I. POLICY:

The Department of Juvenile Justice shall develop policies and procedures that guide the Department’s employees in their fulfillment of the mission statement.

II. DEFINITIONS:

Certification: Renewal of a policy for another year without going through the entire policy process as no revisions are necessary.

Directive: Modifies an existing policy to provide interim guidance until that policy is revised.

Director: For the purposes of this policy, the staff member responsible for the overall operation of a Regional Youth Detention Center (RYDC), Youth Development Campus (YDC), Community Service Office (CSO), or other DJJ owned, operated, or contracted facility.

Local Operating Procedures: A statement of the actions or methods to be taken by the facility/program/office to implement the Department’s policy.

Local Policy Coordinator: The designated employee(s) of a facility/program/office responsible for maintenance of a current electronic or paper policy manual, policy training, and policy compliance.

Policy: A statement of the Department’s guiding principle designed to direct employees in their fulfillment of the mission of the Department.

Policy Coordinator: The employee within the Office of Legal Services responsible for the coordination of Department policy development, review, and revision.
Policy Owner: The staff member selected by a division head to be the designated authority for policy review and development.

Policy Review Committee: A diverse team of subject matter experts nominated by division heads and appointed by the Commissioner on an annual basis to act as the first formal level of policy review.

III. PROCEDURES:

A. The Commissioner, with guidance and oversight from the Board of Juvenile Justice, will establish the general policies of the Department.

B. All DJJ policies will be reviewed yearly and will be updated sooner if needed.

C. Department policies will be developed using nationally recognized correctional standards, applicable federal and state laws and regulations, research on best practices, subject matter experts, and existing Department policy and directives. As updated information becomes available (e.g. new/revised laws and standards, new research, etc.), Department policies will be revised.

D. Department policies will be interpreted within the plain meaning of the language. The Office of Legal Services, in consultation with the respective division, will be available to provide assistance when questions regarding explanation of policy arise. Any conflict or lack of clarity in policy will be resolved by the Commissioner or designee.

E. Department policies will remain in effect, regardless of the scheduled review date or authorizing official, until the Commissioner issues notice to replace or delete the policy in the manual.

F. The Policy Coordinator, in collaboration with Policy Owners, will lead policy sub-committee workgroups and the Policy Review Committee in the review, development, and revision of Department policies with oversight by the General Counsel.

G. The Policy Coordinator will forward the final draft of each policy to the Commissioner for review. Following the Commissioner’s approval, Department policies will be disseminated electronically via PowerDMS.

1. If during a policy’s review the Policy Owner and sub-committee workgroup determine no revision is necessary, the policy will be proposed for certification to the Policy Review Committee and Executive Team, and upon their agreement, will be certified for one year.

H. Any policy may be modified by the Policy Coordinator or General Counsel at any time without going through the review process to correct a scrivener’s error, if the change does not substantively change the policy.
I. Each Deputy Commissioner, Assistant Deputy Commissioner, Chief Financial Officer, Associate School Superintendent, or Department Director will designate a policy owner to be in charge of the development and review process for their respective division/department policies.

1. The policy owner is responsible for:
   a) Reviewing assigned policies with the relevant policy sub-committee workgroup to include facility representation, vendors, volunteers, etc., as applicable;
   b) Scheduling a meeting with relevant individuals to review the policies and develop recommendations;
   c) Maintaining an attendance sheet for every sub-committee meeting where policies are being revised; and
   d) Coordinating with the Office of Legal Services to ensure that assigned policies are compliant with Federal and State laws and National Standards and Guidelines to include but not be limited to the:
      i. American Correctional Association;
      ii. National Commission on Correctional Healthcare; and
      iii. Correctional Education Association.

2. The policy owner will ensure that all proposed modifications to policy are entered into the policy draft on PowerDMS and all members of the policy sub-committee workgroup have approved the draft.

J. Each facility/office/program Director will designate a Local Policy Coordinator for the facility/office/program.

1. The Local Policy Coordinator is responsible for:
   a) Ensuring a current policy manual that contains all current facility/office/program local operating procedures is present in designated locations;
   b) Ensuring local operating procedures are current at all times;
   c) Ensuring that staff have signed statements indicating understanding of local operating procedures;
   d) Coordinating staff training regarding policy, including the provision of necessary training and documentation of the training provided; and
e) Coordinating compliance efforts as directed by the facility/program/office Director.

K. Local Operating Procedures:

1. Each facility/office/program Director will ensure that local operating procedures (Attachment A) are developed for new and revised policies, as applicable, within 30 days of the policy’s effective date.

2. Facility/program/office staff will be given the opportunity to provide input and feedback in the development of local operating procedures.

3. Local operating procedures will be reviewed at least annually and updated as needed. The date of the review will become the new “effective date” for the local operating procedure. The “scheduled review date” will be one year from the new effective date.

4. Local operating procedures will be reviewed within 90 days of a change by the facility/program/office Director.

5. The facility/program/office Director will sign all local operating procedures.

6. Local operating procedures will never instruct staff to disregard a Department policy or give instructions that are in conflict with the official policy.

7. When a local operating procedure requires approval and signature beyond the Director (e.g., medical, behavioral, health, etc.), the local operating procedure may not become effective until all approvals and signatures are obtained.

8. The Assistant Commissioner with oversight of the secure facilities shall ensure that all Local Operating Procedures are up to date and remain current.

L. Access to Policies:

1. At all times, employees, volunteers, and vendors will have access to a current DJJ policy manual (electronic or hard copy) and to the local operating procedures for the facility/program/office.

2. In secure facilities, the designated health authority will maintain a manual of all healthcare-related policies and procedures.

3. Upon Commissioner’s approval, all new or revised policies will be disseminated to staff, designated volunteers, and, when appropriate, to youth.

4. All departmental policies and procedures will be accessible to the public.
M. The facility/program/office Director will ensure that staff is familiar with the contents of the policy manual and that they receive any training needed to implement the policies and local operating procedures within 30 days of the policy’s effective date.

N. Volunteer coordinators will ensure volunteers are familiar with policies and procedures.

O. Compliance:

1. The facility/program/office Director will enforce policy on the local level by monitoring local procedures, processes, and employee performance to ensure that Department policy is being followed.

2. The facility/program/office Director or designee will ensure that staff adheres with policy review provisions laid out through this policy. Upon review of each policy, staff will sign the acknowledgement in PowerDMS. The facility/program/office Director will review staff reports in PowerDMS to ensure that staff have read and acknowledged all policies.

3. The Policy Coordinator may provide technical assistance as requested.

P. The Department will utilize a formal system of directives to ensure that staff members are aware of current directives. Directives will be coordinated among work units and with Department policies.

1. The DJJ Policy Coordinator will assign a number to each new directive, coordinate the dissemination of directives, and ensure that directives are incorporated into applicable policies.

2. Each facility/program/office Director will ensure that affected staff, youth, contractors, and visitors/volunteers receive notice of the directive and that issued directives are placed in the policy manual as instructed.

Q. All staff will have an opportunity to provide input and feedback on policy through the chain of command.

IV. LOCAL OPERATING PROCEDURES REQUIRED: NO