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**IDAPA 05
TITLE 02
CHAPTER 02**

05.02.02 - RULES FOR STAFF SECURE PROVIDERS

000. LEGAL AUTHORITY.

01. Section 20-504(10), Idaho Code. Pursuant to Section 20-504(10), Idaho Code, the department shall establish minimum standards for the operations of all private residential and nonresidential facilities and programs which provide services to juvenile offenders committed to the department. (4-11-15)

02. Section 20-504(12), Idaho Code. Pursuant to Section 20-504(12), Idaho Code, the department shall have authority to adopt such administrative rules pursuant to the procedures provided in Chapter 52, Title 67, Idaho Code, as are deemed necessary or appropriate for the functioning of the department and the implementation and administration of the Juvenile Corrections Act. (4-11-15)

03. Interstate Compact on Juveniles. By the provisions of Sections 16-1901, et seq., Idaho Code, the "Interstate Compact on Juveniles," the department is authorized to promulgate rules and regulations to carry out more effectively the terms of the compact. (4-11-15)

001. TITLE AND SCOPE.

01. Title. These rules shall be cited as IDAPA 05.02.02, "Rules for Staff Secure Providers," IDAPA 05, Title 02, Chapter 02. (4-11-15)

02. Scope. These rules are established to ensure that the juvenile corrections system in Idaho will be consistently based on the following principles: accountability; community protection; and competency development. These rules apply to providers of treatment services identified in individual service implementation plans. (4-11-15)

002. WRITTEN INTERPRETATIONS.

In accordance with Section 67-5201(19)(b)(iv), Idaho Code, this agency has written statements which pertain to the interpretations of these rules. The document is available for public inspection and copying at cost at the Idaho Department of Juvenile Corrections, 954 W. Jefferson St., P.O. Box 83720, Boise, Idaho 83720-0285. (4-11-15)

003. ADMINISTRATIVE APPEALS.

This chapter does not provide for appeal of the administrative requirements for agencies. (4-11-15)

004. INCORPORATION BY REFERENCE.

There are no documents incorporated by reference into these rules. (4-11-15)

005. OFFICE -- OFFICE HOURS -- MAILING ADDRESS AND STREET ADDRESS.

The Idaho Department of Juvenile Corrections is located at 954 W. Jefferson St., Boise, Idaho 83720-0285. Business hours are typically 8 a.m. to 5 p.m., Monday through Friday, excluding holidays. Mail regarding the Idaho Department of Juvenile Corrections' rules should be directed to 954 W. Jefferson St., P.O. Box 83720, Boise, Idaho 83720-0285. The telephone of the office is (208) 334-5100 and the telecommunications relay service of the office is 1 (800) 377-1363 or 711. The facsimile number of the office is (208) 334-5120. (4-11-15)

006. PUBLIC RECORDS ACT COMPLIANCE.

The records associated with the providers are juvenile records of the Idaho Department of Juvenile Corrections, and are subject to the Idaho Public Records Act, Title 74, Chapter 1, Idaho Code. (4-11-15)

007. -- 009. (RESERVED)

010. DEFINITIONS.

01. Body Cavity Search. The examination and possible intrusion into the rectal or vaginal cavities to detect contraband. It is performed only by the medical health professional. (3-25-16)

- 02. Body Search, Clothed.** Also referred to as a Pat Search. A search during which a juvenile offender is not required to remove their clothing, with the exception of such items as a jacket, hat, socks and shoes. (4-11-15)
- 03. Body Search, Unclothed.** Also referred to as a Strip Search. A search during which a juvenile offender is required to remove all clothing that is conducted by a medical health professional. (4-11-15)
- 04. Education Plan.** A written plan for general education students outlining the coursework they will complete each year towards meeting the Idaho Common Core Standards recommended coursework for their grade level based on assessed academic, emotional, developmental and behavioral needs, and competencies. Students qualifying for Individuals with Disabilities Education Act (IDEA) services will have an Individual Education Plan (IEP) in lieu of an education plan. (4-11-15)
- 05. General Education Student.** A student who does not qualify for special education services under the Individuals with Disabilities Education Act (IDEA). (4-11-15)
- 06. Health Services.** Including, but not limited to, routine and emergency medical, dental, optical, obstetrics, mental health, or other related health service. (4-11-15)
- 07. Independent Living Services.** Services that increase a juvenile offender's ability to achieve independence in the community. (4-11-15)
- 08. Individual Community Pass.** Any instance in which a juvenile offender leaves the residential treatment provider's facility for a planned activity, without direct supervision by at least one (1) residential treatment provider or department staff. Regular school or work attendance, regular participation in off-site treatment sessions or groups and other regular off-site activities specifically included in the service implementation plan or written reintegration plan and approved by the juvenile services coordinator are not included in this definition. Individual community passes include, but are not limited to: (4-11-15)
- a.** Day passes with family or other, approved individuals; (4-11-15)
 - b.** Day or overnight home visits; (4-11-15)
 - c.** Recreational activities not otherwise approved as a part of a group activity; and (4-11-15)
 - d.** Funeral leave. (4-11-15)
- 09. Individual Education Plan (IEP).** A written document (developed collaboratively by parents and school personnel) which outlines the special education program for a student with a disability and is based on assessed academic, emotional, developmental and behavioral needs, and competencies. This document is developed, reviewed, and revised at an IEP meeting at least annually. (4-11-15)
- 10. Medical Health Assessment.** A thorough review to determine a juvenile offender's comprehensive health needs. This information is used to develop the medical terms of a juvenile offender's service plan. (4-11-15)
- 11. Medical Health Professional.** An individual who meets the applicable state's criteria as a licensed LPN, RN, nurse practitioner, physician assistant, physician or the equivalent. (4-11-15)
- 12. Medical Health Screening.** A process used to quickly identify a juvenile offender's immediate health needs and to determine if there are any immediate needs related to a chronic health condition. (4-11-15)
- 13. Mental Health Assessment.** A thorough review to determine a juvenile offender's comprehensive mental health needs. This information is used to develop the medical terms of a juvenile offender's service plan. (4-11-15)
- 14. Mental Health Screening.** A process used to quickly identify a juvenile offender's immediate mental health needs and to determine if there are any immediate needs related to a chronic mental health condition. (4-11-15)

15. Privileged Mail. Mail between the juvenile offender and their attorneys, legal aid services, other agencies providing legal services to juvenile, or paraprofessionals having legitimate association with such agencies; judges and clerks of federal, state and county courts; public officials and their authorized representatives acting in their official capacities; and the communications with clergy of the juvenile's faith. (4-11-15)

16. Staff Secure Facility. Secure residential facility with awake staff twenty-four (24) hours a day, seven (7) days a week for intensive supervision of juvenile offenders. This includes architecturally secure residential facilities. (4-11-15)

011. -- 099. (RESERVED)

100. INITIATION OF SERVICES.

Juveniles are committed to the department under the provisions of the Juvenile Corrections Act (Sections 20-501 through 20-547, Idaho Code). (4-11-15)

101. WAIVER AND VARIANCE.

Minimum program standards established herein shall apply to all services provided by the provider. Any waiver and variance from the standards stated in these rules must receive prior written approval from the department and must be attached as a formal amendment to the contract. (4-11-15)

102. APPLICABILITY.

This chapter applies to providers of treatment services identified in individual service implementation plans. Staff secure providers must also abide by IDAPA 05.02.01, "Rules for Residential Treatment Providers." (4-11-15)

103. -- 199. (RESERVED)

200. AUTHORITY TO INSPECT.

The department shall have the authority to conduct reviews of programs, program operations, juvenile offender placements, and facilities to ensure the provider's compliance with these rules. The provider shall cooperate with the department's review, and must provide access to the facility and all juvenile records for juveniles in department custody, as deemed necessary by the department. However, in order to more fully assess the operation of the program, aggregate data and information for all juveniles must be made available. (4-11-15)

201. COMPLIANCE WITH RULES REQUIREMENTS.

The provider must comply with all relevant child care licensing rules of the Idaho Department of Health and Welfare, IDAPA 16.06.02, "Rules Governing Standards for Child Care Licensing," as well as the rules of the Idaho Department of Juvenile Corrections. Providers located outside of the state of Idaho must comply with their state's relevant child care licensing rules as well as the rules of the Idaho Department of Juvenile Corrections. If a conflict exists between department rules, the more restrictive rule applies. Any and all subcontractors and consultants of the provider are also subject to these rules. (4-11-15)

202. MINIMUM MANDATORY STAFF TRAINING REQUIREMENTS.

Good professional practice in the area of juvenile offender treatment requires staff to be competently trained. Therefore, all staff is required to have eighty (80) hours of training for all staff during first year of employment. Up to twenty-five percent (25%) of the eighty (80) hours may be fulfilled by working with an experienced staff mentor, who must verify and document basic competencies for new staff; and forty (40) hours of training per year following the first year of employment. (4-11-15)

203. CLOTHING AND PERSONAL ITEMS.

01. Clothing Management. Juvenile offenders must have sufficient and appropriate clothing to participate in activities included in their service implementation plan. Juvenile offenders may arrive at the facility with their own clothing and personal items, which shall be inventoried. If the juvenile offender does not have sufficient or appropriate clothing, the provider must provide or purchase adequate and appropriate clothing for the juvenile offender. The provider will ensure the proper care and cleaning of clothing in the juvenile offender's possession. Providers shall not request nor require that the juvenile offender, parent or guardian pay for or purchase

clothing. (4-11-15)

02. Release from Facility. All clothing and incidentals become the property of the juvenile offender upon release from the facility. (4-11-15)

03. Replacement Clothing. Clothing provided or purchased as replacement will be at the expense of the provider. Unique items of clothing not required for program participation may be purchased at the expense of the juvenile offender. (4-11-15)

204. FOOD SERVICE.

Juvenile offenders must be served a varied and nutritional diet with menus approved or developed by a qualified nutritionist or dietician and which meet the recommended dietary allowances of the National Research Council or its equivalent. Juvenile offenders must be provided three (3) meals daily in accordance with the child care licensing rules of the Idaho Department of Health and Welfare, or the applicable state's licensing authority. (4-11-15)

205. RELIGIOUS SERVICES.

The provider must ensure that attendance at religious services is voluntary. No juvenile offender shall be required to attend religious services, and no juvenile offender shall be penalized for not attending nor given privileges for certain attendance. The provider's staff schedule must not encourage or discourage participation in general or specific religious services or activities. (4-11-15)

01. Voluntary Practice. All juvenile offenders must be provided the opportunity to voluntarily practice their respective religions in a manner and to the extent that will not compromise the safety, security, emotional, or physical well-being of the juvenile offenders in the facility. (4-11-15)

02. Attendance. Juvenile offenders may be permitted to attend religious services of their choice in the community as long as community safety is ensured. (4-11-15)

03. Transportation. Programs must, when reasonably possible, arrange transportation for those juvenile offenders who desire to take part in religious activities of their choice in the community. (4-11-15)

04. Risk to Community. If the juvenile offender cannot attend religious services in the community because staff has determined that the juvenile is an escape risk, or otherwise presents a risk to the safety of the community, the provider must make reasonable efforts to ensure that the juvenile offender has the opportunity to participate in religious services of the juvenile's choice at the facility. (4-11-15)

05. Visits. Juvenile offenders must be permitted to receive visits from representatives of their respective faiths. (4-11-15)

206. EMPLOYMENT OF JUVENILE OFFENDERS.

01. Employment. If juvenile employment away from the program site is a part of the program, written policy and procedure must provide that program resources and staff time are devoted to helping employable juvenile offenders locate employment. Programs must ensure that each employment opportunity meets all legal and regulatory requirements for juvenile employment. The juvenile offender's employer must be consulted at least twice monthly by the provider concerning the juvenile offender's work abilities and performance on the job-site. Additionally, the provider must make checks on the job-site at least monthly to ensure the juvenile offender is working under acceptable conditions, and shall document these checks in the juvenile offender's progress report. Under no circumstances should staff or the families of staff benefit financially, or otherwise, from work done by juvenile offenders in the program. (4-11-15)

02. Employment Opportunities. Every reasonable effort must be made to select employment opportunities that are consistent with the individual interests of the juvenile offender to be employed. Preference will be given to jobs that are related to prior training, work experience, or institutional training, and may be suitable for continuing post-release employment. Reasonable effort must be made to provide a juvenile offender with the highest paying job possible. Income earned by a juvenile offender must be handled consistent with Subsection 207.04 of these rules. (4-11-15)

207. PERSONAL FUNDS.

01. Funds Handled by a Provider. The provider will follow generally accepted accounting practices in managing personal funds of juvenile offenders. (4-11-15)

a. The provider may deposit personal funds collected for the juvenile offender in a public banking institution in an account specifically designated "Juvenile Personal Funds." The provider must maintain a reconciled ledger showing each juvenile offender's deposits and withdrawals within the "Juvenile Personal Funds" account. If the funds are collected in an interest bearing account, the interest accrued must be credited to the juvenile offender for whom the funds are collected. (4-11-15)

b. If the amount of personal funds maintained for the juvenile offender does not exceed fifty (50) dollars, the provider may secure the funds locally if the following conditions are met: (4-11-15)

i. The juvenile offender's personal funds are kept in a fire-resistant, combination or digital lock-style safe that is permanently affixed to the floor or wall, or weighs at least 200 (two-hundred) pounds. (4-11-15)

ii. The provider has a process to clearly separate each juvenile offender's personal funds from one another. (4-11-15)

iii. Access to juvenile offender personal funds is limited to the Program Director or designee. (4-11-15)

c. All withdrawals by a juvenile offender, or expenditures made on behalf of a juvenile offender by the provider, must be documented, signed, and dated by the juvenile offender. This documentation must be reconciled to the juvenile offender's ledger monthly. (4-11-15)

d. The provider must develop written procedures governing any limits to the amount of funds a juvenile offender may withdrawal from their personal funds. (4-11-15)

e. The provider shall not require juvenile offenders, parents, or guardians to pay for services and supplies that are to be provided by the provider. (4-11-15)

02. Reporting Requirements. A personal funds report must be submitted every other month to the juvenile services coordinator. The report must show a list of all juvenile offender account balances. The personal fund account is subject to review and audit by the department or its representatives at any time. Any discrepancies in juvenile offender accounts must be resolved by the provider within five (5) business days of completion of review. (4-11-15)

03. Juvenile Offenders with Earned Income. The provider is responsible for maintaining and accounting for any money earned by a juvenile offender. There must be a plan for the priority use of the juvenile offender's earned income to pay court ordered restitution, as referenced in Subsection 208.02 of these rules, and a specific allocation for daily incidental expenses. The provider must establish a written plan for the juvenile offender to save the funds necessary to be used upon program completion, for purposes such as paying deposits on utilities and housing or the purchasing of resources necessary for employment. (4-11-15)

04. Transfer of Personal Funds. If a juvenile offender is transferred to another program, the balance of the juvenile offender's funds must be given or mailed to the department's fiscal services within ten (10) business days and documented on the Provider Juvenile Check-Out Form supplied by the department, and on the final progress report. (4-11-15)

208. COMMUNITY SERVICES AND RESTITUTION.

01. Community Service. Juvenile offenders may have court-ordered community service hours. The provider must obtain prior approval from the juvenile probation officer to complete any court-ordered community service hours while at the provider. The provider shall be responsible for documenting approved community service

hours and reporting the accumulation of completed hours in the juvenile offender's progress report. (4-11-15)

02. Court Ordered Restitution. The provider must create a plan for the juvenile offender to submit a portion of a juvenile offender's personal funds or earned income for the payment of restitution as described in this section. The provider must work with the juvenile probation officer and juvenile services coordinator to determine the amount of restitution owed. When juvenile personal funds are available the provider will submit payment to the county until the restitution amount is satisfied. Documentation of the payment is provided to the juvenile services coordinator. Court ordered restitution must be a claim against and paid from the juvenile offender's personal funds account in the amount of fifty percent (50%) of those funds. Should the juvenile offender have no other funds available, then a plan must be developed by the provider to assist the juvenile offender in earning the amount of restitution and, if appropriate, help him develop a payment plan. (4-11-15)

03. Restitution for Program Damages. Monetary restitution may only be sought through a court order when a juvenile offender has damaged or destroyed property, or has caused or attempted to cause injury to other juvenile offenders or staff. Restitution for damages at the program will not be paid to the exclusion of court ordered restitution. The provider must not access the juvenile offender's personal funds for program damages. Restitution for damages must begin with a plan for repair by the juvenile offender. (4-11-15)

209. JUVENILE OFFENDER MAIL.

01. Restrictions. Juvenile offenders shall be allowed to send and receive letters from approved persons, which may include persons in other programs or institutions, unless specifically prohibited by the department or by court order. All other restrictions of mail must be discussed with the community treatment team, approved in writing by the juvenile services coordinator, and documented in the juvenile offender's service implementation plan. There must be no general restrictions on the number of letters written, the length of any letter, or the language in which a letter may be written. Juvenile offenders will be provided with sufficient stationery, envelopes, and postage for all legal and official correspondence, and for at least two (2) personal letters each week. (4-11-15)

02. Inspection of Outgoing Letters. (4-11-15)

a. Outgoing letters are to be posted unsealed and inspected for contraband. (4-11-15)

b. Exception: Outgoing "privileged" mail may be posted, sealed and may not be opened, except with a search warrant, as long as it can be confirmed to be to an identifiable source. For purposes of this rule, "an identifiable source" means that the official or legal capacity of the addressee is listed on the envelope and that the name, official or legal capacity, and address of the addressee have been verified. (4-11-15)

c. Upon the determination that the mail is not identifiable as privileged mail, said mail shall be opened and inspected for contraband. (4-11-15)

03. Inspection of Incoming Letters. All incoming letters must be opened by the juvenile offender to whom it is addressed and may be inspected for contraband by staff and only in the juvenile offender's presence. (4-11-15)

04. Reading of Letters. Routine reading of letters by staff is prohibited. The department or court may determine that reading of a juvenile offender's mail is in the best interest of the juvenile offender, and is necessary to maintain security, order or program integrity. However, such reading of mail must be documented and unless court ordered, must be specifically justified and approved by the juvenile services coordinator. (4-11-15)

05. Privileged Mail. Under no circumstances shall a juvenile offender's privileged mail be read. (4-11-15)

06. Packages. All packages must be inspected for contraband. (4-11-15)

07. Publications. Books, magazines, newspapers and printed matter which may be legally sent to juvenile offenders through the postal system may be approved, unless deemed to constitute a threat to the security,

integrity, or order of the programs. Juvenile offenders shall not be allowed to enter into subscription agreements while in department custody. (4-11-15)

08. Distribution of Mail. The collection and distribution of mail must never be delegated to a juvenile offender. Staff must deliver mail within twenty-four (24) hours, excluding weekends and holidays, to the juvenile offender to whom it is addressed. (4-11-15)

210. VISITATION.

The provider must develop a written policy governing visitation which protects the safety of visitors, staff, and juvenile offenders. This policy may restrict visitors below an established age to the program or facility. The provider must provide a copy of the visitation policy to each juvenile offender, his parent or guardian, and the juvenile services coordinator. If there is reason to believe a visitor is under the influence of alcohol or drugs or possesses illegal contraband, admission into the residence shall be denied. In all cases, the provider will work with the juvenile services coordinator and juvenile probation officer to identify and approve potential visitors. (4-11-15)

211. -- 219. (RESERVED)

220. SEARCHES FOR CONTRABAND.

01. Searches of Personal Items. Routine searches of personal items being introduced into the program may be conducted by staff prior to the juvenile offender taking possession of his property, or when the juvenile offender is returning to the program from an individual community pass. Search of a juvenile offender's belongings may be done at any time and must be minimally intrusive. (4-11-15)

02. Policies and Procedures Governing Consequences. The provider must have written policies and procedures establishing the consequences for juvenile offenders found with contraband. (4-11-15)

03. Visitor Searches. (4-11-15)

a. Prior to visitors being allowed in the program, they must be given rules established by the provider that govern their visit and advised that they may be subject to a search by trained staff. They must sign a statement of receipt of these rules and it shall be placed in the provider's file. (4-11-15)

b. Visitors may be required to submit personal items for inspection. If there is reason to believe that additional searches are necessary, admission to the facility shall be denied. Visitors who bring in items that are unauthorized, but not illegal, will have these items taken and locked in an area inaccessible to the juvenile offenders during the visit. These items will be returned to the visitors upon their exit from the facility. (4-11-15)

c. All visitor searches must be documented. When contraband is found, a written report must be completed and submitted to the juvenile services coordinator. If necessary, the appropriate law enforcement agency will be notified. (4-11-15)

04. Clothed Body Searches. (4-11-15)

a. Clothed body searches of juvenile offenders may be conducted whenever the provider believes it is necessary to discourage the introduction of contraband into the program, or to promote the safety of staff, juvenile offenders, and visitors. A clothed body search may be used when a juvenile offender is returning from a visit, outside appointment, or activity. (4-11-15)

b. Clothed body searches must be conducted in the manner required by the rules of the Idaho Department of Health and Welfare under IDAPA 16.06.02, "Standards for Child Care Licensing." Clothed body searches of juvenile offenders will be conducted by staff of the same gender as the juvenile offender. Clothed body searches will be conducted using a pat down search on the outside of the juvenile's clothing. The staff member must have had appropriate training in conducting clothed body searches. (4-11-15)

05. Unclothed Body Searches. Unclothed body searches of juvenile offenders may only be conducted by a medical health professional and with prior written authorization from the program director or designee.

Unclothed body searches must be conducted with an adult in the room, in addition to the medical health professional, who is of the same gender as the juvenile offender being searched. Unclothed body searches must be based upon a reasonable belief that the juvenile is concealing contraband or signs of abuse. Immediately after conducting an unclothed body search the provider must notify the department's regional superintendent and the Quality Improvement Services Bureau. The provider must complete an incident report according to the requirements of IDAPA 05.02.01.241, "Rules for Residential Treatment Providers." (3-25-16)

06. Body Cavity Searches. Body cavity searches of juvenile offenders may only be conducted in a medical facility outside of the residential treatment provider, by a medical health professional, and with prior written authorization from the program director or designee. Body cavity searches of juveniles will not be performed by staff, interns, or volunteers under any circumstances. Looking into a juvenile's mouth, ears, or nose does not constitute a body cavity search. Body cavity searches must be based upon a reasonable belief that the juvenile is concealing contraband. Immediately after conducting a body cavity search the provider must notify the department's regional superintendent and the Quality Improvement Services Bureau. The provider must complete an incident report according to the requirements of IDAPA 05.02.01.241, "Rules for Residential Treatment Providers." (3-25-16)

07. Documentation of Searches. All searches must be documented in terms of reason for the search, who conducted the search, what areas were searched, and what type of contraband was found, if any. If a search yields contraband, the juvenile services coordinator must be notified and it shall be reported according to the requirements of IDAPA 05.02.01.241, "Rules for Residential Treatment Providers." If necessary, the appropriate law enforcement agency should be notified. (4-11-15)

08. Contraband Disposal. All contraband found in the possession of juvenile offenders, visitors, or staff must be confiscated by staff and secured under lock and key in an area inaccessible to juvenile offenders. Local law enforcement must be notified in the event illegal drugs, paraphernalia, or weapons are found. It shall be the responsibility of the program director, in consultation with the department, to dispose of all contraband not confiscated by police. (4-11-15)

221. SMOKING AND SALE OF CIGARETTES.

Juvenile offenders, regardless of age, are strictly prohibited from purchasing or using tobacco products. Staff secure providers must establish written policies and procedures banning the use of cigarettes and other tobacco products by juvenile offenders at the facility. (4-11-15)

222. ROOM RESTRICTIONS.

01. Policy and Procedure. The provider must have written policies and procedures regulating the use of the juvenile offender's room for room restriction. The provider's room restriction policy must at a minimum address the following: (4-11-15)

- a. Procedures for recording each incident involving the use of restriction; (4-11-15)
- b. The reason for the room restriction must be explained to the juvenile offender and allow the juvenile offender to have an opportunity to explain their behavior; (4-11-15)
- c. Other less restrictive measures must have been applied prior to the room restrictions; (4-11-15)
- d. A juvenile offender on room restriction must have access to the bathroom; (4-11-15)
- e. Room restriction may only be used in an unlocked area; and (4-11-15)
- f. Room restriction must not exceed a total of eight (8) hours within a twenty-four (24) hour period. (4-11-15)

02. Monitoring During Room Restriction. Staff must check on a juvenile offender in room restriction a minimum of once every fifteen (15) minutes. Providers must ensure that a juvenile offender with a history of depression or suicidal ideation and those who have exhibited these behaviors while in care, are checked at least every five (5) minutes in order to ensure safety. Even more frequent or constant observation must be maintained if any level

of suicide risk is determined to be present at any time during room restriction. All items in the area that might be used to attempt self-harm should be restricted or removed. (4-11-15)

223. USE OF FORCE OR PHYSICAL RESTRAINTS.

Providers licensed by the Idaho Department of Health and Welfare or the applicable state licensing authority, must ensure that all terms of the licensing rules are strictly followed. Additionally, providers must ensure that: (4-11-15)

01. Minimal Use. Only the minimum level of force necessary to control a juvenile offender's destructive behavior shall be used. (4-11-15)

02. Physical Force. Physical force, at any level, may only be used to prevent injury to the juvenile offender or to others and to prevent serious damage to property or escape. Physical force must never be used as punishment. (4-11-15)

03. Reporting Requirement. All instances of use of force must be documented in an incident report and submitted according to the terms of IDAPA 05.02.01.241, "Rules for Residential Treatment Providers." Incidents of inappropriate use of force must be reported to the state's applicable licensing authority, or law enforcement as required by law. (4-11-15)

224. -- 229. (RESERVED)

230. PROGRAMMING.

01. Basic Program Requirements. Providers must provide opportunities and services for juvenile offenders to improve their educational and vocational competence, to effectively address underlying behavior problems, and to prepare them for responsible lives in the community. Programs provided must be gender equitable, gender specific, and culturally competent. The ultimate treatment goal for juvenile offenders involved in these programs is the successful return of juvenile offenders to the community without committing further crimes. (4-11-15)

02. General Requirements. (4-11-15)

a. Providers must provide a range of program services specifically designed to address the characteristics of the target population identified in the comprehensive program description and in the admission policy. (4-11-15)

b. Programs that serve a special needs population, such as developmentally delayed or seriously emotionally disturbed juvenile offenders, and those programs serving sexually abusive juvenile offenders, must be able to demonstrate that the program services offered are supported by research. (4-11-15)

c. Programs serving female juvenile offenders must be able to demonstrate that the services provided include elements of a program specifically designed to address the unique situations and circumstances facing female juvenile offenders. These elements must be clearly identified and described within the program description. (4-11-15)

d. Programs designed to serve juvenile offenders with gang involvement must be able to demonstrate that the services provided include elements of a program specifically designed to address gang involvement. These elements must be clearly identified and described within the program description. (4-11-15)

e. Program services for individual juvenile offenders must be designed based upon the juvenile's service plan, and must target those behaviors or circumstances which have contributed to the juvenile's delinquency and which can reasonably be changed (criminogenic needs). These services must be clearly identified and described within the program description. (4-11-15)

f. Juvenile offenders must always be aware of the status of their progress within the program and what remains to be done to complete the program. Providers must assure that the basic norms and expectations of the program, including any points, levels or phases that are a fundamental part of a program, are clearly presented to the juvenile offender and that they are understood. (4-11-15)

- g.** Programs that contract with the department to serve juvenile offenders and their families must: (4-11-15)

 - i.** Provide humane, disciplined care and supervision; (4-11-15)
 - ii.** Provide opportunities for juvenile offenders' development of competency and life skills; (4-11-15)
 - iii.** Hold juvenile offenders accountable for their delinquent behavior through means such as victim-offender mediation, restorative conferencing, restitution, and community service; (4-11-15)
 - iv.** Seek to involve juvenile offenders' families in treatment, unless otherwise indicated for the safety and benefit of the juvenile offenders or other family members; (4-11-15)
 - v.** Address the principles of accountability to victims and to the community, competency development, and community protection in case planning and reporting; (4-11-15)
 - vi.** To the fullest extent possible, provide balance in addressing the interests of the victim, community, and the juvenile offender. (4-11-15)
 - vii.** Participate fully with the department and the community treatment team in developing and implementing service plans for juvenile offenders they serve; and (4-11-15)
 - viii.** Provide juvenile offenders with educational services based upon their documented needs and abilities. (4-11-15)

231. GUIDELINES FOR SPECIFIC SERVICES.

- 01. Counseling Services.** (4-11-15)

 - a.** All counseling services provided to juvenile offenders, whether individual, group or family, must be performed by a clinician, counselor, or therapist as defined in these rules. (4-11-15)
 - b.** Counseling should be planned and goal directed. (4-11-15)
 - c.** Notes must be written for each service provided and include documentation of who provided the service. The notes must be dated and clearly labeled either individual, group or family counseling. (4-11-15)
 - d.** The methods and techniques applied in counseling and the frequency and intensity of the sessions should be determined by assessment. (4-11-15)
 - e.** Counseling should be reality oriented and directed toward helping juvenile offenders understand and solve specific problems; discontinue inappropriate, damaging, destructive or dangerous behaviors; and fulfill individual needs. (4-11-15)
 - f.** The minimum standard for the frequency of counseling services must be specified in the comprehensive program description attached to the contract with the department. (4-11-15)
 - g.** There should be a mechanism developed to monitor and record incremental progress toward the desired outcome of counseling services. (4-11-15)
 - h.** Programs should be able to demonstrate that counseling interventions are shared in general with other program service providers, and there is broad mutual support for the goals of counseling in all service areas of the program. (4-11-15)
 - i.** Programs must provide crisis intervention counseling if warranted by the assessment and circumstances. (4-11-15)

j. The provider must furnish adequate space for conducting private interviews and counseling sessions at the facility. (4-11-15)

k. Family counseling services must be available as a part of the juvenile offender's service implementation plan, to the extent that this is supported by the assessment. If the assessment indicates a need for these services, family counseling should specifically address issues that, directly or indirectly, resulted in the juvenile offender's removal from the home and the issue of eventual reintegration back into the family unit. A statement of goals to be achieved or worked toward by the juvenile offender and the family should be part of the service implementation plan. (4-11-15)

02. Substance Abuse Services. As a minimum standard, programs must provide substance abuse services as determined by assessment and indicated in the service implementation plan. Substance abuse services must have direct oversight by a certified alcohol and drug counselor, or master's level clinician with three (3) years' experience in the substance abuse field. Substance abuse services must be fully described in the detailed program description and must have a written curriculum containing a description of each session offered. Juvenile offenders receiving substance abuse services must have an introduction to a community intervention program. Relapse prevention plans must be a component of the substance abuse services provided. Relapse prevention plans must be specifically based on the individual needs of the juvenile offender. Notes documenting the service provided must be dated, clearly labeled "substance abuse services," and each entry must be signed by the counselor performing the service. (4-11-15)

03. Social Skills Training Including Relapse Prevention Skills. Programs must assess each juvenile offender's social skills and document specific services provided to improve functioning in this area. Additionally, every juvenile offender must have developed a written relapse prevention plan prior to successfully completing the program. (4-11-15)

04. Life Skills and Independent Living. Programs must be able to demonstrate that juvenile offenders are taught basic life skills and that age-appropriate juvenile offenders are involved in independent living skills consistent with their age and needs. This program should include, at a minimum, instruction in: (4-11-15)

- a.** Hygiene and grooming skills; (4-11-15)
- b.** Laundry and maintenance of clothing; (4-11-15)
- c.** Appropriate social skills; (4-11-15)
- d.** Housekeeping; (4-11-15)
- e.** Use of recreation and leisure time; (4-11-15)
- f.** Use of community resources; (4-11-15)
- g.** Money management; (4-11-15)
- h.** Use of public transportation, where available; (4-11-15)
- i.** Budgeting and shopping; (4-11-15)
- j.** Cooking; (4-11-15)
- k.** Punctuality, attendance and other employment-related matters; (4-11-15)
- l.** Vocational planning and job finding skills; and (4-11-15)
- m.** Basic health education. (4-11-15)

05. Recreational Services. Programs should have a written plan for providing recreational services based on individual needs, interests, and functional levels of the population served. (4-11-15)

a. The recreational program should include indoor and outdoor activities. Activities should minimize television and make use of a full array of activities that encourage both solitary entertainment and small group interaction. An appropriately furnished area should be designated inside the facility for leisure activities. (4-11-15)

b. Programs should have staff educated and experienced in recreational programs to ensure good planning, organizing, supervision, use of facility, and community activities. Recreational activities considered part of the service implementation plan must be funded by the provider. The use of community recreational resources should be maximized, as long as community safety is assured. The provider must arrange for the transportation and provide the supervision required for any usage of community recreational resources. No juvenile offender shall be required to pay to participate in recreational activities made available through the program. (4-11-15)

06. Transportation Services. In all transport situations there must be at least one (1) assigned staff of the same gender, or two (2) assigned staff of the opposite gender, as the juvenile offender being transported. (4-11-15)

232. CASE MANAGEMENT REPORTING REQUIREMENTS.

Each juvenile offender's progress, or lack of progress, through these levels must be clearly documented and must be related to documented behavior. Recommendations for release from department custody or transfer should be substantiated by a documented pattern of behavioral change over a period of time. Recommendations for transfer to a higher level of custody must be substantiated by a documented lack of progress over time, or by a serious or violent incident which threatens the safety of others or the stability of the overall program. (4-11-15)

01. Service Implementation Plan. Within thirty (30) calendar days of the juvenile offender's admission into the program, a written service implementation plan must be developed. The service implementation plan must address the specific goals identified in the service plan from the observation and assessment report. The service implementation plan should, at a minimum, address the following areas as indicated by need: (4-11-15)

- a.** Education and employment; (4-11-15)
- b.** Personality and behavior; (4-11-15)
- c.** Substance abuse; (4-11-15)
- d.** Attitudes, values, and delinquent orientation; (4-11-15)
- e.** Family circumstances and parenting; (4-11-15)
- f.** Peer relations; (4-11-15)
- g.** Leisure and recreation; (4-11-15)
- h.** Sexual misconduct; (4-11-15)
- i.** Specialized needs; and (4-11-15)
- j.** Reintegration plan, including living arrangements upon release from department custody or transfer and aftercare services needed. (4-11-15)

02. Juvenile Offender and Family Involvement. Each juvenile offender and, to the fullest extent possible, the family should be involved in developing the service implementation plan, and in adjusting that plan throughout the course of commitment. (4-11-15)

03. Service Implementation Plan Adjustments. The service implementation plan should be adjusted throughout placement with the concurrence of the juvenile services coordinator following communication with the

community treatment team. Specifically, the service implementation plan should be adjusted as new needs are identified, as goals are achieved, and as plans for reintegration are finalized. (4-11-15)

04. Department Assessments. Assessments provided by the department shall not be repeated by the provider at the time of admission into the program without specific justification provided to the regional clinical supervisor. (4-11-15)

05. Participation in the Progress Assessment/Reclassification. The provider may be asked by the juvenile services coordinator to provide input necessary for periodic reassessments of the juvenile offender's progress and current risk level. In all cases, the provider must participate to the fullest extent possible. (4-11-15)

06. Progress Notes. Monthly progress notes must be filed recording each juvenile offender's progress toward completing the service implementation plan and submitted to the juvenile services coordinator. (4-11-15)

07. Progress Report. A written progress report must be submitted to the juvenile services coordinator and any designees at least every two (2) months. The progress report should focus on areas of positive change in behavior and attitudes, as well as on the factors required for a successful program completion (progress in community protection, competency development, and accountability). Areas of need that were included in the service implementation plan and identified in Subsection 232.01 of these rules should also be referenced in the progress report. Each progress report should also note any changes or further development of the reintegration plan and should detail the level of involvement of the parent or guardian in treatment. (4-11-15)

08. Relapse Prevention Plan. Prior to completing the program, the provider shall supply the juvenile with the relapse prevention plan form provided by the department. The plan must address areas of risk identified in the juvenile's service implementation plan, as well as interventions the juvenile will use to prevent future problems. While in treatment the provider will solicit feedback from the juvenile services coordinator every thirty (30) calendar days regarding the development of the juvenile's relapse prevention plan. The final relapse prevention plan is due no earlier than the date of the juvenile offender's reintegration staffing. (4-11-15)

09. Final Progress Report. A final progress report must be submitted to the juvenile services coordinator and any designees no earlier than ten (10) calendar days prior to the juvenile offender's anticipated completion of the program, and no later than the date of release. This recommendation must include: (4-11-15)

- a. A current summary of the juvenile offender's progress; (4-11-15)
- b. A summary of the efforts to reach the juvenile offender's goals and objectives, including education; (4-11-15)
- c. Any unresolved goals or objectives; (4-11-15)
- d. Recommendation for continuing services, including education, in the home community; and (4-11-15)
- e. The current address of the juvenile. (4-11-15)

10. Report Distribution. Copies of the service implementation plan, progress reports, relapse prevention plan, and final progress report must be distributed by the provider to the juvenile offender and the juvenile services coordinator and any designees. The juvenile services coordinator will review and forward the progress report to the juvenile probation officer, appropriate court, and parent or guardian, unless the juvenile offender's family has been excluded from treatment by the juvenile services coordinator and the respective clinical supervisor for some well documented reason. (4-11-15)

233. INDIVIDUAL COMMUNITY PASSES.

Prior to granting any individual community pass to a juvenile offender, the provider must contact the juvenile probation officer and the juvenile services coordinator, to ensure that neither the court nor the department has placed restrictions on the juvenile offender's pass privileges. All requests for passes must be approved by the juvenile services coordinator. Any pass involving an overnight stay away from the facility, or involving special circumstances

such as a sexual victim in the home, requires a written plan detailing supervision and safety measures to be taken, an itinerary for the visit, transportation plan, and must be approved in writing five (5) business days in advance by the juvenile services coordinator. Each time a juvenile offender leaves on and returns from an individual community pass, the provider must notify the juvenile correctional center in Nampa of this movement, promptly at the time that the juvenile offender leaves and returns. (4-11-15)

01. Potential Risk to Public Safety. Individual passes for juvenile offenders assigned to residential facilities should be considered as an integral part of the service implementation plan. However, in all cases, the potential risk to public safety and adequacy of home supervision must be considered prior to allowing a juvenile offender to return home. It is also important that passes not interfere with the ongoing treatment and supervision needed by juvenile offenders. Providers must provide parents or guardians with clearly written guidelines for approved passes, which must be signed by parents or guardians indicating their understanding and willingness to comply with those guidelines. The department's pass form may be used for this purpose. If the department's form is not used, the form signed and agreed to by the individual assuming responsibility for supervision must contain at least the following information: (4-11-15)

- a. The juvenile offender's name and date of birth; (4-11-15)
- b. The name, address and telephone number of the individual assuming responsibility; (4-11-15)
- c. Authorized days, dates and times for the pass, including the specific date and time of departure and of return; (4-11-15)
- d. A complete listing of the anticipated locations and activities in which the juvenile offender is expected to be involved; (4-11-15)
- e. Specific plans for supervision and telephone checks to verify compliance with the pass conditions; (4-11-15)
- f. A complete listing of the activities required during the pass; (4-11-15)
- g. Specific stipulations prohibiting: (4-11-15)
 - i. The use of alcohol, tobacco, and drugs; (4-11-15)
 - ii. Involvement in any illegal activity, or association with others who may be or have been involved in illegal behavior; (4-11-15)
 - iii. Participation in sexual relations of any kind; (4-11-15)
 - iv. Possession of any kind of firearm or weapon; (4-11-15)
 - v. Any violation of the terms of probation; and (4-11-15)
- h. Specific stipulations about search and drug testing upon return, and the possible consequences for violation of any of the terms of the pass agreement. (4-11-15)

02. Eligibility. A juvenile offender must be in placement a minimum of thirty (30) calendar days to be eligible for any pass. Any exceptions due to extenuating circumstances must be approved by the juvenile services coordinator. (4-11-15)

03. Frequency. Frequency of passes must be consistent with the terms of the juvenile offender's service implementation plan and provider's contract with the department. (4-11-15)

04. Documentation. Documentation of the exact date and time of the juvenile offender's departure from the program for a pass, and return, must be maintained along with complete information about the individual assuming physical custody, transportation, and supervision during the pass. (4-11-15)

234. GROUP ACTIVITIES OFF FACILITY GROUNDS.

An activity plan and itinerary covering activities to be engaged in, when and where the group is going, how they will travel, how long they will stay, and why the activity is being planned must be submitted to the juvenile services coordinator at least five (5) business days prior to the activity. The activity plan must identify the specific risk elements associated with the activity and provide a safety plan for each of those risk elements. Routine, low risk activities within the local community adjacent to the facility do not require prior notice, and are to be conducted at the discretion of and under the responsibility of the provider. (4-11-15)

01. Recreational Activities. A pass authorizing the participation of juvenile offenders in outdoor recreational or work activities with an increased risk, such as overnight trips, must be signed by the juvenile services coordinator and juvenile probation officer prior to the activity. Any proposed activity that involves horseback riding, boating, rappelling, rock climbing, or higher risk activity must also have the prior approval, in writing, of the department's regional superintendent. (4-11-15)

02. Staff Requirements. (4-11-15)

a. A basic first aid kit will be taken with the group. At least one (1) person certified in first aid and CPR must accompany the group. (4-11-15)

b. Swimming, boating, or rafting will only be allowed when a staff in attendance has certification in rescue and water safety, or if a lifeguard is on duty. All juvenile offenders involved in boating or rafting activities must wear an approved personal flotation device. (4-11-15)

c. A staff to juvenile offender ratio of one to six (1:6) will be adhered to as a minimum unless there is a reason to require more staff. The risk level of the activity, as well as any physical disabilities, high client irresponsibility, mental deficiencies, or inclusion of groups of juvenile offenders under age twelve (12), are some reasons to consider additional staff. (4-11-15)

d. All participants will be recorded in the activity plan and identified as program clients, staff, or volunteers. The individual staff or volunteer satisfying the above first aid and CPR requirements must be identified in the plan. (4-11-15)

e. There will be no consumption of alcoholic beverages or illicit drugs by staff or juvenile offenders, interns, or volunteers while engaged in any agency-sponsored trip or activity. (4-11-15)

03. Consent Forms. Recreational activities identified as presenting a higher risk require prior written approval in accordance with Subsection 234.01 of these rules. Each juvenile offender must have prior written consent from a parent or guardian, if available, and the department's regional superintendent. Consent must include: (4-11-15)

a. Permission for the juvenile offender's participation; (4-11-15)

b. Acknowledgement of planned activities; and (4-11-15)

c. Permission for the provider to seek or administer necessary medical attention in an emergency. (4-11-15)

04. Activity Reports. At the conclusion of each overnight or high risk recreational activity pass, the provider must document in the juvenile offender's file and include in the progress report, any significant positive or negative events that transpired while the juvenile offender was on pass. Any unusual occurrences must be reported to the juvenile services coordinator and documented on an incident report as identified in IDAPA 05.02.01.241, "Rules for Residential Treatment Providers." A drug screening urinalysis may be conducted on each returning juvenile offender, at the expense of the provider, and the results of that exam reported to the juvenile services coordinator. (4-11-15)

235. OUT-OF-STATE TRAVEL.

When a residential treatment provider is planning an out-of-state trip for any of its juvenile offenders, the facility administrator must obtain prior written authorization from the regional clinical supervisor or designee. The necessary sequence of action and approval is as follows: (4-11-15)

- 01. Notification.** The residential treatment provider must notify the juvenile services coordinator in writing fourteen (14) business days in advance of the scheduled trip with the following: (4-11-15)
 - a.** Dates of the scheduled trip; (4-11-15)
 - b.** Location of the trip; (4-11-15)
 - c.** Purpose of the trip; (4-11-15)
 - d.** Transportation arrangements; (4-11-15)
 - e.** Where the juvenile offender will be staying if overnight accommodations are required (address and phone number); and (4-11-15)
 - f.** Who is going, such as juvenile offender, and name and position of staff. (4-11-15)
- 02. Prior Approval.** The program director must obtain all necessary approvals prior to authorizing travel. (4-11-15)
- 03. Interstate Compact for Juveniles.** Any out-of-state travel for more than twenty-four (24) hours requires a travel permit and compliance with the Interstate Compact for Juveniles. (4-11-15)

236. DRUG SCREENS OF JUVENILE OFFENDERS.

Drug screens may be done randomly or on an as needed basis, at the provider's expense, with the approval of the provider's program director. A record must be kept of all drug screens and results. A positive drug screen must immediately be reported to the juvenile services coordinator. (4-11-15)

237. PLANNING FOR RELEASE OR TRANSFER.

- 01. Aftercare Planning.** Programs must promote continuity in programming and services for juvenile offenders after they leave the program by assuring that essential information is forwarded to those agencies that will be providing services to the juvenile offenders, and working closely with department staff throughout placement to plan for reintegration. (4-11-15)
- 02. Approval.** Reintegration, by release from department custody or transfer, must not take place without the involvement of the department's assigned juvenile services coordinator, and the approval in writing of the regional clinical supervisor and regional superintendent. (4-11-15)
- 03. Department Concurrence.** Preparation for reintegration of a juvenile offender begins with the initial development of a service plan and is an ongoing process throughout the juvenile offender's program. Criteria for the juvenile offender's release from department custody or transfer must be explained to the juvenile as soon as possible after admission to a program. (4-11-15)
- 04. Reintegration Staffing.** The juvenile services coordinator shall convene a reintegration staffing, which will include the juvenile offender's probation officer, the provider, the juvenile offender's parent or guardian, an education representative, and the juvenile offender. At a minimum, a review of the plans to address any ongoing medical or mental health, substance abuse, social skills, education, vocation, independent living, and other special needs will be conducted. The juvenile offender's relapse prevention plan shall be reviewed by the juvenile probation officer, the juvenile's parent or guardian, the education representative and juvenile services coordinator. Based upon the results of that staffing and pending juvenile services coordinator approval of the relapse prevention plan, the department will make the final decision regarding transfer or release from department custody. (4-11-15)
- 05. Check-Out Procedures.** Prior to the release from department custody or transfer, the provider

must have completed a Provider Juvenile Check-Out Form supplied by the department. The form must be dated, signed by the juvenile offender, and forwarded to the juvenile services coordinator and any designees on the actual date that the juvenile offender leaves the program. (4-11-15)

a. The provider must provide the juvenile's Medicaid card, and a thirty (30) day supply of all medications or a thirty (30) day prescription signed by the physician to the individual or agency authorized to transport the juvenile offender. (4-11-15)

b. Within two (2) business days after a juvenile offender leaves the facility or program, the provider must send any available dental or medical records to the privacy officer at the juvenile correctional center in Nampa. (4-11-15)

c. Within two (2) business days after a juvenile offender leaves the facility or program, the provider must send a report showing the juvenile offender's total hours, credits, and associated grades directly to the juvenile correctional center in Nampa. The provider must maintain adequate documentation to support the submitted education reports. Timely receipt of these records is critical to assist the transition of the juvenile offender to another educational facility. (4-11-15)

06. Termination Prior to Completion. (4-11-15)

a. When a provider believes a juvenile offender is at risk for transfer prior to program completion, the juvenile services coordinator must be notified as far in advance as possible so that a staffing with the regional clinical supervisor and, if necessary, the department's regional superintendent, may be held. The purpose of this staffing is to consider the circumstances which may require the transfer, and to make every effort to address the concerns with the provider to avoid the necessity of making another placement. The provider must document these efforts at problem solving. The department will make a decision about transfer based upon the results of this staffing and any subsequent work agreed upon with the provider. The provider can request transfer of a juvenile offender in the following circumstances: (4-11-15)

i. A pattern of documented behavior clearly indicating a lack of progress; or (4-11-15)

ii. Commission of one (1) or more serious or violent incidents that jeopardize the safety and security of individuals or the program. (4-11-15)

b. In matters involving life, health, and safety of any juvenile in department custody, the department shall remove the juvenile offender immediately. (4-11-15)

c. A final progress report must include, at a minimum, a report on progress or lack of progress on all service implementation plan areas, and recommendations for follow-up. The report must be forwarded to the juvenile services coordinator within twenty-four (24) hours of release from department custody or transfer prior to program completion. (4-11-15)

238. -- 249. (RESERVED)

250. EDUCATION SERVICES.

01. Appropriate Services. The provider must ensure that each juvenile offender is given appropriate educational and vocational services that are consistent with the juvenile offender's abilities and needs, taking into consideration age, level of functioning, and any educational requirements specified by state or federal law. Providers must assure that educational services provided as a part of an overall program play an integral part in the process of reclaiming juvenile offenders to responsible roles in society. Educational services must strive to facilitate positive behavior change by helping juvenile offenders to develop abilities in academic, workplace, and technological areas; to restructure harmful or limiting cognitive patterns; and, to adopt appropriate social interactions skills. Educational services provided by providers must use whatever combination of approaches and motivations that will best facilitate the learning process in conjunction with the service implementation plan. All educational services provided must meet all mandates of the Elementary Secondary Education Act (ESEA), the Individuals with Disabilities Education Act (IDEA), the Family Educational Rights and Privacy Act (FERPA), and the Rehabilitation Act of 1973 (Section

504). (4-11-15)

02. Mandatory Enrollment. Providers must ensure that all juvenile offenders involved in their programs who are of mandatory school age in the applicable state, or who have not yet obtained a General Educational Development (GED) or high school diploma, are enrolled in a school system or in a program approved and certified by the applicable state's Department of Education to provide both special education and other services. For those who have obtained a GED or high school diploma, an appropriate educational and vocational service must be provided in accordance with the service implementation plan. (4-11-15)

03. Cooperative Relationships. Providers may provide educational services through a cooperative agreement with the local education agency or through an in-house educational program administered by the provider. If a local education agency provides the services, it is expected that the provider will have a written agreement with a local education agency that clearly defines the services that will be provided in the contract facility. The written agreement must include, at a minimum, all of the following: (4-11-15)

- a. Level of participation in reintegration planning for each juvenile offender; (4-11-15)
- b. That grades will be submitted, as required in Subsection 237.05 of these rules, within two (2) business days of transfer or release from department custody; (4-11-15)
- c. Curriculum for special education services, if appropriate; (4-11-15)
- d. A plan for the provision of state required testing; and (4-11-15)
- e. Types of services that will be provided beyond the established limits of the regular school year for that school district. (4-11-15)

04. Costs of Educational Services. If a local education agency agreement is developed, the Idaho Department of Education will flow education funds to the local education agency in a manner consistent with current legislative funding mandates. A copy of the memorandum of understanding between the provider and the local education agency must be provided to the department, and the source of funds to cover the costs for educational services clearly accounted for in the budget. If the provider elects to provide the services in-house, the cost of educational services will be included in the daily contract rate. The provider will not be eligible to receive educational funding through both of these sources. (4-11-15)

05. Accreditation Requirements. Each provider serving juvenile offenders, who have been committed to the department, will have, or contract with, an education program that will meet the accreditation standards of the Northwest Association of Schools or equivalent associating organization, or the applicable state's Department of Education. (4-11-15)

06. Educational Assessment. Federal and state laws mandate that juvenile offenders be provided with an appropriate education. Providers are responsible for providing an educational track which will best serve the needs of each juvenile offender, as determined by the assessment provided by the department through the observation and assessment process, or as determined by an assessment completed by a local school district. A copy of the relevant assessment and related current and valid education plan, as well as all supporting documentation for each juvenile offender, must be maintained in a separate file and must be available to the department and to the Idaho Department of Education. A copy of the IEP and all supporting documentation must be sent to the department's education records manager within ten (10) business days or less of its completion for inclusion in the juvenile offender's permanent school records that are maintained at the juvenile correctional center in Nampa. (4-11-15)

a. Providers are responsible for ongoing, yearly reassessment of each juvenile offender's progress within the education program as well as documenting and reporting that progress. This responsibility extends to completing a reassessment just prior to release from department custody or transfer, and reporting academic gain both for individual juvenile offenders as well as composite data for the education program overall. (4-11-15)

b. Consistent with statewide educational standards, providers are responsible for assuring that each juvenile offender is tested in accordance with the applicable state's assessment schedule and all required measures.

Any fees associated with the testing services will be the responsibility of the provider. Results of testing must be submitted to the department's education records manager at the juvenile corrections center in Nampa within ten (10) business days after the provider's receipt of the scores. (4-11-15)

07. GED Eligibility. Providers must assure that GED tests will be administered to juvenile offenders meeting the criteria established in the administrative rules of the applicable state's Board of Education for school districts. All GED testing application fees will be paid by the provider. Test results must be submitted to the department's education records manager at the juvenile correctional center in Nampa within ten (10) business days after the receipt of the scores. (4-11-15)

08. Special Education Services. (4-11-15)

a. The provider must ensure that the special educational needs of juvenile offenders are addressed. The provider's in-house program or cooperating local education agency program must comply with Section 504 and the IDEA, as well as any other applicable state or federal laws. Under no circumstances shall the provider or its teaching staff make modifications in the juvenile offender's Section 504 or the IDEA educational program without conducting a Child Study Team meeting in consultation with the department's educational coordinator or designee. (4-11-15)

b. Providers must make every reasonable effort and thoroughly document all efforts to contact parents or guardians of juvenile offenders identified as eligible for special education. If it is not possible to involve the natural parents or guardians, a surrogate parent must be appointed by the agency providing special educational services. This surrogate cannot be the director or other employee of an agency, institution, or community-based residential facility who is involved in providing care or education to a juvenile offender, or an employee of a state agency or agency volunteer, such as caseworker, social worker, or court-appointed special advocate who has been appointed by the state to provide for the welfare of the student. A surrogate parent is used only for special educational requirements and has no other legal authority. (4-11-15)

09. Standards for Instructional Time. Providers must assure that the school day is consistent with at least the minimum standard established for high schools by the Northwest Association of Schools. The length of the school day will further meet all requirements established by state and federal laws, regulations, and accreditation standards. Providers must provide an appropriate educational or vocational program for each juvenile offender for twelve (12) months of the year. At a minimum, this involves four (4) hours per day, five (5) days per week throughout the full calendar year. Juvenile offenders involved in any disciplinary process must not be denied their right to education and other related services. If security or other related concerns are present that may prohibit a juvenile offender's participation in educational programming, an education plan review will be completed and documented in an incident report. If the juvenile offender is eligible for services under the IDEA or Section 504, a Child Study Team will meet to make a determination as to whether or not the behavior is a result of the juvenile offender's handicap. All due process procedures will be followed according to the administrative rules for special education. (4-11-15)

10. Educational Records and Confidentiality. (4-11-15)

a. Educational records must be maintained by the provider at all times in accordance with FERPA. At a minimum, the following information must be included in the record: (4-11-15)

- i. Subjects taken; (4-11-15)
- ii. Grades by subject and explanation of the grading system; (4-11-15)
- iii. Units of credit with explanation; (4-11-15)
- iv. Attendance records; and (4-11-15)
- v. Any standardized test scores. (4-11-15)

b. Reports of the juvenile offender's educational progress (report cards) must be provided to the education records manager at the juvenile correctional center in Nampa within ten (10) business days after the end of

the school's grading periods (midterm, semester, trimester, etc.). (4-11-15)

c. Providers must ensure that juvenile offender educational files are consistently maintained to ensure compliance with FERPA. (4-11-15)

d. When a juvenile offender is released from department custody or transferred, the permanent education file must be updated by the department's education records technician. The providers will provide final withdrawal grades and credits within twenty-four (24) hours or next business day after the juvenile offender is released from department custody or transferred. The providers must send the education records manager at the juvenile correctional center in Nampa an e-mail advising that the final grades have been entered into the software program. Working educational files must be returned to the juvenile correctional center in Nampa within ten (10) business days of the juvenile offender's release from department custody or transfer. (4-11-15)

251. -- 259. (RESERVED)

260. PROVISION OF MEDICAL SERVICES.

01. Medical Care. Each juvenile offender must be provided with medical, dental, optical, mental health, emergency or any other related health services while in the provider's care. Each provider must have access, on a twenty-four (24) hour basis, to a licensed general hospital, clinic or physician, psychiatrist, and dentist to provide juvenile offenders with professional and qualified physical or mental health services, including medications. Medical and mental health screenings must be provided within two (2) hours of a juvenile offender's admission to a program. Comprehensive and professional medical and mental health assessments must be provided by the provider within thirty (30) calendar days of admission, unless these are provided by the department. A copy of these assessments must be forwarded to the department's regional R.N. (4-11-15)

02. Medical Consent. As part of the admission process, the provider must have a copy of the department's Release of Information and Consent form signed by a juvenile offender's parent, guardian, or committing authority. The consent form must be filed in the juvenile offender's medical and case files maintained by the provider. (4-11-15)

03. Emergency Medical Treatment. In cases of emergency medical treatment requiring signed authorization for juveniles in the custody of the department, reasonable efforts must be made to obtain the consent of the parent or guardian. The signature of only one (1) parent or guardian is sufficient to form consent or authorization. Should the parent or guardian not be available or refuses to sign, the authorization may be signed by the department's regional R.N. or designee. This does not restrict the provider from taking action in life and death situations. (4-11-15)

04. Reimbursement Sources. The provider must utilize private insurance or Medicaid, if available, for funding medical, dental, optical, mental health, or related services, and pharmaceutical products for any juvenile offender. The provider shall not seek reimbursement from private insurance or Medicaid for health services that are the fiscal responsibility of the provider pursuant to its contract with the department. Any health services not listed in these rules, other than emergency treatment, which was not approved in advance by the department's regional R.N. or designee, will be at the expense of the provider. (4-11-15)

261. ADMISSION AND ANNUAL HEALTH SERVICES AND TREATMENT RECORDS.

01. Compliance with Child Care Licensing Rules. Admission and annual health services must be provided to juvenile offenders in accordance with the child care licensing rules of the Idaho Department of Health and Welfare, unless otherwise provided in these rules. (4-11-15)

02. Prior Approval. No prior approval or review from the department's regional R.N. is required for admission and annual health services. Examples of admission and annual health services for which no prior approval or review is required are: (4-11-15)

- a.** Admission physical exams, including STD exams and treatment; (4-11-15)
- b.** Admission dental exams, including x-rays and cleanings (no panoramic x-rays or sealants);

- (4-11-15)
- c. Admission eye exams and glasses, if needed; (4-11-15)
- d. Annual physical exams, including STD exams and treatment; (4-11-15)
- e. Annual dental exams with x-rays and cleanings (no panoramic x-rays or sealants); and (4-11-15)
- f. Annual eye exams, if needed, and new glasses only if needed. (4-11-15)
- 03. Medical Records.** Any time a juvenile offender receives treatment under this section or for any similar service, the provider must retain the original medical record regarding treatment and must immediately send a copy to the department's regional R.N. (4-11-15)

262. PRIVACY OF MEDICAL RECORDS AND INFORMATION.

- 01. Confidentiality.** Confidentiality of personal health information of each juvenile offender must be maintained in accordance with the Privacy Regulations promulgated under HIPAA of 1996 or, if more stringent, the laws of the applicable state. Compliance with these regulations is the responsibility of the provider. Staff shall be provided information about a juvenile offender's medical condition only when that knowledge is necessary for the performance of their job duties. (4-11-15)
- 02. Privacy Officer.** The provider must appoint a privacy officer to oversee that the control and maintenance of all juvenile offender health and medical records is in compliance with the federal Privacy Regulations, 45 Code of Federal Regulations Sections 160 and 164. (4-11-15)
- 03. Separate Records.** All juvenile offender medical and health records must be kept in files that are physically separated from other juvenile offender files and information, and under a system of security against unauthorized access. (4-11-15)

263. NOTIFICATION OF CRITICAL HEALTH INCIDENTS.

The provider must immediately report critical medical and mental health incidents according IDAPA 05.02.01.241, "Rules for Residential Treatment Providers." (4-11-15)

264. INFECTIOUS DISEASES.

- 01. Policies.** (4-11-15)
 - a. The provider must establish policies and procedures for serving juvenile offenders with infectious diseases such as tuberculosis, hepatitis, and HIV or AIDS. These policies and procedures should address the management of infectious diseases, provide an orientation for new staff and juvenile offenders concerning the diseases, and ongoing education for staff and juvenile offenders regarding these diseases. Policies and procedures should be updated as new information becomes available. Individual health information or counseling will be made available by a medical health professional for juvenile offenders diagnosed with an infectious disease. (4-11-15)
 - b. The provider must comply with the child care licensing rules of the Idaho Department of Health and Welfare regarding universal precautions. (4-11-15)
- 02. HIV Testing.** In accordance with law, a juvenile offender over age fourteen (14) may request to be tested for the presence of HIV. Any such juvenile offender requesting to be tested should be taken to a public health facility or, if available, a facility which accepts Medicaid reimbursement for administration of the test. (4-11-15)
- 03. Examinations.** Examinations must be performed on any juvenile offender by medical professionals for all symptomatic cases of infectious diseases such as tuberculosis, ova and parasites, infectious hepatitis, and sexually transmitted diseases. Juvenile offenders will be tested and, if indicated, treated. (4-11-15)
- 04. Notifications.** The provider must notify the department's regional R.N. within three (3) business

days of any positive test results, treatment recommendations, and follow up care. (4-11-15)

265. PREGNANCY.

01. Individual Medical Plan. Within the individual medical plan, specific goals and objectives will be developed when a pregnancy has been diagnosed. The plan must be based on the orders of the juvenile offender's licensed healthcare provider and must include special care, location for delivery, regular medical check-ups, and special dietary and recreational needs. A copy of the individual medical plan will be sent to the department's regional R.N. (4-11-15)

02. Parenting Classes. Parenting classes must be an integral part of the individual medical plan for all pregnant female juvenile offenders. This service should also be offered as a priority to male juvenile offenders in department custody who are already fathers or whose spouse or girlfriend is expecting a child. (4-11-15)

03. Medicaid Reimbursement. Medical services relating to pregnancy must be provided by a licensed healthcare provider and facility accepting Medicaid reimbursement, unless medical expenses are paid by the juvenile offender's family. (4-11-15)

04. Infant Care. When an infant is delivered and the mother continues in department custody, the infant must be placed with an appropriate family member or in the temporary care of the Family and Children Services Division of the Idaho Department of Health and Welfare, subject to any necessary court approval. At no time shall the infant remain in the provider's facility. (4-11-15)

266. REFUSAL OF TREATMENT.

Refusal of medications or treatment recommended by a physician for three (3) days requires immediate notification to the department's regional R.N. according to IDAPA 05.02.01.241, "Rules for Residential Treatment Providers." (4-11-15)

01. Refusal of Recommended Treatment by Physician. If a juvenile offender chooses to refuse treatment or medication recommended by a physician, the juvenile offender must sign a detailed statement refusing this care. A provider staff member must witness the juvenile offender's signature. This refusal form will be filed in the juvenile offender's medical record. (4-11-15)

02. Where Refusal Poses Significant Risk. If a juvenile offender refuses a treatment or medication for a condition which poses a significant risk of death or permanent physical impairment, the provider must issue its approval for the immediate administration of the medical treatment or medication in accordance with standard practice. (4-11-15)

267. USE OF MEDICATIONS.

01. Written Policy. The provider must have written policies and procedures governing the use and administration of medication to juvenile offenders. Policies must conform to all applicable laws and regulations including, but not limited to, those of the Idaho Department of Health and Welfare or the applicable state's licensing authority. (4-11-15)

02. Notification. If initiating or modifying any medication, the department's regional R.N. must be notified. Notification must include the following: (4-11-15)

a. The name of the prescribed medication; (4-11-15)

and b. The name and phone number of the prescribing doctor, nurse practitioner, or physician's assistant; (4-11-15)

c. The reason the medication is being prescribed. (4-11-15)

268. FIRST AID KITS.

Each provider must maintain first aid kits. Basic first aid kits that do not include medications or sharp tools may be

kept unlocked. Any complete first aid kit with medications, wound rinses, scissors, tweezers, or other such objects must be kept locked and placed in areas of the program or facility readily accessible to staff. (4-11-15)

269. -- 999. (RESERVED)

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