



Probation Service Definition

ADMINISTRATIVE OFFICE OF THE COURTS & PROBATION

SERVICE NAME	Specialized Restorative Residential Program (Restore Programs- Restoring Individuals, Families and Communities) <input type="checkbox"/> Adult <input checked="" type="checkbox"/> Juvenile
Category	Out-of-Home (OHP) placement/Non-treatment/High Risk Behavior Management
Setting	Residential
Facility License	Residential Child-Caring Agency
Service Description	<p>Specialized Restorative Residential Program (RESTORE) is a licensed, temporary, non-treatment facility providing 24-hour highly skilled supervision, intensified structure, and evidence informed interventions for high risk/high needs juvenile justice youth with well-established patterns of risky behavior and serious behavioral and/or emotional challenges in an age-appropriate, individualized, and structured group setting.</p> <p>Highly skilled staff partner with therapeutic supports to provide an elevated staff-to-client ratio and single occupancy rooms for youth requiring intensive interventions to improve decision making, coping skills, social skills, family relationships and/or address any underlying problems impacting the youth’s success when all other less restrictive or intensive options have been exhausted. Youth referred to this service will have well-documented patterns of behavior and multiple prior attempts at interventions without sustained improvement and meet multiple of the following inclusionary criteria:</p> <ul style="list-style-type: none"> • Complex trauma impacting their behavior and/or engagement in rehabilitation efforts. • Attempted to harm themselves. • Engaged in a pattern of aggressive and/or assaultive behavior. • Chronic, violent and/or serious offenses in juvenile or adult criminal court. • Gang involvement. • Diagnosed with Conduct Disorder, Disruptive Mood Dysregulation Disorder, Intermittent Explosive Disorder, Oppositional Defiant Disorder, or other similar diagnosis. • Other unmanaged mental health symptoms not requiring psychiatric hospitalization. • Substantial functional limitations that require individualized support. (May include challenges to complete daily self-care, regulate emotions, build/maintain relationships, access education, and/or remain safe in the community without institutional supports.) • Extensive history of failed placements and denied by all other less intensive residential providers.

	<p>But does not include youth who:</p> <ul style="list-style-type: none"> • Require psychiatric hospitalization. • Present with conditions or display extreme cognitive limitations such as developmental or intellectual disability, autism spectrum, severe or persistent mental health issues, brain injury, stroke, or dementias. • Could be safely and effectively managed utilizing outpatient, in-home services, and/or supports in their own home or in another family home setting. <p>Specialized Restorative Residential Program (RESTORE) applies an integrated, multi-disciplinary approach to care that is rooted in adolescent development principles and restorative practices to improve investment in significant relationships. Staff are intensively trained in evidence-based and evidence-informed models, as well as utilize trust-building activities and trauma-informed approaches to ensure youth with extreme behavioral needs make progress towards rehabilitation.</p> <p>Youth at this level of care require consistent behavior management, supervision, and support in a residential setting that provides 24/7 access to staff who provide opportunities to model, teach and coach relevant skills. Additionally, staff engage youth and families in restorative relationships, interactions, and experiences designed to support youth development, healing, and growth. Staff provide a safe and nurturing environment to help youth facilitate change in their behavior, attitudes, and personal interactions.</p>
<p>Service Expectations</p>	<ul style="list-style-type: none"> • Individualized care plans are developed in collaboration with the youth, parent/guardian, probation/problem solving court officer, and other stakeholders identified based on service referral information (criminogenic risk, needs and responsivity), relevant collateral documentation/assessments, and with input from the youth and family. • The initial individualized care plan will be developed within 72 hours of placement and should be updated at least monthly, with the youth and family team throughout the duration of placement. • Individualized care plans will be developed with the youth and parent/guardian to: <ul style="list-style-type: none"> • Enhance and develop protective factors by engaging youth in intensive, trauma informed engagement which target the specialized risks and needs of extremely high-risk youth.

	<ul style="list-style-type: none"> • Provide opportunities to learn/do and attach/belong in developmentally appropriate ways. • Promote an individualized understanding of each youth’s history, family structure, developmental needs, and motivation to reinforce the utilization of pro-social strategies and community integration. • Utilize evidence informed models to implement programming which promote positive youth development by reducing incentives supporting negative behavior/crime and increasing incentives for pro-social behavior. • Engage and model for the youth, family, and other pro-social supports how to have healthy relationships and build new pro-social support networks. • Provide active transition and aftercare supports with decreasing intensity as needed to maximize generalization of skills for long-term success. Funding for home-based services will be provided separately and is not included in the residential rate but required as a part of the comprehensive, integrated treatment plan. • The individualized care plan will ensure 24-hour crisis intervention is available to aid in the stabilization of crisis situations. • The written individualized care plan shall include approval by the probation/problem solving court officer and/or court to allow youth community access to participate in education, treatment, and planned supervised outings, home visits, etc. • The individualized care plan will be overseen by a well-integrated outpatient treatment provider who is involved in assessment, implementation, and transition/aftercare support to maximize collaboration of the youth’s formal and informal support systems. • The individualized care plan shall use an integrated approach that empowers families, collaborates with community supports, and engages youth in designing their future. • Based on the individualized care plan goals, youth shall be involved in structured programming to include an evidence-based behavior management plan, community support planning, family engagement, teaching/educational interventions, and strategies that aid in individual skill development. Youth shall be provided opportunities for supported practice across settings including at home, in school, and the community. • Provide a structured living environment to include research informed youth developmental principles (physical, psychological, emotional), community engagement/ support, and family engagement.
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	<ul style="list-style-type: none"> • Residential staff will provide 7 hours per week of skill-based psychoeducational groups under the direction of the integrated outpatient treatment provider to support progress on the individualized care plan goals of the youth. • In addition, Specialized Restorative Residential Program (RESTORE) will provide access to a well-integrated continuum of outpatient services to include psychiatry; psychology; and individual, group, and family therapy for mental health and substance use disorders. <ul style="list-style-type: none"> • Programs will have an established relationship with or an internal capacity to provide consistent clinical oversight and outpatient services for the individuals needing treatment services. • Clinical oversight is included in the rate and will focus on the development of Individual Care Plans ensuring multidisciplinary collaboration between the residential program’s behavioral and psychoeducational groups and the Outpatient Treatment services. • Outpatient services will include up to 13 hours a week of direct mental health and substance use services from licensed mental health professionals as a part of the youth’s individualized care plan. Funding for outpatient services is not included in the residential rate. • The identified team members (parent, guardian, caregiver, and probation/problem solving court officer, formal and informal supports) will participate in at minimum monthly family engagement meetings, with the majority occurring in person. These meetings will provide necessary information on the youth’s behavior and progress in the placement, as well as assist the family in preparing for the youth’s return home. • Specialized Restorative Residential Program (RESTORE) will document the progress toward the individualized care plan in their reports. Probation/ problem solving court officer will verify with staff to determine if progress is being made. If progress is not indicated, Specialized Restorative Residential Program (RESTORE) shall provide a rationale as to what changes will be made to initiate a plan to increase progress. • Family engagement shall: <ul style="list-style-type: none"> • Be well integrated into the program from admission to transition. • Allow for frequent family visits to the facility, family therapy, and social activities. • Provide the opportunity for youth and their families to repair relationships. • Provide opportunities for parents to access a variety of support and training. • Shall include regular phone contact and visitation with family members as authorized by probation/problem solving court officer and/or the court.
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	<ul style="list-style-type: none"> • Reasonable flexibility will be provided to meet the non-traditional hours needed by families. • Phone contact and visits shall not be tied to behavior management and shall not be removed as a consequence. • Home visits will be planned with the family and supported by the residential staff to provide opportunities to practice the skills learned in the program in the community or home setting. Home visits should be planned with the youth, agency, and probation/problem solving court officer and shall be utilized to enhance family functioning and in the achievement of service goals. Home visits shall be in the family home and the visits shall not be removed as a consequence of behavior. • If a youth is gone without permission and does not return or cannot be located within 2 hours, the provider/agency will contact the parent/guardian and assigned Probation/problem Solving Court Officer or if occurring after hours, the on-call/after-hours contact identified for that youth. The agency will continue to make efforts to locate and engage with the youth, parent, and probation until the youth is located or otherwise discharged. Such efforts should be clearly documented and included in the documentation to probation including the dates/hours the youth's whereabouts were unknown and the efforts made to locate them. • Provide transportation as necessary to and from dental and medical appointments, school, court, therapy, home visits, and routine day-to-day activities. Transportation costs within a 25-mile radius will be the responsibility of the provider. • The agency will collaborate and proactively plan with the probation/problem solving court officer for the discharge of youth from service, this plan will begin upon placement. During this process, a trauma-informed approach will be utilized to prepare the youth for the transition to ensure the most appropriate post-discharge placement is available for the youth prior to discharge. Criteria for discharge will be individualized, determined by the team, and approved by the court. The court must approve all discharges and placement changes. • If the agency is seeking an unsuccessful discharge, the provider shall give the probation/problem solving court officer a fourteen (14) calendar day notice in writing. Youth must be returned to the court ordering placement for further hearing prior to any change in placement. During the fourteen (14) day period the agency shall: <ul style="list-style-type: none"> • Use a trauma-informed approach to prepare the youth for discharge.
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	<ul style="list-style-type: none"> Participate in a family engagement meeting within 3 business days of the written notice to support the expedited development of the youth's individualized transition plan (ITP) to be prepared for the Court. This plan should include educational, clinical, living, environmental or other interventions that are needed to support the youth's future success. Work collaboratively with probation to identify the most appropriate transition or post discharge placement for the youth. Probation/Problem Solving Court Staff may make an immediate change in placement without court approval only if the juvenile is in a harmful or dangerous situation (e.g. natural disaster). Probation Officers will work collaboratively with facility staff to determine if an immediate change in placement is necessary. The team will execute a plan for the youth's immediate placement while considering educational, environmental, and emotional needs.
Service Frequency	24 hours/day, 7 days/week
Length of Service	Up to 6 months
Staffing	The provider will comply with all staffing requirements of the Department of Health and Human Services Division of Public Health. All staff that have direct contact with youth and will have ongoing training in evidence-based youth development principles, trauma informed care, best practice in juvenile justice, specialized evidence-based and evidence-informed models and criminogenic risk and needs.
Staff to Client Ratio	Staffing ratios above minimum licensing requirements outlined by DHHS-Division of Public Health are required for this service and must be at least 1:4 during waking hours and 1:8 during sleeping hours.
Hours of Operation	24-hour, awake overnight staff
Service Desired Outcomes	<ul style="list-style-type: none"> Youth will have stabilization referral behavior and improved relationships with family, community, and pro-social supports. Youth will maintain placement in the least restrictive environment. Youth will demonstrate positive skills across various settings in communication, social skills, coping/anger management, family functioning, and these skills will be based on the probation/problem solving court officer's referral.
Unit and Rate	See rate sheet