDS IMAGING SYSTEM (IRIS):** The electronic storage system used by the Department for the storing and maintenance of youth records.
- N. **INDIANA YOUTH ASSESSMENT SYSTEM (IYAS):** The IYAS is made up of six (6) instruments to be used at specific points in the juvenile justice process to identify a youth's risk to reoffend and the youth's criminogenic needs.
- O. **INDIVIDUAL GROWTH SUMMARY (IGS):** A written report that is completed at the end of the Growth Phase summarizing a youth's progress throughout the Growth Phase, updated during the Re-entry Phase, and finalized during the Release Phase in accordance with Policy and Administrative Procedure 03-02-113, "Youth Case Management."
- P. **INTAKE ASSESSMENT REPORT (IAR):** The report developed for the youth at the Intake Unit that summarizes the results of all casework completed, collateral information gathered, and screenings, assessments, and interviews conducted. The IAR assesses a youth's psycho-social history, medical needs, educational needs, psychological/psychiatric needs, addiction-recovery needs, exceptional security needs, criminogenic needs, treatment recommendations, and potential intervention strategies.
- Q. **MAKING A CHANGE (MAC) PROGRAM:** The MAC program is a structured and safe therapeutic environment that assists youth in developing appropriate social skills while

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- continuing to participate in education and treatment programs within a controlled setting. Youth are placed in the MAC program as a Classification decision with the goal of returning youth back to the general population housing and programming as quickly as possible for completion of their treatment programs.
- R. **OVERRIDE:** The administrative decision that an assignment to a facility, area, or program is not appropriate based upon aggravating or mitigating factors, including but not limited to the safety and security of the Department and/or the community, as well as the risk assessment, programming needs, and/or medical/mental health needs of the youth.
- S. **PERFORMANCE BASED STANDARDS (PbS):** Standards developed to improve conditions of confinement for youth in facilities around the country. PbS asks the facilities to report data twice a year and report back on 105 outcome measures for correctional facilities that indicate performance toward meeting standards derived from 7 goals, one goal for each of the following components of facility operations: safety, security, order, programming (including education), health/mental health, justice, and reintegration.
- T. **PREA AGGRESSOR LIKELY:** A youth identified by the Sexual Violence Assessment Tool as having a history of sexually assaultive behavior or is determined to be likely to use aggression, coercion, force, or familiarity with the correctional environment in order to manipulate/control a potential victim.
- U. **PREA VICTIM LIKELY:** A youth identified by Sexual Violence Assessment Tool who may need special services due to youth being a victim of sexual assault or misconduct or who is potentially susceptible of becoming a victim of sexual assault or misconduct while in a correctional setting.
- V. **PRISON RAPE ELIMINATION ACT (PREA):** In order to provide a safe environment for all youth, the Department has established policy and procedures regarding the prevention of sexual conduct by offenders (Policy and Administrative Procedure 02-01-115) which includes orientation and education of staff and youth and also the identification of PREA Aggressor Likely and PREA Victim Likely youth.
- W. **PROGRAM DIRECTOR DYS:** The Program Director DYS serves as a resource, advisor, trainer, and auditor for DYS facility Intake and Treatment Departments and acts as a liaison with DYS education and contractual staff, regarding the Youth Classification and Youth Case Management policy, other DYS policies, and all youth programs and services.

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- X. **PROGRAM DIRECTOR 1 OF INTAKE:** The staff person, assigned to a Division of Youth Services Intake Unit, responsible for the operation of all inter-facility transfers and other classification decisions.
- Y. **PROJECTED PROGRAM COMPLETION DATE (PPCD):** Estimated time it should take a youth with an indeterminate sentence to complete the goals of their treatment program. The PPCD allows youth to track treatment program completion, as it is a dynamic target date that may change positively or negatively depending upon the youth's progress.
- Z. **RECIDIVISM:** A return to commitment or incarceration within three (3) years of the youth's date of release from a state correctional facility.
- AA. **RE-COMMITMENT:** The commitment to the Department of a youth who was previously committed to the Department.
- BB. **RE-ENTRY PHASE:** The second phase of the Youth Case Management process. Promotion to this phase is approved by the Administrative Review Committee. The youth's treatment focus is on completing re-entry/relapse prevention plans; working on a Release Portfolio; finalizing the Individual Aftercare Plan with appointments for aftercare programs, supports, and services; and reintegrating with family, school/work, and the community.
- CC. **RELEASE PHASE:** The third phase of the Youth Case Management process. Promotion to this phase is approved by the Administrative Review Committee. The youth's treatment focus is on finalizing their Release Portfolio, returning to the community, and implementing his/her re-entry and aftercare plans.
- DD. **REVOCATION HEARING:** A hearing held by the Juvenile Community Supervision Committee to determine whether a youth has violated the conditions of community supervision/Parole.
- EE. **RISK LEVEL:** The overall risk of recidivism for youth, determined by the Indiana Youth Assessment System as either High, Moderate, or Low.
- FF. **SAFEKEEPER:** A youth who a court has determined cannot be managed in a local facility and has ordered to the Department prior to sentencing.
- GG. **YOUTH:** A juvenile adjudicated to a department of correction (federal, state, or local) and housed or supervised in a facility either operated by the department of correction or with which the department of correction has a contract, including a juvenile under parole

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supervision; under probation supervision following a commitment to a department of correction; in a minimum security assignment, including an assignment to a community transition program.

HH. **YOUTH INCARCERATED AS ADULTS (YIA):** Those offenders under the age of eighteen (18) years who have been committed as adults to the Department of Correction for the commission of a felony offense and who have been designated as such for the purpose of providing special programming as required by Indiana Code 11-8-2-5(a)(8).

IV. **CLASSIFICATION COMMITTEE COMPOSITION:**

As part of the Youth Classification process, all DYS facilities shall establish a Classification Committee. This group of staff persons is designated by the Warden and responsible for assigning youth to a facility/housing unit, to program assignment, and/or for security needs.

- A. Facilities with both Intake and Treatment Units may establish separate Classification Committees who specialize in the classification needs of each unit.
- B. Facilities shall have three (3) staff members assigned by the Warden as voting members of each Classification Committee. The three (3) voting Classification Committee members are staff representing Classification, Intake/Treatment, and Custody areas. Additional staff may meet with and advise the committee but shall not be voting members. The additional staff may be comprised of Administration, Counseling, Education, Health Care, Recreation or Custody.
- C. The Classification Committee shall function in accordance with the following rules:
 - 1. The Committee shall meet in accordance with a schedule approved by the Warden or designee;
 - 2. The Committee decisions/recommendations shall be determined by majority vote; and,
 - 3. Each youth is individually informed of Classification decisions and recommendations.

V. **INTAKE ADMISSION PROCEDURES:**

To be classified to an appropriate DYS Treatment Unit/Facility, all youth must participate in standardized intake admission procedures:

- A. Designation of Intake Units

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The Commissioner shall designate facilities to operate as Intake Units for youth committed to the Department. The Commissioner, or designee, shall notify all counties and committing courts of those facilities so designated. At this time, these facilities are located at:

1. Logansport Juvenile Correctional Facility - Intake/Diagnostic Unit, which receives male delinquent youth and male youth with an Alternative Sentence:
 - a. Male delinquent youth may:
 1. Remain at Logansport Juvenile Correctional Facility after being classified to a general population unit within the facility; or,
 2. Be classified to Pendleton Juvenile Correctional Facility.
 - b. Male youth with an Alternative Sentence may only be classified to Pendleton Juvenile Correctional Facility.
2. Pendleton Juvenile Correctional Facility, which receives male Youth Incarcerated as Adults (YIAs). These youth remain at Pendleton Juvenile Correctional Facility after being classified to the YIA living unit within the facility.
3. LaPorte Juvenile Correctional Facility – Intake/Diagnostic Unit, which receives female delinquent youth, female youth with Alternative Sentences and female Youth Incarcerated as Adults (YIAs). These youth remain at LaPorte Juvenile Correctional Facility after being classified to a general population unit within the facility.
4. The classification process for Youth Incarcerated as Adults (YIA) and Alternatively Sentenced Youth must also be in accordance with procedures outlined in Policy and Administrative Procedure 01-04-102, “Classification Assignments for Youth Incarcerated as Adults and Alternatively Sentenced Youth.”

B. Pre-admission

1. When a county contacts DYS to indicate a youth has been committed to the Department, the designated Intake Unit staff shall complete the “Intake Pre-Admission Report” (Attachment 1) at that time. If the county transports the youth directly to the Intake Unit without contacting DYS first, this form shall be completed within one business day of the youth’s admission.

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2. A copy of the report shall be distributed to designated staff, scanned into the IRIS system, and filed in Section 1 of the youth’s institutional packet prior to the youth departing the Intake Unit.

C. ADMISSION:

1. The Intake Unit shall ensure that the commitment of any youth is within statutory limitations.
 - a. The Intake Unit shall receive a completed, signed physical or electronic, and certified dispositional order. By completing the dispositional order, the court awards wardship to the Indiana Department of Correction.
 - b. The Intake Unit shall ascertain that the youth on the date of the dispositional order is at least 12 years of age and less than 18 years of age. The Intake Unit shall ascertain that the female youth is not known to be pregnant at the time of commitment.
 - c. The Intake Unit shall determine that the youth is subject to commitment to the Department of Correction.
2. Upon admission of a youth, the transporting individual shall be provided with State Form 23605, “Offender Transport Order” (Attachment 2).
3. State Form 45998, “Record of Point of Entry” (Attachment 3) shall be completed with the assistance of the transporting individual.
4. The Intake Unit shall process the youth’s personal property in accordance with the Operational Procedures for Policy 02-01-101, “Offender Personal Property.”
5. Upon admission to the Intake Unit, each youth shall be strip-searched, and the youth shall be showered. Facility clothing and personal hygiene items shall be provided, as necessary.
6. Upon admission, designated staff shall review the youth’s commitment status to help plan the youth’s intake process:
 - a. All youth determined to be new commitments to the Department shall undergo a full intake process.

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- b. All youth determined to be re-commitments to the Department shall undergo an abbreviated intake process, focused on updating assessments and issues arising since the youth was released from their last Department commitment. However, recommitted youth whose original date of testing exceeds one (1) year shall undergo the full intake process.
- c. All youth determined to be Community Supervision Violators shall undergo an abbreviated intake process upon being sustained by the Juvenile Community Supervision Committee at a revocation hearing, and prior to classification of the youth to a receiving Treatment Unit/Facility.
- d. The abbreviated process for re-commitments and sustained Community Supervision Violators shall include completing:
 - 1) All applicable updates to information in the Juvenile Data System (JDS) and CCMS;
 - 2) A new IYAS Residential Tool;
 - 3) A Boot Camp Eligibility Checklist for male youth; and,
 - 4) An IAR, copied as new from the original but updated to address:
 - a) Issues arising since the recommitted youth was released from his/her last Department commitment.
 - b) The violation and recommendations from the Community Supervision Board.
7. Each youth shall be assigned a departmental identification number. Youth previously committed to the Department shall retain their original identification number.
8. A housing unit and specific bed assignment shall be created in the Juvenile Data System (JDS). Each youth shall be informed of the unit/bed assignment and shall receive and sign State Form 20838, "Classification Hearing Results" (Attachment 4). This form shall be scanned into the IRIS system and filed in Section III of the youth's institutional packet prior to the youth departing the Intake Unit.

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9. Designated staff shall confirm that JDS creates and populates a youth record in CCMS.
10. Each Intake Unit shall create an individual institutional packet and escape packet for each youth in accordance with Policy and Administrative Procedure 01-04-104 “The Establishment, Maintenance and Disposition of Offender Records.”
11. Within 24 hours of admission to the Intake Unit, the “Juvenile Offender Arrival and Identification Report,” or youth’s Face Sheet, shall be generated through JDS. This report provides a summary of important data entered at various stages of the intake process. A copy shall be placed in the youth’s escape packet. Copies shall also be scanned into the IRIS system and filed in both Sections I and III of the youth institutional packet, prior to the youth departing the Intake Unit.
12. Within 24 hours of admission to the Intake Unit, youth shall be assigned to an Intake Unit staff member. Refer to Section VI. “Assignment of Intake Staff.”
13. During the intake process, various intake assessments shall be conducted, evaluated, and recorded. Refer to Section VII. “Intake Assessments.”
14. During the intake process, designated staff shall review the documentation accompanying the youth to determine whether there has been a request for notification by a victim/witness. If a request for notification is found, the staff person shall contact the facility Victim/Witness Coordinator and the youth’s packet shall be marked in accordance with Policy and Administrative Procedure 00-03-201, “Victim/Witness Resource Services.”
15. During the intake process, designated staff shall review the documentation accompanying the youth to determine whether the youth has been identified as a Foreign National. All foreign nationals are to be identified and ensure that information is gathered and disseminated in accordance with Policy and Administrative Procedure 00-01-103, “Investigations and Intelligence.”
16. During the intake process, designated staff shall review the documentation accompanying the youth to determine if child support payments have been ordered to be paid to the Department of Correction. These orders shall be forwarded to the Executive Director Division of Youth Services or designee.

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17. The presence of a warrant or detainer does not constitute an automatic barrier to release. The facility shall pursue the basis of the detainer and release the youth to the detainer as appropriate. All noted warrants and detainers shall be noted in JDS.
18. During the intake process, designated staff shall review the documentation accompanying the youth. The purpose of this review is to determine whether there is a need for notification of the State of Indiana Sex Offender Registry. This need shall be based upon:
 - a. The Court's identification of the youth as a sex offender under IC 5-2-12-4(1); and,
 - b. The "Court has found by clear and convincing evidence that the child is likely to repeat an act that would be an offense under IC 5-2-12-4(1)."

If the need for such notification is found, the designated staff person shall contact the facility Sex Offender Registry Coordinator (should be the same staff person as the Victim/Witness Coordinator), and the youth's packet shall be marked, if applicable.

19. During the intake process, designated staff shall review youth's current Medicaid status and eligibility in accordance with Health Care Services Directive 1.36Y, "Medicaid Application Process."
20. During the intake process, the "Juvenile Flags Report" and the "Special Flags Report" shall be generated through JDS after reviewing screenings, assessments, and collateral evidence gathered. These reports provide a summary of critical flags that may be accessed by various staff persons in different capacities throughout a youth's commitment to the Department.
21. During the intake process, the assigned intake staff shall complete an Intake Assessment Report, which summarizes the results of all casework completed, collateral information gathered, and screenings, assessments, and interviews conducted. Refer to Section VIII. "Casework Procedure."
22. A youth's understanding of rights, rules, expectations, and opportunities within DYS is essential for their success in the facility and for their effective Re-Entry to the community. Therefore, within 24 hours of a youth's admission to the Intake Unit, designated staff shall provide youth with a standardized orientation to the Division of Youth Services. Refer to Section XIII, "Orientation Process for Youth."

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23. Family involvement is essential for a youth's success in the facility and effective re-entry into the community. Therefore, designated staff shall record information regarding parent/legal guardian. Information shall include name, relationship, address, and phone number.
 - a. On the day of a youth's admission to the Intake Unit, designated staff shall call each youth's legal guardian to inform him/her that:
 - 1) The youth has arrived safely;
 - 2) Only legal guardians are permitted to visit the youth while the youth is at the Intake Unit;
 - 3) A Parent/Legal Guardian Packet shall be sent; and,
 - 4) They need to read over the enclosed materials thoroughly to facilitate family involvement in the intake process as soon as possible.
 - b. Within one (1) business day of a youth's admission to the Intake Unit, designated staff shall mail a Parent/Legal Guardian Packet to the youth's parent/legal guardian. The Parent/Legal Guardian Packet shall include:
 - 1) An "Initial Placement Letter to Family" (Attachment 5), which provides basic information about the youth's commitment to the Department and his/her stay at the Intake Unit. The youth's parent/legal guardian is also provided the name of the youth's assigned intake staff while youth is at the Intake Unit. A copy of this letter shall also be sent to the judge of the youth's committing county, scanned into the IRIS system, and then filed in Section IV of the youth's institutional packet prior to the youth departing the Intake Unit.
 - 2) State Form 14387, "Application for Visitation Privileges" (Attachment 6) is to be completed for legal guardians only and brought with them if they choose to visit while the youth is at the Intake Unit.
 - a) If more than one parent/legal guardian, they are required to make additional copies.

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- b) No one except legal guardians are permitted to visit the youth at the Intake Unit.
- 3) State Form 41465, “Statement of Trafficking Laws and Authorization for Search” (Attachment 7) – to be reviewed, signed by parent/legal guardian, and returned to youth’s assigned intake staff.
- 4) Visitation Policy information, including: Types of Visits, General Rules, Visitor Dress Code, Directions to the Facility, General Mail Guidelines, Telephone Guidelines, and Commissary Guidelines.
 - a) Youth may request the distribution of additional Parent/Legal Guardian Packets.
 - b) All forms returned to the facility by families shall be processed, scanned into the IRIS system, and filed in Section VI of the youth institutional packet.
- c. During the intake process, designated staff shall provide each parent/legal guardian with a standardized orientation to the Division of Youth Services. Refer to Section XIV. “Orientation Process for Parent/Legal Guardian.”
- 24. Designated staff shall ensure that youth and/or families who cannot read or understand English will have all applicable materials/components written in the appropriate native language or translator services will be made available. When a literacy problem exists, a designated staff member shall assist the youth and/or families in understanding the material.
- 25. If a youth requires an Emergency Inter-Facility Transfer prior to the completion of the intake process, the receiving Treatment Facility is responsible for completing the intake process.

VI. ASSIGNMENT OF INTAKE STAFF:

Within 24 hours of admission to the Intake Unit, youth shall be assigned to an Intake Unit staff member. This individual shall be responsible for coordinating the intake process for the youth, including acting as the staff contact person for the youth, meeting with the assigned youth, screening/assessing the youth, responding to the youth’s concerns and questions, serving as a liaison between the assigned youth and other staff, and preparing all necessary paperwork to

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complete an Intake Assessment Report on the youth and to classify the youth appropriately. This assignment shall be created in CCMS or other, approved electronic record.

VII. INTAKE ASSESSMENTS:

Each youth committed to the Department’s Division of Youth Services shall receive a series of standardized screening assessments. Results of these assessments shall be evaluated and summarized in the Intake Assessment Report:

A. Mental Health Assessments

1. Within the first hour of admission to the Intake Unit, youth shall receive:
 - a. A screening conducted by a trained DYS staff member, utilizing the “Juvenile Performance Based Standards (PbS) Mental Health/Suicide Screening” (Attachment 8).
 - b. Another mental health screening conducted by a clinician, qualified mental health professional, or trained DYS staff member, utilizing the “Massachusetts Youth Screening Instrument, Second Version” (MAYSI-2) (Attachment 9).
2. Within the 24 hours of admission to the Intake Unit, youth shall receive:
 - a. A trauma history screening conducted by a clinician, qualified mental health professional, or trained DYS staff member, utilizing the “Adverse Childhood Experience (ACE) Questionnaire (Attachment 10).
 - b. An interview conducted by the youth’s assigned intake staff, utilizing the “Intake Youth Interview” form (Attachment 11).
3. Upon completion, a copy of each of these documents shall be distributed to designated mental health staff prior to a regularly scheduled staffing meeting or the initial classification meeting. However, youth whose screenings, assessments, and/or interview responses indicate a need for immediate or further attention shall also be immediately referred to a qualified Mental Health professional.
4. A copy of each document shall also be scanned into the IRIS system and then filed in the confidential section of the youth institutional packet, prior to the youth departing the Intake Unit.

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B. Human Trafficking Assessment

Additionally, within the first 24 hours of admission to the LaPorte Juvenile Correctional Facility Intake Unit only, female youth shall be screened by a trained DYS staff member utilizing the “Indiana Human Trafficking Juvenile Intake Screening Tool” (Attachment 12). Staff shall follow instructions on the tool for youth who score for a referral. A copy of the completed tool shall be scanned into the IRIS system and filed in the confidential section of the youth institutional packet, prior to the youth departing the Intake Unit.

C. Health Assessment:

A thorough Health Assessment shall be completed on each youth by a qualified health professional within 7 days of a youth’s admission to the Intake Unit in accordance with Policy and Administrative Procedure 01-02-101, “The Development and Delivery of Health Care Services,” and applicable Health Care Services Directives.

In accordance with Health Care Services Directive 2.03Y, “Reception Screening,” prior to the youth’s intake nursing assessment, the youth shall be asked to complete State Form 45999, “Offender Health History.”

If the youth self-identifies as transgender, the youth shall be referred to Health Services for further evaluation. When a youth self-identifies as a gender other than that assigned at birth and the youth’s genital status is unknown, the status shall be determined during the medical intake reception screening process by reviewing available medical records or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner during the Intake Health Appraisal (IHA).

A youth who self-identifies as transgender or is diagnosed as intersex shall be evaluated in accordance with Health Care Services Directive 3.01Y, “Health Services for Transgender and Intersex Youth.” The facility PREA Compliance Manager shall be notified of all youth identified as transgender or intersex.

D. Sexual Violence Assessment

In accordance with Policy and Administrative Procedure 02-01-115, “Sexual Abuse Prevention,” a trained DYS staff member shall ensure a sexual violence assessment is completed on each youth utilizing the Sexual Violence Assessment Tool (SVAT) forms:

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1. Within 24 hours of a youth's arrival, a trained DYS staff member shall assess the youth through interviews and reviews of the offender's record to attempt to determine whether the youth may be a potential sexual aggressor or a potential sexual abuse victim. The trained DYS staff member shall utilize and complete the "SVAT Questionnaire Juvenile" (Attachment 13) to conduct the youth interview.
2. Within 72 hours of a youth's arrival, the trained DYS staff member shall complete the tool itself, the "SVAT Juvenile" (Attachment 14), based on information from the interview with the youth and the youth's record.
3. These forms shall be scanned into the IRIS system and then filed in the confidential section of the youth institutional packet, prior to the youth departing the Intake Unit. In accordance with Policy and Administrative Procedure 02-01-115, "Sexual Abuse Prevention," information on this assessment should only be shared with the facility PREA Compliance Manager and other authorized staff, and a review of the assessment must be completed within 30 days of the youth's Intake to the agency or transfer to a receiving Treatment Unit/Facility.

E. Dental Assessment

A dentist or qualified health professional approved by a dentist shall complete a thorough dental screening on each youth within 7 days of a youth's admission to the Intake Unit.

F. Auditory Assessment

Qualified Speech and Hearing staff shall conduct an auditory assessment within 10 days of admission in accordance with applicable Health Care Services Directives and the Indiana Department of Education's "Audiometric Screening-Guidelines and Laws."

G. Visual Assessment

Qualified medical staff shall conduct a visual assessment within ten (10) days of admission.

H. Psychological Assessment

Qualified Mental Health staff shall conduct comprehensive psychological assessments of all youth within 7 days of admission.

I. Psychiatric Assessments

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Qualified Mental Health staff shall conduct psychiatric assessments within 7 days of admission for youth who arrive with psychotropic medication(s); youth who have been prescribed psychotropic medication in the past 60 days; youth prescribed or continued on psychotropic medication after DYS’s intake assessments; and/or other youth referred.

J. Risk Assessment

Trained Intake staff shall complete the Indiana Youth Assessment System (IYAS) Residential Tool on each youth (new commitments, Parole Violators, and re-commitments) prior to the Classification team meeting at the Intake Facility. Intake staff will utilize the IYAS interview guide, the youth’s Self-Report Questionnaire and collateral information when completing the IYAS Residential Tool. A copy of the full tool summary shall be scanned into the IRIS system and then filed in Section III of the institutional packet prior to the youth departing the Intake Unit.

K. Academic Achievement Assessment

All youth committed to the Department shall be administered a series of academic achievement assessments within 14 days of admission. These include assessments that estimate overall IQ, acquired knowledge, and non-verbal reasoning ability; that summarize enrollment and status in scholastic programs; that match youth talent to career choices and educational opportunities; and that measure youth’s styles of learning, relating, and working. Copies of all the assessment results shall be scanned into the IRIS system and then filed in the confidential section of the youth institutional packet, prior to the youth departing the Intake Unit.

Youth who return to the Intake Unit within one year on a re-commitment or returning to the Intake Unit for purposes of re-classification shall not automatically be re-tested. Re-testing can be completed if deemed necessary.

L. Substance Abuse Assessment

All youth committed to the Department shall complete a substance abuse assessment within 14 days of admission by trained staff in accordance with Policy and Administrative Procedure 01-02-106, “Addiction Recovery Services.” Results of this assessment shall be used as collateral evidence in scoring the Indiana Youth Assessment System (IYAS) Residential Tool. Results shall be scanned into the IRIS system and filed in the confidential section of the youth institutional packet, prior to the youth departing the Intake Unit.

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Youth returning to the Intake Unit for purposes of re-classification shall not automatically be re-tested. Re-testing can be completed if deemed necessary.

M. Boot Camp Eligibility Checklist

During the intake process at the Logansport Juvenile Correctional Facility Intake Unit only, male youth shall be screened using the “Boot Camp Eligibility Checklist” (Attachment 15). Pendleton Juvenile Correctional Facility (PNJ) shall be informed when youth who are classified to the facility are also eligible for referral to the PNJ Boot Camp. A copy of the completed tool shall be scanned into the IRIS system, and filed in Section III of the youth institutional packet, prior to the youth departing the Intake Unit.

N. Individual Assessment

Additional individual assessments may be administered to aid in the assessment of youth risk, youth needs and classification. Assessments shall be conducted by trained staff and under the supervision and guidance of a qualified mental health professional. Results of individual assessments shall be scanned into the IRIS system and filed in the confidential section of the youth institutional packet, prior to the youth departing the Intake Unit.

VIII. CASEWORK PROCEDURE:

A. HISTORICAL REVIEW:

A vital component in providing a thorough assessment for youth is the assigned intake staff conducting a historical review of each youth. This review shall include collecting collateral information from sources outside of the youth.

1. All written information received from the committing county shall be reviewed during the intake process. This information may include, but not be limited to pre-dispositional reports, detention reports, treatment records, past screenings / assessments (including IYAS), police reports, victim statements, and other documents related to youth and family history.
2. Collateral information shall additionally be sought from parents/guardians, or other agencies when available. All attempts to contact and contacts made with the youth’s family or other agencies shall be documented as progress notes in CCMS, or other approved electronic record.

B. Youth Interviews

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Each youth’s assigned intake staff shall be responsible for conducting a minimum of two interviews during the intake process:

1. Within the 24 hours of admission, youth shall be interviewed by the youth’s assigned intake staff utilizing the “Intake Youth Interview,” as outlined in Section VIII. “Intake Assessments.”
2. After the first interview is completed, the assigned intake staff shall provide youth with the “Intake Youth Questionnaire” packet (Attachment 16) to complete in preparation for a second interview. Youth who are re-commitments to DYS or Community Supervision (Parole) violators shall also complete the “Supplemental IYQ (Intake Youth Questionnaire)” packet (Attachment 17).
3. Youth shall complete the IYQ or Updated IYQ within two business days of admission. Completed questionnaires shall be scanned into the IRIS system and then filed in the confidential section of the youth institutional packet, prior to the youth departing the Intake Unit.
4. The second interview shall be completed within 7 business days of admission to review the IYQ or Updated IYQ so that the information gathered may be used in generating the IAR.
5. Each youth contact and all work completed with or on behalf of the youth by the assigned intake staff or other designated staff shall be documented as progress notes in CCMS, or other approved electronic record.

C. Summary of Immediate Concerns

Within 24 hours of the last youth’s arrival, designated staff shall produce a summary of the immediate concerns for all youth admitted to Intake that week.

1. The summary shall be based upon the results of all casework completed and collateral information gathered, as well as all interviews, screenings, and assessments conducted for all youth within the first 24 hours of the intake process.
2. The report shall include:
 - a. Admission date(s) for all youth.

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- b. Each youth's name, DOC number, birth date, age, type of commitment, and committing offense(s).
- c. The list of immediate concerns for each youth, which may include but are not limited to the following:
 - 1) History of and current exceptional needs and PREA status;
 - 2) Medical, mental health, and substance abuse history, including medication, diagnoses, and treatment history;
 - 3) Current medical, mental health, and substance abuse issues, including medication, diagnoses, and treatment determined by designated staff at IDOC-DYS;
 - 4) Behavior history; and,
 - 5) Current behavior concerns.
3. Upon completion, the summary shall be distributed to designated staff prior to a regularly scheduled staffing meeting or the initial classification meeting.
4. Following the meeting, the summary shall be updated and redistributed to designated staff.
5. The updated summary shall be utilized as collateral evidence during the rest of the Intake and Youth Classification processes. It shall also be incorporated into an addendum to the Intake Assessment Report. Refer to Section VIII.H, "Intake Assessment Report."

D. Risk/Offense Identification

Upon completion, the IYAS score results in one (1) of three (3) categories of risk level: Low, Moderate, and High.

Committing offenses are divided into four (4) classes of offenses, with Class I being the most serious and Class IV the least serious. Offense codes and classes may be obtained through the Juvenile Data System (JDS).

E. Exceptional Programming Needs Identification:

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The identification and description of a youth’s exceptional programming needs may impact classification decisions:

1. Exceptional programming needs are defined as follows for new commitments to the Department and for Community Supervision Violators:
 - a. Severe Medical Issues include youth who require 24-hour on-site health care staff coverage, as indicated by a medical assessment and treatment plan. Examples may include, but not limited to, intravenous IV treatment, brittle diabetics, dialysis, and severe asthma in accordance with HSCD 2.15Y “Medical Status Classification C.”
 - b. Sex Offense History includes youth who meet one of the following criteria:
 - 1) Any youth committed for a sex offense as defined by IC 11-8-8-4.5 and further evaluation required for kidnapping, criminal confinement, and promotion prostitution adjudications.
 - 2) Any youth committed for a Violation of Probation (VOP), a Violation of Community Supervision/Parole (PV), or a suspended commitment where the original adjudication was for a sex offense.
 - 3) Regardless of current commitment offense, youth has a prior adjudication for a sex offense and has not successfully completed treatment.
 - 4) No prior adjudications for sex offenses, but official documentation exists such as substantiated DCS report, Probation Report, Police Report, IDOC Conduct Report, Polygraphs, or where there is a documented admission by the youth as defined above in Section a.
 - c. Chronic Assaultive Behavior applies to youth who meet any of the following conditions:
 - 1) Two or more adjudications for Felony Battery.
 - 2) Two or more documented Batteries on staff and/or juvenile in a placement setting (i.e., DOC, private/public providers).

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- 3) Two or more official documentations, such as school reports, detention reports, police reports, probation reports
- d. Severe Mental Health Issues, designated as Medical Codes D and E, indicate that the youth has a current diagnosis by a licensed mental health provider that requires 24-hour on-site health care coverage as part of the treatment plan in accordance with Health Care Services Directive – Youth Services 4.04Y, “Mental Health Classification Codes.”
- e. Escape indicates that the youth meets one of the following criteria:
 - 1) One or more prior escapes (beyond perimeter) from a locked facility.
 - 2) One or more prior adjudications, parole violations, or probation violations for failure to return/escape under supervision from home, circumventing the electronic monitoring procedure requirements and/or a court placement.
- 2. Exceptional programming needs are re-examined for youth who are re-commitments to the Department:
 - a. If the definitions remain true since the youth was released from their last Department commitment, the youth is identified with the exceptional programming need.
 - b. If the definitions no longer fit the youth, the youth does not need to be currently identified. However, in the updated IAR, the assigned intake staff shall ensure that youth’s history of exceptional programming needs is indicated, as these may still be of potential concern.

F. INTAKE FAMILY QUESTIONNAIRE:

The assigned intake staff shall determine the youth’s legal guardian and/or potential release placement person and then attempt to contact that person to complete the “Intake Family Questionnaire” (IFQ) (Attachment 18). All attempts to contact and contacts made with the youth’s family to complete the IFQ shall be documented as progress notes in CCMS, or other approved electronic record. If the IFQ is not completed during the intake process, then the assigned treatment staff at the receiving Treatment Unit/Facility shall be responsible to complete it. Completed questionnaires shall be scanned into the IRIS system and filed in the confidential section of the youth institutional packet, prior to the youth departing the Intake Unit.

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G. FACT SHEET:

During the intake process, the assigned intake staff shall generate the “Fact Sheet” through CCMS. The completed Fact Sheet shall be scanned into the IRIS system and filed in Section III of the youth’s institutional packet prior to the youth departing the Intake Unit.

H. INTAKE ASSESSMENT REPORT:

The “Intake Assessment Report” (IAR) (Attachment 19) is completed in CCMS by the assigned intake staff. The IAR provides a bio-psychosocial overview of each youth committed to the Department and summarizes the results of all casework completed, collateral information gathered, and screenings, assessments, and interviews conducted during the intake process. Various staff persons in different capacities throughout a youth’s commitment utilize the IAR. As a foundational document, this report serves as a guide in the Youth Classification process and provides treatment recommendations for the Youth Case Management process.

1. All information contained within the IAR shall be gathered from the following sources of information (when applicable):
 - a. Intake Pre-Admission Report;
 - b. County Pre-dispositional Report;
 - c. County Dispositional Order;
 - d. Detention Reports;
 - e. Treatment Records;
 - f. Past screenings/assessments, including IYAS;
 - g. Police Reports;
 - h. Victim Statements;
 - i. Youth/family history as reported/recorded by other agencies;
 - j. Interviews with the Probation Officer, the court, and/or other county representative(s);
 - k. Youth interview, including Intake Youth Questionnaire;
 - l. Parent/Guardian interview, including Intake Family Questionnaire;
 - m. Juvenile Data System (JDS); and,
 - n. Relevant results from all screenings and assessments conducted during the intake process.

2. The completed IAR includes but is not limited to the following information about the youth:

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- a. Court Recommendations/Orders;
 - b. Committing offense(s) or violation(s)/offenses resulting in recommitment;
 - c. Legal and criminal history;
 - d. Social history including family, peers, and community;
 - e. Medicaid and DCS case status;
 - f. Medical, dental, psychiatric, psychological, and substance abuse/addiction recovery history and needs omitting any diagnoses or medications;
 - g. Assessed mental status;
 - h. Behaviors observed during the intake process;
 - i. Level of independence/parenthood;
 - j. Educational/vocational history, testing results, interests, and needs;
 - k. Religious background and interests;
 - l. Youth's stated strengths and weaknesses;
 - m. Leisure activity history, interests, and needs;
 - n. Expressed desire(s) of the caretaker;
 - o. Placement status, concerns, and/or needs;
 - p. Risk level;
 - q. Exceptional Programming Needs, current and history of;
 - r. Treatment recommendations; and,
 - s. Aftercare recommendations.
3. The content of the IAR is impacted by the youth's commitment status:
- a. All youth determined to be new commitments to the Department shall have an IAR completed that shall address issues from the youth's community prior to his/her incarceration and the youth's behavior during the intake process.
 - b. All youth determined to be re-commitments to the Department shall have an IAR completed, which is copied as new from the original but updated to address issues arising since the youth was released from his/her last Department commitment.
 - c. All youth sustained as a Community Supervision Violator shall have an IAR completed prior to classification of the youth. The IAR shall be copied as new from the original but updated to address the youth's violation and recommendations from the Community Supervision Board.

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4. Trained Intake staff shall complete a Court Contact Summary generated through the Juvenile Data System (JDS) on each committed youth. The Summary shall be included in the IAR.
5. The assigned Intake staff shall also complete an “IAR Addendum” (Attachment 20) separate from the IAR entered into CCMS:
 - a. This addendum provides:
 - 1) A historical summary and list of the youth’s current concerns in the areas of medical, psychiatric, psychological, and substance abuse/addiction recovery, including the history of and current medications, diagnoses, and treatment. Updated information from the Summary of Concerns must be included, as outlined in Section VIII.C. “Casework Procedure.”
 - 2) A summary of the results of the youth’s Drug Use Screening Instrument (DUSI) and addiction recovery programming recommendations made by Addiction Recovery Staff. This information is utilized in the Youth Case Management process.
 - b. In accordance with Policy and Administrative Procedure 03-02-113, “Youth Case Management,” the assigned Intake staff shall create a Case Management progress note in CCMS indicating that the addendum was completed.
6. Upon completion, the following steps shall be taken to ensure accuracy of information and appropriate dissemination of information in the IAR and its addendum:
 - a. Each IAR and its addendum shall be read, reviewed, and approved by the Program Director 1 of Intake, or designee.
 - b. Approval shall be based upon completeness and clarity of information.
 - c. Approval shall be noted by signature of the Program Director 1 of Intake, or designee, beneath the signature of the assigned intake staff who completed the IAR and its addendum.

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7. A copy of the completed or updated IAR, along with its addendum, shall be utilized during the Youth Classification process. The original completed or updated IAR, along with its addendum, shall be scanned into the IRIS system and then filed in in Section III of the youth’s institutional packet prior to the youth departing the Intake Unit.

IX. INITIAL CLASSIFICATION PROCESS:

The initial classification of a youth committed to the Department is determined by utilizing the information gathered during the intake process and recorded in the IAR. The youth are classified to the most appropriate and least restrictive unit/facility to address their needs and for protection from harm. The Intake Unit shall ensure that youth are initially classified within 21 days of admission from the court.

A. Classification Review Factors

It is the responsibility of the Intake Unit’s Classification Committee to review all available data on each youth and classify each youth to the most appropriate and least restrictive Treatment Unit/Facility. DYS shall attempt to utilize the following factors when classifying a youth to a Program/Unit/Facility, but may not be able to accommodate due to other factors:

1. Age
2. Committing Offense
3. Previous Department commitment and behavior history
4. Committing County
5. Criminal History
6. Risk Level to Reoffend
7. Previous non-Department placement history
8. Exceptional Programming Needs, current and history of:
 - a. Severe Medical Issues
 - b. Sex offense history
 - c. Chronic Assaultive Behavior
 - d. Severe Mental Health issues
 - e. Escape/Runaway history
9. Treatment Needs:
 - a. Serious drug abuse history

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- b. Educational Needs
- c. Developmental Issues requiring special attention

10. Other Factors:

- a. Youth or family's requested placement
- b. Court's recommendation
- c. Location of family/reentry placement
- d. Behavior during intake process
- e. Teen Parent
- f. Placement issue

11. Program Consideration: Matching youth with specific programs, such as Recovery Orientated Community (ROC), Sex Offender Treatment (SOT), Boot Camp, or The Last Mile (TLM), etc.

B. Classification Committee Meetings

The Classification Committee shall meet in accordance with a schedule approved by the Warden, or designee, and shall determine its decisions/recommendations by majority vote:

1. Each youth shall be individually informed of his/her classification assignment. During this meeting, each youth shall receive and sign State Form 20838, "Classification Hearing Results" (Attachment 4), and this form shall be scanned into the IRIS system and then filed in Section III of the youth's institutional packet prior to the youth departing the Intake Unit. Youth shall also be informed of the classification appeal process at that time.
2. Following classification, and prior to the youth leaving the Intake Unit, designated staff shall meet with youth to review the youth's commitment status and completed IAR to ensure the youth acknowledges their understanding of the requirements of their commitment and the recommendations for treatment made by the youth's assigned Intake staff.

Upon completion of this meeting, both the youth and designated staff shall review and sign all sections of the "Youth Acknowledgement Form" (Attachment 21). This form shall be scanned into the IRIS system and filed in Section III of the youth's institutional packet prior to the youth departing the Intake Unit.

C. Overrides

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An override can be initiated when aggravating or mitigating factors indicate that the facility, area, or program assignment is not appropriate based on the risk assessment results, programming needs, and/or medical/mental health needs of a youth. Overrides may be either to a more restrictive or less restrictive assignment. Any information, which supports the need for an override, is to be discussed in the IAR. Any override that may become necessary shall be recommended and submitted to the Program Director 1 of Intake. All overrides must be finalized by the Assistant Director Division of Youth Services.

D. CLASSIFICATION APPEAL:

A youth who wishes to appeal their initial classification assignment shall complete State Form 9260, “Youth Classification Appeal” (Attachment 22).

1. A youth wishing to file an appeal of their initial classification may only do so following their arrival at their assigned Treatment Unit/Facility. The youth may ask for an appeal during their initial treatment review meeting at the assigned Treatment Unit/Facility. The youth has no right to appeal prior to their initial classification to an assigned Treatment Unit/Facility.
2. The appeal is forwarded to the Program Director 1 of Intake who shall communicate with the facility in which the appeal has originated and approve or deny the appeal. The youth shall be notified in writing of the decision. If the appeal is denied, the youth may appeal the denial within 10 days to the Executive Director, Division of Youth Services. The youth may again appeal to the Executive Director, Division of Youth Services every 60 days following the denial of the appeal. The decision of the Executive Director, Division of Youth Services, as the Commissioner’s designee, is final and is not subject to administrative review. If the appeal is approved, arrangements shall be made for the youth’s reclassification and transfer to a different facility.
3. All forms utilized in the appeal process shall be scanned into the IRIS system and filed in in Section III of the youth’s institutional packet by designated staff at the Treatment Unit/Facility.

E. Escapes

Youth who escape during their commitment to the Department will undergo a re-assessment to determine the youth’s appropriate classification. This re-assessment may be conducted either at the youth’s assigned Treatment Unit/Facility or at the Intake Unit. The

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Program Director 1 of Intake shall coordinate with the Executive Director, Division of Youth Services to determine which facility will conduct the re-assessment. This re-assessment shall include any new information regarding offenses which may have occurred during the escape, and review of an updated Individual Growth Plan completed by the assigned Treatment Unit/Facility describing the youth’s progress in all aspects of treatment. An addendum shall be prepared for the original IAR. Following a review of the IAR, the Program Director 1 of Intake shall classify the youth to the most appropriate facility.

F. Classification Notification

After youth have been classified to a Treatment Unit/Facility and notified of said classification, the “Classification Results Letter” (Attachment 23) shall be completed and mailed to the youth’s legal guardian. This letter informs the youth’s legal guardian of the Treatment Unit/Facility to which the youth was classified.

1. A copy of this letter shall also be forwarded to the judge of the youth’s committing county.
2. A copy shall be scanned into the IRIS system and filed in Section IV of the youth’s institutional packet prior to the youth’s departing the Intake Unit. The youth’s assigned Intake staff shall document family notification in an electronic progress note.

LaPorte Juvenile Correctional Facility is exempt from this procedure as all female youth remain in the facility.

X. REGULAR (NON-EMERGENCY) INTER-FACILITY TRANSFER:

A regular (non-emergency) inter-facility transfer involves an administrative classification process to review, decide, and implement actions concerning requests to change a youth’s assignment to a different Treatment Facility. For youth who are transferred from one facility to another, classification must be completed within 7 days after the transfer from another facility has occurred.

Staff or youth may initiate a request for an inter-facility transfer. When a staff member initiates a request for transfer, it may be either voluntary or involuntary on the part of the youth. All requests for transfer must go through the Classification Committee, and then to the Warden, or designee.

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A. Reasons and Limitations for Inter-Facility Transfer:

Inter-facility transfers shall be controlled by the following guidelines:

1. Staff-initiated requests for transfer shall be considered only after an interval of 30 days after the youth's most recent classification unless the request is based upon security or health reasons.
2. A request for inter-facility transfer by a staff person shall not be used for disciplinary action.
3. Requests for inter-facility transfer may be withdrawn by the requesting staff person at any time prior to a decision by the Classification Committee by submitting a written request.
4. A youth in a higher security housing unit who has demonstrated the ability for appropriate behavior may be transferred to a less secure facility to enable their Re-Entry into the community. The intent of this action is to create a vehicle for youth to transfer to the region of their commitment, promote family interaction, enhance program opportunities, and allow for the gradual re-entry back to the home community. Eligibility is not automatic but is determined, at minimum, on the youth's progress in their treatment program. For the purpose of this procedure, all youth are eligible for transfer to lower security with the exception of those youth who are charged with offenses that result in death or threat of death (Examples of these offenses are: murder or attempted murder). The Executive Director DYS, or designee, must approve the youth if they request special consideration for re-classification.
5. An inter-facility transfer to a more secure facility can occur if the youth has consistently demonstrated inappropriate behavior and exhausted all resources of a less secure housing unit.
6. An inter-facility transfer to a more secure facility can occur if a youth has escaped from a unit.
7. Youth requires an inter-facility transfer to a facility for treatment reasons (e.g., school program, family needs, etc.).
8. A youth-initiated request for inter-facility transfer shall be considered at any time following a youth's arrival to their assigned Treatment Unit/Facility.

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B. Staff Responsibilities in Inter-Facility Transfer Process

1. Any staff person who believes a youth should be transferred to another DYS facility shall complete State Form 7268, "Reclassification Request" (Attachment 24). A youth may also submit a reclassification request.
2. The completed Reclassification Request shall be forwarded to the Classification Committee for approval.

C. Classification Committee / Responsibilities in Inter-Facility Transfer Process:

The Classification Committee shall:

1. Review State Form 7268 and any included documents;
2. Contact the youth's assigned treatment staff if any additional information is needed and arrange for the information to be provided;
3. Notify the youth at least forty-eight (48) hours prior to the hearing, unless precluded for security or other substantiated reasons documented in the youth's facility packet. Notification may be accomplished by completing and distributing State Form 5572, "Transfer Hearing: Notice to Hearing Officer and Offender" (Attachment 25). The youth may waive the forty-eight (48) hour notification;
4. Conduct a Classification Hearing in accordance with all applicable due process rules and rights;
5. Allow the youth an opportunity to present their concerns to the Classification Committee before a recommendation is made;
6. After making the decision(s)/recommendation(s), State Form 7268 shall be completed;
7. Inform and explain the decision(s)/recommendation(s) to the youth, obtain the youth's signature, and provide the youth with the appropriate copy of State Form 7268;
8. Inform the youth of the appeal process as indicated in Section IX, "Initial Classification Process;" and,

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9. Forward a copy of State Form 7268 to the Warden, or designee who shall review and approve or deny the request.
10. If approved by the Warden, or designee, a copy of State Form 7268 and other pertinent documents shall be forwarded to the Assistant Director Division of Youth Services requesting approval for an inter-facility transfer.
11. All forms utilized in the inter-facility transfer process shall be scanned into the IRIS system and filed in Section VI of the youth's institutional packet.

D. Assistant Director Division of Youth Services Duties:

The Assistant Director Division of Youth Services shall review State Form 7268, "Reclassification Request" (Attachment 24), and other pertinent documents, as submitted by the Warden, or designee, for all inter-facility transfers and render a decision based upon:

1. The security level necessary for the youth;
2. The youth's Individual Growth Summary and any other pertinent documents;
3. The location of the youth's family/guardian; and,
4. The availability of space in the Department's DYS facilities/programs.

If approved, the Assistant Director Division of Youth Services shall notify the Program Director 1 of Intake. If denied, the Assistant Director Division of Youth Services shall notify the Warden.

E. Program Director 1 of Intake's Responsibilities:

1. The Program Director 1 of Intake shall complete State Form 1736, "Transfer Authority" (Attachment 26).
2. Notify the sending and receiving facilities of the decision and all pertinent information shall be forwarded to the receiving facility. The youth's facility packet, medical and escape packet, psychological/psychiatric records, and other relevant materials (e.g., Victim/Witness Notification and medication) shall accompany the youth.
3. If youth is moved to the Intake Unit pending reclassification, notify the youth's parent or legal caretaker of the transfer while the reclassification request is being reviewed.

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4. If the reclassification request is denied, the Warden, or designee can appeal to the Executive Director DYS, or designee who has the final authority over all inter-facility movement. Intra-facility movement does not require the approval of the Program Director 1 of Intake.

F. Inter-Facility Transfer Appeal Process

A youth shall be advised that an inter-facility transfer reclassification may be appealed by use of the appeal process.

The youth has no right to an appeal prior to transfer to a new Treatment Facility. A youth may appeal a transfer and reclassification at any time following their transfer and reclassification to a new Treatment Facility, utilizing State Form 9260, “(Juvenile) Classification Appeal” (Attachment 22). Youth shall submit this form to their assigned treatment staff who shall forward it to the Warden, or designee. The Warden, or designee, shall review the appeal and approve or deny it.

The youth shall be notified in writing of the decision. If the appeal is denied by the Warden, or designee, the youth may appeal the denial within 10 working days to the Executive Director Division of Youth Services. The youth may again appeal to the Executive Director Division of Youth Services every 60 days following the denial of the appeal. The decision of the Executive Director Division of Youth Services, as the Commissioner’s designee, is final and is not subject to administrative review.

All forms utilized in the inter-facility transfer appeal process shall be scanned into the IRIS system and filed in Section VI of the youth’s institutional packet.

G. Completion of the Inter-Facility Transfer

The Treatment Facility receiving a youth in an inter-facility transfer shall follow the guidelines for receiving the youth. Refer to Section XII, “Receiving a Youth at a Treatment Unit/Facility.”

XI. EMERGENCY INTER-FACILITY TRANSFER:

An emergency transfer involves an administrative classification process to review, decide, and implement an immediate transfer of a youth based on a change in the youth’s treatment or security needs.

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A. Reasons and Limitations for Transfer

The Warden, or designee, under any of the following circumstances may initiate inter-facility transfers if the Assistant Director Division of Youth Services has been notified:

1. Youth needs emergency medical treatment and routine procedures would delay the delivery of appropriate medical services;
2. Youth needs emergency psychiatric/psychological care and the youth's behavior has deteriorated to such a level that appropriate security and treatment cannot be provided in the current housing unit/facility; or,
3. Youth needs special custody to adequately safeguard personal safety or safety of others.

B. Request for Transfer and Reclassification Process:

1. In those situations where the Warden, or designee, determines that an immediate transfer is required, the Warden, or designee, shall contact the Assistant Director Division of Youth Services. The Warden, or designee, shall explain the situation and outline the reason(s) indicating the need for an immediate emergency inter-facility transfer.
2. The Assistant Director Division of Youth Services shall approve or deny the transfer request. If the transfer is approved, the Assistant Director Division of Youth Services shall contact the receiving facility Warden and Program Director to communicate the need for the emergency transfer. Once bed space is obtained in an appropriate facility, the Program Director 1 of Intake shall communicate the identified facility and transportation shall commence. State Form 1736, "Transfer Authority" (Attachment 26), and State Form 23605, "Offender Transport Order" (Attachment 2) shall be issued reflecting the effective date of transfer and reassignment location. It shall be the responsibility of the sending facility to arrange the transport and complete necessary paperwork. The Assistant Director Division of Youth Services is responsible to notify the Executive Director of Youth Services of the emergency transfer.
3. The Assistant Director Division of Youth Services shall contact the receiving Warden, or designee, by telephone or other expeditious means and report prior to the movement of the youth the following:

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- a. Notification of authorized emergency transfer;
 - b. Purpose/circumstances involved in the transfer;
 - c. Need for any specialized treatment or custody precautions that may be indicated; and,
 - d. Name and DOC number(s) of the youth(s) to be transported and any additional information.
4. The sending Warden, or designee, shall be responsible for the following:
- a. Notifying the youth(s) prior to the transfer of the need for emergency transfer;
 - b. Ensuring a classification hearing is conducted prior to the transfer. The youth shall be given the opportunity to waive a transfer hearing and the document is to be filed in the youth's facility packet. In the event a classification hearing cannot be held prior to transfer, (e.g., extreme threat to the facility/self) the sending Warden, or designee, will need to document the reasons/basis for transfer. This documentation is to accompany the youth at the time of transfer and a classification hearing shall be conducted at the receiving facility;
 - c. Ensuring the youth's facility packet, medical and escape packet, psychological/psychiatric records, and other relevant materials (e.g., Victim/Witness Notification and medication) accompany the youth;
 - d. Advising the receiving facility of the date and time that the youth will be transported and estimated time of arrival;
 - e. Advising of any need for specialized treatment or custody precautions that may be indicated;
 - f. Ensuring Policy and Administrative Procedure 02-01-101, "Offender Personal Property," are applied;
 - g. Ensuring that Inmate Trust Fund monies are sent with or expeditiously follow the youth to the receiving facility, in accordance with Policy and Administrative Procedure 04-01-104, "Inmate Trust Fund";

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- h. Ensuring the completed Offender Transport Order accompanies the youth to the receiving facility;
 - i. Ensuring that the youth's parent, guardian, custodian, or nearest relative is contacted by phone and advised of the transfer and then following-up via US mail, of the name, address, location, and telephone number of receiving facility. Every effort should be made to contact the family via telephone as soon as possible following the youth's reclassification and transfer to another facility.
 - j. Ensuring that the youth's assigned JDAI Liaison/Reintegration Specialist is notified of the change in Treatment Facility if request for placement has already been initiated; and,
 - k. The sending facility shall prepare an updated Individual Growth Summary, in accordance with Policy and Administrative Procedure 03-02-113, "Youth Case Management," and forward it to the receiving facility within 5 business days.
5. If the Warden, or designee exhausts all rapid means of communication without contacting the Executive Director of the Division of Youth Services, or designee:
 - a. The Warden, or designee, is authorized to transport the youth(s) to an appropriate facility without State Form 1736, "Transfer Authority" (Attachment 26).
 - b. The sending Warden, or designee, is responsible for the following:
 - 1) Notifying the Warden, or designee, of the receiving facility of the reason(s) for transfer;
 - 2) Verbally reporting to the Executive Director, or designee, as soon as communications are restored or the first business day after communications are restored; and,
 - 3) Provide an updated Individual Growth Summary to the receiving facility within five (5) business days.
 - c. Upon receipt of the details associated with the transfer, the Program Director 1 of Intake shall issue State Form 1736 and indicate whether the

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decision is for the youth to remain at the receiving facility or to return to the sending facility.

- 6. The receiving facility shall not accept a youth from another facility unless the youth is accompanied by a completed Transfer Authority, a completed offender Transport Order, and a complete facility packet, medical, escape, and psychological / psychiatric records, and other relevant materials except under the following circumstances:
 - a. The need for a Transfer Authority is waived, as delineated above.
 - b. If the receiving Warden, or designee, is satisfied that a sufficient briefing regarding the custody, security, medical, legal, and environmental status of the youth has been provided and the packet and records will follow within 2 business days of the transfer.
- 7. The receiving Warden, or designee, shall ensure that the Classification Hearing Process is held within 5 business days after receipt of the youth, as indicated in Section IX, "Initial Classification Process."
- 8. All forms utilized in the emergency inter-facility transfer process shall be scanned into the IRIS system and filed in Section I of the youth's institutional packet.
- 9. A youth shall be advised that an inter-facility transfer may be appealed by use of Reclassification and Transfer Appeal Process.

C. Completion of the Emergency Inter-Facility Transfer:

- 1. The Treatment Facility receiving a youth in an emergency inter-facility transfer shall follow the guidelines for receiving the youth. Refer to Section XII, "Receiving a Youth at a Treatment Unit/Facility."
- 2. If a youth required an Emergency Inter-Facility Transfer prior to the completion of the intake process, then the receiving Treatment Facility is responsible for completing the intake process.

XII. RECEIVING A YOUTH AT A TREATMENT UNIT/FACILITY:

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The process for receiving a youth depends upon how the youth is classified and whether the youth is classified to a receiving Treatment Unit or receiving Treatment Facility:

A. When a youth is classified from the Intake Unit to the receiving Treatment Unit within that same facility, designated intake staff shall:

1. Re-assign the youth to a general population unit/bed location in the Juvenile Data System (JDS). Each youth shall be informed of the unit/bed assignment and shall receive and sign State Form 20838, "Classification Hearing Results" (Attachment 4). This form shall be scanned into the IRIS system and filed in Section III of the youth's institutional packet prior to the youth departing the Intake Unit.
2. No more than twenty-four (24) hours after being classified from the Intake Unit to the receiving Treatment Unit within that same facility, youth are assigned to a Treatment Department staff who shall:
 - a. Initiate the Youth Case Management process for the youth in accordance with Policy and Administrative Procedure, 03-02-113, "Youth Case Management."
 - b. Assist in maintaining the institutional packet and the escape packet during the Youth Case Management process to ensure it complies with Policy and Administrative Procedure 01-04-104 "The Establishment, Maintenance and Disposition of Offender Records."
 - c. Meet with youth and/or legal guardian, review any topics, and/or answer any questions they may have about the orientation already received. This should include discussion of Treatment Unit expectations, the Youth Case Management process, and/or treatment programming. Refer to Section XIII, "Orientation Process for Youth" and Section XIV, "Orientation Process for Parent/Legal Guardian."

B. When a youth is classified from the Intake Unit at Logansport Juvenile Correctional Facility to Pendleton Juvenile Correctional Facility or when a youth is involved in an inter-facility transfer, the following shall occur:

1. The Intake Unit or sending Facility shall:
 - a. Initiate State Form 23605, "Offender Transport Order" (Attachment 2);

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- b. Initiate State Form, 1736, "Transfer Authority" (Attachment 26) to accompany youth;
 - c. Prepare the youth's packets for transportation; e.g., institutional packet, medical packet, escape packet, and Victim/Witness file, if necessary; and,
 - d. Place the youth in transit status in JDS.
2. The receiving Treatment Facility is responsible for transporting youth from the Intake Unit to the receiving Treatment Facility. However, sending and receiving facilities shall discuss and arrange transportation for inter-facility transfers.
3. If a youth required an Emergency Inter-Facility Transfer prior to the completion of the intake process, the receiving Treatment Facility is responsible for completing the intake process in accordance with this policy and administrative procedure.
4. Upon receiving a youth from another the facility, the receiving Treatment Facility shall initiate the following admission procedures:
 - a. Designated staff shall review the accompanying documents; e.g., "Offender Transport Order" and "Transfer Authority."
 - b. State Form 45998, "Record of Point of Entry" (Attachment 3) shall be completed with the assistance of the transporting official or staff member.
 - c. The facility shall inventory the youth's personal property, youth packets, medications, and monies by completing and distributing State Form 23605, "Offender Transport Order" (Attachment 2).
 - d. The facility shall process the youth's personal property in accordance with its operational procedures for Policy 02-01-101, "Offender Personal Property."
 - e. Upon admission to the facility, each youth shall be strip-searched. Facility clothing and personal hygiene items shall be provided, as necessary.
 - f. A housing unit and specific bed assignment shall be assigned in JDS. Each youth shall be informed of the unit/bed assignment and shall receive and sign State Form 20838, "Classification Hearing Results" (Attachment 4). This form shall be scanned into the IRIS system and filed in Section III of the youth's institutional packet.

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5. Mental health screening assessments shall be conducted with the youth in accordance with Health Care Services Directive 4.03Y, “Mental Health Services Plan.”
6. Within the first hour of arrival, youth shall be screened by a trained DYS staff member, utilizing the “Juvenile Performance Based Standards (PbS) Mental Health/Suicide Screening” (Attachment 8). A copy of this screening shall be scanned into the IRIS system and filed in the confidential section of the youth’s institutional packet.
7. In accordance with Policy and Administrative Procedure 02-01-115, “Sexual Abuse Prevention,” a trained DYS staff member shall ensure a sexual violence assessment is completed on each youth utilizing the Sexual Violence Assessment Tool (SVAT) forms:
 - a. Within 24 hours of a youth’s arrival, a trained DYS staff member shall assess an offender through interviews and reviews of the offender’s record to attempt to determine whether the offender may be a potential sexual aggressor or a potential sexual abuse victim. The trained DYS staff member shall utilize and complete the “SVAT Questionnaire Juvenile” (Attachment 13) to conduct the youth interview.
 - b. Within 72 hours of a youth’s arrival, the trained DYS staff member shall complete the tool, the “SVAT Juvenile” (Attachment 14), based on information from the interview with the youth and the youth’s record.
 - c. These forms shall be scanned into the IRIS system and filed in the confidential section of the youth institutional packet, prior to the youth departing the Intake Unit. In accordance with Policy and Administrative Procedure 02-01-115, “Sexual Abuse Prevention,” information on this assessment shall only be shared with the facility PREA Compliance Manager and other authorized staff, and a review of the assessment must be completed within 30 days of the youth’s Intake to the Department or transfer to a receiving Treatment Unit/Facility.
8. Additional individual assessments may be administered to aid in the assessment of youth risk, youth needs, and classification. Assessments shall be conducted by a trained staff and under the supervision and guidance of a qualified Mental Health professional. Results of individual assessments shall be scanned into the IRIS system and filed in the confidential section of the youth institutional packet.

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3. Within 24 hours of arrival, youth shall be assigned to a Treatment Department staff member who shall initiate or continue the Youth Case Management process for the youth in accordance with Policy and Administrative Procedure, 03-02-113, "Youth Case Management."
 - a. The assigned treatment staff, and other designated facility staff as applicable, shall maintain the institutional packet and the escape packet during the Youth Case Management process to ensure it complies with Policy and Administrative Procedure 01-04-104 "The Establishment, Maintenance and Disposition of Offender Records."
 - b. The assigned treatment staff shall also prepare a summary of youth's immediate concerns to be utilized
4. A youth's understanding of rights, rules, expectations, and opportunities within the Division of Youth Services is essential for their success in the facility and for their effective Re-Entry to the community. Therefore, within 24 hours of a youth's admission to a receiving Treatment Facility or youth's inter-facility transfer, designated staff shall provide the youth with an additional standardized orientation to the Division of Youth Services. However, the additional orientation shall be focused on content related to, or in the context of the receiving Treatment Facility or facility, accepting the youth in an inter-facility transfer. Refer to Section XIII, "Orientation Process for DYS Youth."
5. Family involvement is essential for a youth's success in the Facility and effective Re-Entry into the community. Therefore:
 - a. On the day of a youth's arrival, designated staff shall call each youth's legal guardian to inform them that:
 - 1) The youth has arrived safely;
 - 2) A Parent/Legal Guardian Packet shall be sent; and,
 - 3) They need to read over the enclosed materials thoroughly to facilitate family involvement in the Youth Case Management process as soon as possible.
 - b. Within one (1) business day of a youth's arrival, designated staff shall mail a new Parent/Legal Guardian Packet to the youth's parent/legal guardian. This packet serves as an orientation to families regarding the services available to the youth, what the youth and their family may expect during the commitment period and shall include

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contact information for the family to express any concerns or seek the answer to further questions. The facility staff shall ensure that families that cannot understand English are provided applicable documents written in the appropriate language. The second Parent/Legal Guardian Packet includes:

- 1) “Transfer Letter to Family” (Attachment 27): Parent orientation letter explaining that the youth has arrived at a new facility. The letter shall encourage family involvement and outline the opportunities available for the youth and family at the facility. Contact information and a facility-specific Parent/Legal Guardian Packet shall also be provided;
 - 2) State Form 14387, “Application for Visitation Privileges” (Attachment 6) – to be completed for each visitor, signed by parent/guardian, and returned to youth’s assigned treatment staff. If more than one visitor, parent/guardian is required to make additional copies;
 - 3) State Form 48965 “Authorization for Minor Child to Visit” (Attachment 28) – to be completed, signed, and returned by parent/guardian to youth’s assigned treatment staff if a minor will be brought to the facility for a visit by someone other than the parent or legal guardian. Note: Parent/Guardian must have this form notarized by a Public Notary;
 - 4) State Form 41465, “Statement of Trafficking Laws and Authorization for Search” (Attachment 7) – to be reviewed, signed by parent/guardian, and returned to youth’s assigned treatment staff; and,
 - 5) Visitation Policy information, including: Types of Visits, General Rules, Visitor Dress Code, Home Visits/Temporary Leave, General Mail Guidelines, Telephone Guidelines, Commissary Guidelines, GTL, and a list of observed State holidays.
- c. Youth may request the distribution of additional Parent/Legal Guardian Packets.
 - d. All forms returned to the facility by families shall be processed, scanned into the IRIS system, and filed in Section VI of the youth institutional packet.
 - e. Designated staff shall also provide each parent/legal guardian with a second standardized orientation to the Division of Youth Services. Refer to Section XIV, “Orientation Process for Parent/Legal Guardian.”

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XIII. ORIENTATION PROCESS FOR YOUTH:

The standardized Orientation Process for Youth shall include but is not limited to the following:

- A. The Orientation Process for Youth shall occur as follows:
 - 1. A standardized orientation to DYS shall be initiated within 24 hours of youth’s arrival at the Intake Unit.
 - 2. Youth do not require any additional orientation when they are classified from the Intake Unit to the receiving Treatment Unit within that same facility.
 - 3. However, youth shall receive an additional standardized orientation to DYS, specific to the receiving Treatment Facility, when they are:
 - a. Classified from the Intake Unit at Logansport Juvenile Correctional Facility to Pendleton Juvenile Correctional Facility;
 - b. Involved in an inter-facility transfer from Logansport Juvenile Correctional Facility to Pendleton Juvenile Correctional Facility; or,
 - c. Involved in an inter-facility transfer from Pendleton Juvenile Correctional Facility to Logansport Juvenile Correctional Facility.
- B. The orientation process for youth may be delivered through verbal presentations, video components, and/or review of written materials. Designated staff shall ensure that youth who cannot read or understand English will have all applicable materials/components written in the appropriate native language and/or have translator services made available. When a literacy problem exists, a designated staff member shall assist the youth in understanding the material.
- C. Designated staff shall utilize the “Youth Orientation Checklist” (Attachment 29) to conduct orientation with each youth.
- D. Provide an overview of the Youth Behavior Management System and Token Economy Program to the youth.
- F. Each completed Youth Orientation Checklist shall be signed by both the youth and staff to signify that orientation in all areas has been completed. The checklist shall be scanned into the IRIS system and filed in Section VI of the youth institutional packet.

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G. A separate and standardized orientation to medical services shall also occur, including:

1. The names and schedules of on-site medical, dental, and mental health staff;
2. How to submit a request for health care services;
3. How to obtain services in case of an emergency;
4. Medication procedures;
5. Special diets;
6. Handicap accessibility;
7. Care and disposal of bodily fluids;
8. Hygiene procedures; and,
9. Limits of confidentiality.

H. A separate and standardized orientation to mental health services shall also occur, including:

1. General information, such as the right to treatment, how to request treatment, the limits of confidentiality, and typical reasons for requesting psychological services;
2. Procedures if the youth is physically or sexually assaulted while at the facility; and,
3. Scheduling youth on psychotropic medications to meet with the staff psychiatrist.

I. The Warden, or designee, shall periodically review the Orientation Process for Youth to ensure that all elements are being met.

XIV. ORIENTATION PROCESS FOR PARENT/LEGAL GUARDIAN:

Parent participation in a youth's program is strongly encouraged. Therefore, participation by a parent/legal guardian in a standardized Parent/Legal Guardian Orientation is required:

A. The Orientation Process for Parent/Legal Guardian shall occur as follows:

1. A Parent/Legal Guardian shall receive a standardized orientation to DYS while their youth is at an Intake Unit.
2. A Parent/Legal Guardian does not require any additional orientation when their youth is classified from the Intake Unit to the receiving Treatment Unit within that same facility.

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3. However, a Parent/Legal Guardian shall receive a second standardized orientation to DYS, specific to the receiving Treatment Facility, when their youth is:
 - a. Classified from the Intake Unit at Logansport Juvenile Correctional Facility to Pendleton Juvenile Correctional Facility;
 - b. Involved in an inter-facility transfer from Logansport Juvenile Correctional Facility to Pendleton Juvenile Correctional Facility; or,
 - c. Involved in an inter-facility transfer from Pendleton Juvenile Correctional Facility to Logansport Juvenile Correctional Facility.
- B. Since the Parent/Legal Guardian Packet serves as an initial introduction and orientation to DYS, the standardized Parent/Legal Guardian Orientation shall be a supplemental orientation that focuses on designated staff reviewing the information and forms included in the packet. However, the facility may choose to deliver the Orientation Process for Parent/Legal Guardian through verbal presentations, video components, and/or a review of written materials.
- C. Designated staff shall ensure that a parent/legal guardian who cannot understand English will have all applicable materials/components written in the appropriate native language and/or have translator services made available. When a literacy problem exists, a designated staff member shall assist the parent/legal guardian in understanding the material.
- D. Parent/legal guardian shall also be directed to the IDOC/DYS website where more detailed and printable Parent Resources, guidelines, and supplements are available.
- E. All attempts to contact the parent/legal guardian and completion of Parent/Legal Guardian Orientation shall be documented in an electronic progress note.
- F. The Warden, or designee, shall conduct periodic reviews of the Orientation Process for Parent/Legal Guardian to ensure that all elements are being met.

XV. CLASSIFICATION WITHIN A RECEIVING TREATMENT UNIT/FACILITY

The Youth Classification process also controls the receiving, processing, movement, and assignment of youth within a receiving Treatment Unit/Facility.

- A. Classification decisions are made based upon several factors, including but not limited to:

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1. Level of Risk to Reoffend;
 2. Level of Committing Offense;
 3. Sentence Status (Indeterminate, Determinate, Alternative, or YIA);
 4. Exceptional Programming Needs, current and history of;
 5. Medical/Mental Health codes;
 6. The Individual Assessment Report (IAR) and IAR Addendum;
 7. Treatment Programming Needs/Recommendations; and,
 8. Past/current behavior, including any behavior that would be considered either a sign of an aggressor or victim.
- B. The Classification Committee shall meet in accordance with a schedule approved by the Warden, or designee, and shall determine its decisions/recommendations by majority vote.
- C. Initial Classification Hearing:

The initial classification of a youth at a receiving Treatment Unit/Facility is determined by the Treatment Unit/Facility's Classification Committee using the information obtained during the Intake process, located in the youth's institutional packet, educational packet, medical packet, and electronically in JDS and CCMS.

1. In accordance with Policy and Administrative Procedure, 03-02-113, "Youth Case Management," the initial classification of a youth may also include coordinating with the youth's assigned treatment staff and designated staff attending regularly scheduled staffing meetings to design, select, schedule, and implement the delivery of programs and services to youth. However, the Classification Committee may be reconvened at a later date to assist with this process and/or be reconvened as needed to change how programs and services are delivered to a youth in need.
 2. Minutes shall be completed and distributed to designated staff.
 3. Youth shall be informed of their classification assignment:
 - a. After being informed of a classification assignment, the youth shall sign and receive a copy of State Form 20838, "Classification Hearing Results" (Attachment 4). This form shall be scanned into the IRIS system and filed in Section III of the youth's institutional packet.
 - b. Youth shall also be informed of the Classification appeal process.
- D. Reclassification Requests:

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The Classification Committee shall review reclassification requests for unit and bed assignment changes. Reclassification Requests shall be completed and submitted to the Classification Committee Chairperson. The Classification shall approve/deny the request. The vote will be documented on State Form 7268, "Reclassification Request" (Attachment 24). The youth shall receive a copy. The original shall be filed in Section 3 of the institutional packet and scanned to IRIS.

E. Assignment to Making A Change (MAC) Program:

Youth are assigned to the MAC Program as a classification decision with the goal of returning youth to the general population housing and programming as quickly as possible for completion of their treatment programs.

1. The assigned treatment staff shall submit a "MAC Program Referral" (Attachment 30) and State Form 7268 to the Classification Committee chairperson.
2. Based upon the review of the MAC Program Referral, the Classification Committee shall determine if the youth shall be placed in the MAC Program.
3. Youth shall be informed of their classification to the MAC Program. Youth shall sign and receive a copy of State Form 20838, "Classification Hearing Results"(Attachment 4), and this form shall be filed in Section III of the institutional packet. If the youth refuses to sign State Form 20838, a second staff person shall sign acknowledging the refusal. The youth shall also be informed of the Classification appeal process at that time.
4. When designated staff members have determined that a youth has successfully completed MAC Program, the assigned treatment staff shall submit State Form 7268 to the Classification Committee chairperson indicating the youth shall return to general population. Youth shall be informed of their of classification to general population unit. During this meeting, the youth shall sign and receive a copy of "Classification Hearing Results," and this form shall be filed in Section III of the institutional packet. If the youth refuses to sign the form, a second staff person shall sign acknowledging the refusal.

XVII. PRE-DISPOSITIONAL DIAGNOSTIC SERVICE:

A. Designation of Pre-Dispositional Diagnostic Units

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1. In accordance with Indiana Code 11-10-2-6, a juvenile court may order a youth who is before the court for disposition and is subject to commitment to the Department to be temporarily committed to the Department for evaluation and determination of proposed assignment. The Pre-dispositional Diagnostic Unit shall forward its written findings and recommendations to the sending court.
2. The Department has determined specific Pre-dispositional Diagnostic Units to which a legally constituted juvenile court may order a youth who is before the court for disposition and is subject to commitment to the Department to be temporarily committed for evaluation services. Such Pre-dispositional Diagnostic Units may not retain any juvenile in excess of fourteen (14) business days for the purpose of evaluation and determination of proposed assignment.

The following facilities have been designated by the Department to operate Pre-dispositional Diagnostic Units:

- a. The Intake Unit of Logansport Juvenile Correctional Facility may receive any male youth being deemed in need of a Pre-dispositional Diagnostic Evaluation by a legally constituted juvenile court and which is so ordered by that court.
- b. The Intake Unit of LaPorte Juvenile Correctional Facility may receive any female youth being deemed in need of a Pre-dispositional Diagnostic Evaluation by a legally constituted juvenile court and which is so ordered by that court.

B. Pre-Admission

1. When a county contacts DYS to indicate a youth has been temporarily committed to the Department, designated staff shall complete the "Intake Pre-Admission Report" (Attachment 1) at that time, checking that the youth is a "Diagnostic."

Upon completion, a copy is scanned into the IRIS system and filed in Section I of the youth's institutional packet prior to the youth departing the Diagnostic Unit.

C. Admission

1. The Pre-dispositional Diagnostic Unit shall ensure that the temporary commitment of any youth is within statutory limitations by ensuring that:

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- a. The court order is received at a Pre-dispositional Diagnostic Unit.
 - b. The youth is subject to commitment to the Department.
2. Upon receipt of a youth, the delivering governmental agency shall be provided with State Form 23605, "Offender Transport Order" (Attachment 2).
3. State Form 45998, "Record of Point of Entry" (Attachment 3) shall be completed with the assistance of the transporting individual.
4. The facility shall comply with its Operational Procedures for Policy 02-01-101, "Offender Personal Property," for the receipt, care, and inventory of individual items and disposition of a youth's personal property, including monies upon admission to the Diagnostic Unit.
5. Upon admission to the Diagnostic Unit, each youth shall be strip-searched, and the youth shall be showered. Facility clothing and personal hygiene items shall be provided, as necessary.
6. Each diagnostic youth shall be assigned a departmental identification number (IDOC Number).
7. A Diagnostic Unit and specific bed assignment shall be created in the Juvenile Data System (JDS). Each youth shall be informed of the unit/bed assignment and shall receive and sign State Form 20838, "Classification Hearing Results" (Attachment 4). This form shall be scanned into the IRIS system and filed in Section III of the youth's institutional packet prior to the youth departing the Intake Unit.
8. Designated staff shall confirm that JDS creates and populates a youth record in CCMS.
9. Each Diagnostic Unit shall create an individual institutional packet and escape packet for each youth in compliance with Policy and Administrative Procedure 01-04-104 "The Establishment, Maintenance and Disposition of Offender Records."
10. Within 24 hours of admission to the Diagnostic Unit, the "Juvenile Offender Arrival and Identification Report," or youth's Face Sheet, shall be generated through JDS. This report provides a summary of important data entered at various stages of the diagnostic process. A copy shall be placed in the youth's escape packet. Copies shall also be scanned into the IRIS system and filed in both Sections I and III of the youth institutional packet, prior to the youth departing the Intake Unit.

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11. Within 24 hours of admission to the Diagnostic Unit, youth shall be assigned to a designated Intake staff member. This individual shall be responsible for coordinating the Pre-dispositional Diagnostic Services for the youth, including acting as the staff contact person for the youth, meeting with the assigned youth, screening/assessing the youth, responding to the youth's concerns and questions, serving as a liaison between the assigned youth and other staff – especially staff preparing all necessary evaluations and paperwork to complete a Pre-dispositional Diagnostic Evaluation on the youth. This assignment shall be created in CCMS or other, approved electronic record.
12. Each youth temporarily committed to a Diagnostic Unit of the Department's Division of Youth Services shall receive a series of standardized screening assessments. Refer to Section VII. "Intake Assessments."
 - a. However, diagnostic youth do not receive a Risk Assessment and do not receive a Boot Camp Eligibility Checklist screening.
 - b. Results of these assessments shall be evaluated, recorded, and summarized in the Pre-dispositional Diagnostic Evaluation.
13. During the diagnostic process, the "Juvenile Flags Report" and the "Special Flags Report" shall be generated through JDS after reviewing screenings, assessments, and collateral evidence gathered. These reports provide a summary of critical flags that may be accessed by various staff persons in different capacities throughout a youth's diagnostic process.

D. Casework Procedure:

1. Historical Review:

A vital component in providing a thorough assessment for youth is the assigned Intake staff conducting a historical review of each youth. This review shall include collecting collateral information from sources outside of the youth.

- a. All written information received from the committing county shall be reviewed during the Intake process. This information may include, but not be limited to pre-dispositional reports, detention reports, treatment records, past screenings/assessments (including IYAS), police reports, victim statements, and other documents related to youth and family history.

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- b. Collateral information shall additionally be sought from parents/guardians, or other agencies when available. All attempts to contact and contacts made with the youth's family or other agencies shall be documented as progress notes in CCMS, or other approved electronic record.

2. Youth Interviews

Each youth's assigned Intake staff shall be responsible for conducting a minimum of 2 interviews during the youth's Pre-dispositional Diagnostic Evaluation:

- a. Within the first 24 hours of admission, youth shall be interviewed by the youth's assigned Intake staff utilizing the "Intake Youth Interview" form (Attachment 11), as outlined in Section VIII. "Intake Assessments."
- b. After the first interview is completed, the assigned intake staff shall provide youth with a packet to complete in preparation for a second interview. All diagnostic youth shall complete the "Intake Youth Questionnaire" packet (Attachment 16).
- c. Youth shall complete the IYQ within 2 business days of admission. Completed questionnaires shall be scanned into the IRIS system and filed in the confidential section of the youth institutional packet, prior to the youth returning to court.
- d. The second interview shall be completed within 7 business days of admission to review the IYQ so that the information gathered may be used in generating the Pre-dispositional Diagnostic Evaluation.

3. Summary of Immediate Concerns:

Within 24 hours of the last youth's arrival, designated staff shall produce a summary of the immediate concerns for all youth admitted to Intake that week, including any diagnostic youth. Refer to Section VIII.C.1-3. "Casework Procedure, Summary of Immediate Concerns."

The updated summary shall be used as collateral evidence during the rest of the diagnostic process. It shall also be incorporated into the Pre-dispositional Diagnostic Evaluation.

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4. Exceptional Programming Needs Identification

The identification and description of a youth’s exceptional programming needs may impact the diagnostic evaluation and court decisions. Exceptional programming needs for youth temporarily committed to a Diagnostic Unit of the Department’s Division of Youth Services follow the same definitions as youth who are new commitments. Refer to Section VIII. “Casework Procedure.”

5. Progress Notes

Each youth contact and all work completed with or on behalf of the youth by the assigned Intake staff or other designated staff as part of the diagnostic process shall be documented as progress notes in CCMS, or other approved electronic record.

E. Orientation Process for Youth Receiving a Pre-Dispositional Diagnostic Evaluation

The Diagnostic Unit shall provide a standardized orientation within 24 hours of youth’s arrival to the Diagnostic Unit to assist each youth to understand the Pre-dispositional Diagnostic Services process. The Orientation Process for Youth Receiving a Pre-dispositional Diagnostic Evaluation may be delivered through verbal presentations, video components, and/or review of written materials. Designated staff shall ensure that youth who cannot read or understand English will have all applicable materials/components written in the appropriate native language and/or have translator services made available. When a literacy problem exists, a designated staff member shall assist youth in understanding the material. The process includes but is not limited to the following:

1. Designated staff shall utilize the “Diagnostic Youth Orientation Checklist” (Attachment 31) to conduct orientation with each youth:
 - a. To provide an overview of the Youth Behavior Management System and Token Economy Program.
 - b. Each completed Diagnostic Youth Orientation Checklist shall be signed by both the youth and staff to signify that orientation in all areas has been completed. The checklist shall be scanned into the IRIS system and filed in Section VI of the youth institutional packet.
2. A separate and standardized orientation to Health Services shall also occur, including:

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- a. The names and schedules of on-site medical, dental, and mental health staff;
 - b. How to submit a health care request;
 - c. How to obtain services in case of an emergency;
 - d. Medication procedures;
 - e. Special diets;
 - f. Handicap accessibility;
 - g. Care and disposal of bodily fluids;
 - h. Hygiene procedures; and,
 - i. Limits of confidentiality.
3. A separate and standardized orientation to mental health services shall also occur, including:
- a. General information, such as the right to treatment, how to request treatment, the limits of confidentiality, and typical reasons for requesting psychological services;
 - b. Procedures if the youth is physically or sexually assaulted while at the facility; and,
 - c. Scheduling youth on psychotropic medications to meet with the staff psychiatrist.

F. Orientation Process for Parent/Legal Guardian of Diagnostic Youth

Family involvement is encouraged for youth who are receiving a Pre-dispositional Diagnostic Evaluation. Therefore:

1. On the day of a youth's admission to the Diagnostic Unit, designated staff shall call each youth's legal guardian to inform them that:
 - a. The youth has arrived safely;
 - b. Only legal guardians are permitted to visit the youth while the youth is receiving a Pre-dispositional Diagnostic Evaluation;
 - c. A Parent/Legal Guardian Packet shall be mailed; and,
 - d. They need to read over the enclosed materials thoroughly to facilitate family involvement in the Intake process as soon as possible.

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2. Within one (1) business day of a youth’s admission to the Diagnostic Unit, designated staff shall mail a Parent/Legal Guardian Packet to the youth’s parent/legal guardian. The Parent/Legal Guardian Packet shall include:

a. An “Initial Diagnostic Placement Letter to Family” (Attachment 32), which provides basic information about the youth’s commitment to the Department and his/her stay at the Diagnostic Unit. The youth’s parent/guardian is also provided the name of the youth’s assigned intake staff while youth is at the Diagnostic Unit.

A copy of this letter shall also be forwarded to the judge of the youth’s committing county, scanned into the IRIS system, and filed in Section IV of the youth’s institutional packet, prior to the youth returning to court.

b. State Form 14387, “Application for Visitation Privileges” (Attachment 6) – to be completed for legal guardians only and brought with them if they choose to visit while the youth is at the Diagnostic Unit:

1) If more than one parent/legal guardian, they are required to make additional copies.

2) No one except legal guardians are permitted to visit the youth while youth is at the Diagnostic Unit.

3) State Form 41465, “Statement of Trafficking Laws and Authorization for Search” (Attachment 7) – to be reviewed, signed by parent/legal guardian, and returned to youth’s assigned intake staff.

4) Visitation Policy information, including: Types of Visits, General Rules, Visitor Dress Code, Directions to the Facility, General Mail Guidelines, Telephone Guidelines, and Commissary Guidelines.

a) Youth may request the distribution of additional Parent/Legal Guardian packets.

b) All forms returned to the facility by families shall be processed, scanned into the IRIS system, and filed in Section VI of the youth institutional packet.

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3. During the diagnostic evaluation process, designated staff shall provide each parent/legal guardian with a standardized orientation to the Division of Youth Services:
 - a. Since the Parent/Legal Guardian Packet serves as an initial introduction and orientation to DYS, the standardized Parent/Legal Guardian Orientation shall be a supplemental orientation that focuses on designated staff reviewing the information and forms included in the Packet. However, the facility may choose to deliver the Orientation Process for Parent/Legal Guardian through verbal presentations, video components, and/or a review of written materials.
 - b. Parent/legal guardian shall also be directed to the IDOC/DYS website where more detailed and printable Parent Resources, guidelines, and supplements are available.
 4. All attempts to contact the parent/legal guardian and completion of Parent/Legal Guardian Orientation shall be documented in an electronic progress note.
 5. Designated staff shall ensure that youth and/or families who cannot read or understand English will have all applicable documents, materials, and components written in the appropriate native language or translator services shall be made available. When a literacy problem exists, a designated staff member shall assist the youth and/or families in understanding the material.
 6. The Warden, or designee, shall periodically review the Orientation Process for Youth Receiving a Pre-dispositional Diagnostic Evaluation and the Orientation Process for Parent/Legal Guardian of Diagnostic Youth to ensure that all elements are being met.
- G. Evaluation Process
1. The Diagnostic Unit shall prepare a “Pre-dispositional Diagnostic Evaluation” (Attachment 33).
 2. The Pre-dispositional Diagnostic Evaluation shall recommend an individualized rehabilitative treatment plan for each youth to assist in the determination of suitable treatment and/or placement alternatives. The evaluation shall include, at a minimum, the following:

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- a. A social history to include the youth's background data supplied by the court, community contact, and social agencies, together with information provided by the youth and family during the diagnostic process.
 - b. Summary of the evaluation of the results of all individual and/or group psychological tests, screenings, and/or assessments conducted during this process to evaluate the following areas:
 - 1) Academic achievement;
 - 2) Intelligence level;
 - 3) Personality assessment; and,
 - 4) Vocational interests.
 - c. Behavioral observations by Health Services and Diagnostic Unit staff.
 - d. Summary of data presented.
 - e. Recommendations for disposition to include treatment strategies and placement considerations.
3. The Warden, or designee, shall ensure that the Pre-dispositional Diagnostic Services are completed within 14 business days after the youth's admission to the Diagnostic Unit. The Pre-dispositional Diagnostic Evaluation shall be completed and forwarded to the Program Director 1, or designee, who shall review, approve, and sign the report.
- H. Return to Court Process:
1. The Warden, or designee, shall ensure that the committing court will be notified and arrangements for return of the youth to that court have been made prior to the expiration of the legal maximum limit of confinement in the Department:

Once arrangements are made and a return to court date is confirmed, the Diagnostic Unit shall:

 - a. Initiate State Form 23605, "Offender Transport Order" (Attachment 2);
 - b. Obtain a Transport Order from the court (if applicable); and,
 - c. Pre-release the youth in JDS.
 2. On the day of a youth's return to court, designated staff shall review the identification and confirm the identity of the designated court/county personnel,

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law enforcement personnel, or other approved person or personnel picking up the youth.

3. Following the youth’s return to court, the assigned Intake staff, the Release Coordinator, or other designated staff shall:
 - a. Release the youth in JDS;
 - b. After one (1) business day of release, confirm that JDS closed the youth’s record in CCMS; and,
 - c. Maintain the youth’s institutional packet until it is transferred to the approved Records Storage Warehouse in accordance with Policy and Administrative Procedure 01-04-104 “The Establishment, Maintenance and Disposition of Offender Records.”
4. The Warden, or designee, shall ensure that the Pre-dispositional Diagnostic Evaluation is submitted to the court within seven (7) business days of the youth’s return to the court’s jurisdiction.

XVIII. SAFEKEEPER PROCEDURE:

When a county contacts a DYS facility regarding housing a youth as a safekeeper, the facility shall direct the county to the Executive Director Division of Youth Services (ED DYS). ED DYS shall review and approve/deny the request. If approved, ED DYS shall notify the requesting county and the appropriate Intake Unit. The court must provide an order indicating that the youth is being placed in a DYS facility for the purpose of safekeeping. The county shall be instructed of the Intake Unit to deliver the safekeeper and are responsible for transporting the youth. Upon arrival at the Intake Unit, State Form 23605, “Offender Transport Order” (Attachment 2) shall be completed with the transporting individual. Safekeepers will be housed on the Intake Unit unless safety and security issues require restrictive housing.

XIX. PROGRESS NOTES:

Throughout the Youth Classification process, Intake Unit staff are required to complete progress notes in CCMS or other, approved electronic record. The content of all progress notes must be written with enough detail for other stakeholders to understand what occurred. These notes are made after every contact with a youth (individually or in a group setting); after every attempt to contact a youth’s family member(s); after every actual contact with the youth’s family member(s) (whether face-to-face, via phone, and /or via other electronic means); or after any work completed

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on behalf of a youth and their family, etc. Progress notes shall be made no matter if the youth and families are involved in the intake, diagnostic, receiving, or transfer components of the Youth Classification process. Types of progress notes are as follows:

- A. Individual Counseling progress notes document face-to-face individual contact with a youth to administer and discuss the results and recommendations from assessments, questionnaires, interviews, and any other evaluations conducted as part of the Youth Classification process.
- B. Family Counseling progress notes document face-to-face, phone, and/or electronic communication with the youth’s family to administer and discuss the results and recommendations from assessments, questionnaires, interviews, and any other evaluations conducted as part of the Youth Classification process.
- C. Case Management progress notes simply denote Intake Unit staff documenting non-counseling work completed with, or on behalf of, a youth during Youth Classification process to: Ensure a seamless continuum of services; communicate with stakeholders; track or monitor the Youth Classification process; and enable the Youth Case Management process to begin at the receiving Treatment Unit/Facility.

XX. MONITORING AND AUDITING:

- A. The monitoring and auditing process of Youth Classification provides for the collection of adequate and accurate information to review management of the Youth Classification process. The process provides guidelines for conducting the review, as well as mechanisms:
 - 1. To determine the effectiveness of Youth Classification in terms of:
 - a. Consistency and continuous quality improvement;
 - b. Department of Correction/DYS policy and procedure;
 - c. Discretionary abuses;
 - d. Overrides;
 - e. Legal requirements;
 - f. Objectivity; and,
 - g. Staff accountability.
 - 2. To identify Youth Classification issues within the facility and develop an action plan to address and correct identified issue(s); and,
 - 3. To advise facilities and DYS of issues within the Youth Classification policy that may result in revision to policy/procedure.

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B. Facility Monitoring:

The purpose of facility monitoring is to provide a process for regular and consistent review of a facility's adherence to policy and administrative procedures. The Program Director 1 at each facility shall monitor their facility's procedures and daily operations to ensure compliance with Policy and Administrative Procedure 03-02-104, "Youth Classification," as well as any other Department administrative policies and procedures linked to Youth Classification.

C. DYS Audit of the Youth Case Management Process:

Auditing is the Department's annual evaluation of the procedures and daily operations of each facility to ensure compliance with Policy and Administrative Procedure 03-02-104, "Youth Classification," as well as any other Department administrative policies and procedures linked to Youth Classification.

1. The Department shall review the Youth Classification process at each juvenile facility at least annually. The Program Director DYS shall provide the Warden at least 30 days advance notice indicating the schedule of the pending audit.
2. The audit team shall be composed of staff trained in the Youth Classification process. The Program Director DYS shall be the chairperson and shall select each audit team.
3. Prior to conducting the audit, the audit team shall meet to discuss:
 - a. Devising an action plan for how the audit shall be conducted;
 - b. Assigning each audit team member's duties and areas of responsibility; and,
 - c. Establishing schedules and timetables for completing each phase of the auditing process.
4. The Warden shall arrange to have the audit team accompanied by a staff person who is familiar with the Youth Classification process within the facility. This staff person shall:
 - a. Act as a resource coordinator for the audit team, including answering questions and providing information or assistance to the team; and,
 - b. Escorting the audit team during their audit of the facility.

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5. The audit team shall conduct the audit utilizing the “Youth Classification Audit Tool” (Attachment 34), which shall include reviewing institutional packets and CCMS electronic records; conducting interviews with staff and youth; and observation of Youth Classification processes.
6. The audit team shall also utilize the audit tool to take notes and summarize their findings. Upon completion of the audit, the audit team shall conduct a debriefing with the Warden to provide an overview of the results of the audit.
7. Within 30 days of the conclusion of the on-site audit, the Program Director DYS shall prepare a written (electronic) summary of the facility Youth Classification audit and the facility’s compliance with the audit. Copies shall be submitted to:
 - a. Executive Director, Division of Youth Services; and,
 - b. The Warden.
8. The Program Director DYS shall work with the facility to develop and complete an action plan to address and correct any identified issue(s) in the audit within thirty (30) days of the submission of the written audit summary.

XXI. TRAINING:

Training of this policy and administrative procedure shall be provided to new treatment staff in accordance with Administrative Policy and Procedure 01-05-101, “Staff Development and Training.” Related training shall be provided, as necessary.

XXII. APPLICABILITY:

These administrative procedures are applicable to all Division of Youth Services facilities operated by the Department.

signature on file
Robert E. Carter, Jr.
Commissioner

Date