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**IDAPA 05
TITLE 02
CHAPTER 04**

05.02.04 – RULES FOR SUPPORTED LIVING 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 05.02.04, “Rules for Supported Living Providers,” IDAPA 05, Title 02, Chapter 04. (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 supported living that coordinate needed 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 providers. (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 number 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)

008. -- 009. (RESERVED)

010. DEFINITIONS.

01. 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)

02. General Education Student. A student who does not qualify for special education services under the Individuals with Disabilities Education Act (IDEA). (4-11-15)

03. Health Services. Including, but not limited to, routine and emergency medical, dental, optical, obstetrics, mental health, or other related health service. (4-11-15)

04. Independent Living Services. Services that increase a juvenile offender's ability to achieve independence in the community. (4-11-15)

05. 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 alone or 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)

06. 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)

07. 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)

08. 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)

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 20-549, Idaho Code). (4-11-15)

101. WAIVER OR VARIANCE.

Minimum program standards established herein shall apply to all services provided by the provider. Any waiver or 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 supported living that coordinate needed treatment services identified in individual service implementation plans. Supported living providers must also abide by IDAPA 05.02.01, "Rules for Residential Treatment Providers." (4-11-15)

103. -- 199. (RESERVED)

200. AUTHORITY TO INSPECT.

01. Inspections. 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 residence 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)

02. Site Visit. A juvenile services coordinator or designee shall conduct a site visit of the residence prior to occupancy by the juvenile offender. (4-11-15)

201. CLOTHING AND PERSONAL ITEMS.

The supported living provider must ensure that the juvenile offender has sufficient clothing. The provider shall not require the juvenile offender to purchase clothing with the juvenile's personal funds unless the purchase is above and beyond the basic requirements of the provider. Any clothing purchased with the juvenile offender's personal funds must be documented. The provider will ensure the juvenile is provided proper care and cleaning of clothing in the juvenile offender's possession. All clothing and incidentals become the property of the juvenile offender upon release. (4-11-15)

202. FOOD SERVICE.

The supported living provider must ensure that the juvenile has sufficient food at all times. The provider shall not require the juvenile offender to purchase food with the juvenile's personal funds unless the purchase is above and beyond the basic requirements of the provider. Shopping, meal preparation, planning and proper nutrition must be part of the independent living skills. (4-11-15)

203. 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. (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 residence. (4-11-15)

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

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

204. EMPLOYMENT OF JUVENILE OFFENDERS.

01. Employment. If juvenile offender 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. The supported living provider 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 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 twice least monthly to ensure the juvenile offender is working under acceptable conditions, and must document these checks in the juvenile offender's monthly 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. Providers must make every reasonable effort to assure that each juvenile offender's transportation to and from a job-site is safe. (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 205.04 of these rules. (4-11-15)

205. PERSONAL FUNDS.

01. Funds Handled by a Provider. The provider will follow generally accepted accounting practices in managing personal funds of juvenile offenders and must be able to demonstrate appropriate measures of internal fiscal controls related to the juvenile's personal funds. (4-11-15)

a. The provider shall be required to deposit all personal funds collected for the juvenile offender in a public banking institution in an account in the juvenile's name. The provider must maintain a reconciled ledger showing each juvenile offender's deposits and withdrawals within the juvenile's account and copies of current bank statements. (4-11-15)

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

c. 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)

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

e. There can be no commingling of juvenile personal funds with provider funds. Borrowing or moving funds between juvenile personal accounts is prohibited. (4-11-15)

02. Personal Funds Reporting Requirements. A personal funds report must be submitted monthly 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 supported living provider within five (5) business days of completion of the review. (4-11-15)

03. Juvenile Offenders with Earned Income. (4-11-15)

a. The supported living provider is responsible for maintaining and accounting for any money earned by a juvenile offender. The provider must establish a written budget for a juvenile, as part of the service implementation plan, for the juvenile offender's use of these funds. There must be a plan for the priority use of the juvenile offender's earned income to pay court ordered restitution and a specific allocation for daily incidental expenses. (4-11-15)

b. The provider must ensure that the juvenile offender save at least thirty percent (30%) of income to be deposited into the juvenile's personal funds account. The budget must specify the purpose for which the funds saved will be used for any unplanned expenses. (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)

206. COMMUNITY SERVICE AND RESTITUTION.

01. Community Service. Juvenile offenders may have court-ordered community service hours. The supported living provider must obtain prior approval from the juvenile probation officer to complete any court-ordered community service hours while at the supported living 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 must be provided to the juvenile services coordinator. (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 supported living 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)

207. JUVENILE OFFENDER MAIL.

01. Restrictions. Juvenile offenders must 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. (4-11-15)

02. 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)

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

04. Packages. Packages may be inspected for contraband but only in the presence of the juvenile offender. (4-11-15)

05. Publications. Books, magazines, newspapers and printed matter which may be legally sent to juvenile offenders through the postal system may be approved by the supported living provider, unless deemed to constitute a threat to the security of the residence. (4-11-15)

06. 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 unless the juvenile is living independently. (4-11-15)

208. VISITATION

01. Visitation Policy. The provider must develop a written policy governing visitation which protects the safety of visitors, staff, and juvenile offenders. This policy may restrict visitation to the residence of visitors below an established age or provide for higher levels of supervision in circumstances where safety of visitors, staff, and juvenile offenders may be at risk. The provider must provide a copy of the visitation policy to each juvenile offender, his parent or guardian, and the juvenile services coordinator. In all cases, the provider will work with the juvenile services coordinator and juvenile probation officer to identify and approve potential visitors in accordance

with the provider's criteria. (4-11-15)

02. Visitor Admission. 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. Visitors who bring in items that are unauthorized, but not illegal, must either be denied admission into the program or residence or 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 program or residence. All visitors denied access to the program or residence, and the reason for their denial, must be documented. (4-11-15)

209. -- 219. (RESERVED)

220. SEARCHES FOR CONTRABAND.

01. Searches of Personal Items. Routine searches of personal items being introduced into the residence may be conducted by staff prior to the juvenile offender taking possession of his property, or when the juvenile offender is returning to the residence from an individual community pass. Search of a juvenile offender's belongings or residence 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. 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 will be notified and it must 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)

04. Contraband Disposal. All contraband found in the possession of juvenile offenders 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. -- 229. (RESERVED)

230. PROGRAMMING.

01. Basic Program Requirements. Supported living 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 or coordinate 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 must be able to demonstrate that the program services offered address the needs of the population served by the supported living provider. (4-11-15)

c. Programs providing supported living services for individual juvenile offenders must target behaviors, needs, or circumstances stated in their final progress report from the sending facility or program. These services must be clearly identified and described within the program description. (4-11-15)

- d.** 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. Supported living 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)
- e.** 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 offender's 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 offender's 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.** Participate fully with the department and the community treatment team in developing and implementing service plans for juvenile offenders they serve; (4-11-15)
 - vii.** Work with the department to provide juvenile offenders with educational and vocational services based upon their documented needs and abilities; and (4-11-15)
- f.** Reintegration services include all aspects of case planning and service delivery designed to facilitate successful return of the juvenile offender to the community. (4-11-15)

231. GUIDELINES FOR SPECIFIC SERVICES.

01. Behavior Assessment. A current assessment of independent behavior capacity must be used to determine the levels of service needed. (4-11-15)

02. Counseling and Other Outpatient Services. The supported living provider must schedule all initial outpatient appointments, such as drug and alcohol counseling, for the juvenile offender within five (5) business days of arrival into the program. The provider 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)

03. Life Skills and Independent Living. Programs must be able to demonstrate that juvenile offenders are taught basic life skills consistent with their age and needs. This 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, such as identifying medical and mental health providers; (4-11-15)

- g.** Handling personal finances, and issues such as leases, contracts, cell phone usage and agreements, insurance, banking and credit management with some support and intervention; (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; (4-11-15)
- m.** Wears clothing appropriate for the weather and activity; (4-11-15)
- n.** Obtains and produces identification, as needed; and (4-11-15)
- o.** Travels to and from necessary destinations. (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 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 ten (10) business 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 most recent progress report and reintegration plan from the sending facility or program. The service implementation plan must address the needs and areas in the reintegration plan. (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. 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)

05. Progress Notes. Bi-weekly 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)

06. Progress Report. A written progress report must be submitted to the juvenile services coordinator and any designees at least every month, and must include current bank statements and reconciled monthly budget. The progress report should focus on areas of positive change in behavior and attitudes, as well as on the factors required for a successful release from department custody. 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)

07. Relapse Prevention Plan. The supported living provider shall receive a working copy of the juvenile offender's relapse prevention plan from the department. The provider must work with the juvenile to continue developing the relapse prevention plan form provided as the juvenile experiences increased exposure to the community. The supported living provider must send the relapse prevention plan to the juvenile services coordinator and any designees prior to the juvenile offender's release from department custody. (4-11-15)

08. 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)

09. 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. OVERNIGHT COMMUNITY PASSES.

Any pass involving an overnight stay away from the residence, 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 overnight 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 at the time he returns. (4-11-15)

01. Potential Risk to Public Safety. If the pass is to the home of a parent or guardian, 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 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. Frequency. Documentation of the exact date and time of the juvenile offender's departure from the residence for a pass, and his return, must be maintained along with complete information about the individual assuming physical custody, transportation, and supervision during the pass. (4-11-15)

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

234. ACTIVITIES

01. Recreational Activities. A pass authorizing the participation of juvenile offenders in outdoor recreational or work activities with an increased risk or overnight trips must be signed by the juvenile services coordinator and juvenile probation officer prior to the activity. Any proposed activity that involves 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 for Group Activities. (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. 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)

d. There will be no consumption of alcoholic beverages or illicit drugs by juvenile offenders, staff, volunteers, or interns. (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 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 supported living 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 provider 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 supported living 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. Application for Developmental Disability Services. The supported living provider shall be responsible for compiling and submitting the necessary documentation that will determine if the juvenile offender is eligible for developmental disability services. The provider must begin this process upon the juvenile's admission into the program. (4-11-15)

02. 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 if applicable, and the juvenile offender. At a minimum, the reintegration staffing must consider and, to the extent possible, solidify plans to address any ongoing medical or mental health, substance abuse, social skills, education, vocation, independent living, and other special needs. Based upon the results of that staffing, the department will make the final decision regarding transfer or release from department custody. (4-11-15)

03. 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 is released from department custody. (4-11-15)

a. If transferring, the provider must provide the juvenile offender's Medicaid card and all medications to the individual or agency authorized to transport the juvenile offender. (4-11-15)

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

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

a. When a provider believes a juvenile offender is at risk for transfer prior to release from department custody, 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. (4-11-15)

b. If it is determined that the juvenile offender is not eligible for developmental disability services, the supported living provider must notify the juvenile services coordinator as soon as possible. (4-11-15)

c. 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)

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

e. 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 transfer. (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)

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. The provider must coordinate services and assist juvenile offender in interpreting and complying with any follow up care as requested by healthcare provider. Any time a juvenile offender receives treatment under this section or for any health related service, a copy of any medical or dental assessments, treatments, test results, and follow up care 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 over eighteen (18) years of age. The consent form must be filed in the juvenile offender's case file 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, 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 HEALTH SERVICES AND TREATMENT RECORDS.

01. Prior Approval. Prior approval or review from the department's regional R.N. is required for all health services, other than emergency services. Prior approval may be given for up to five (5) routine, pre-scheduled medical appointments. (4-11-15)

02. Medical Records. The provider must assist the juvenile offender in organizing medical information, instructions, prescriptions and any necessary follow up papers in a designated medical folder. Any time a juvenile offender receives treatment under this section or for any health related service, the provider must retain the original medical record and must immediately send a copy to the department's regional R.N. (4-11-15)

03. Medical Billing. The direct care provider must submit medical bills directly to the department's regional R.N. that approved the provision of services. (4-11-15)

262. PRIVACY OF MEDICAL RECORDS AND INFORMATION.

To the extent the provider has medical information, 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)

01. 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)

02. 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 to IDAPA 05.02.01.241, "Rules for Residential Treatment Providers." (4-11-15)

264. INFECTIOUS DISEASES.

01. Policies. 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)

02. HIV Testing. In accordance with law, a juvenile offender over age fourteen (14) may request that he 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 communicable 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. This refusal form must be sent from the direct care service provider to the regional R.N. (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.

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. (4-11-15)

01. Medication Management Upon Arrival. If the juvenile offender is taking medication, the supported living provider must schedule an initial medication management appointment for the juvenile offender within five (5) business days of arrival into the program. (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)
- b. The name and phone number of the prescribing doctor, nurse practitioner, or physician's assistant; and (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 residence readily accessible to staff. (4-11-15)

269. -- 999. (RESERVED)

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