

GEORGIA DEPARTMENT OF JUVENILE JUSTICE	Transmittal # 16-14	Policy # 18.23
Applicability: <input type="checkbox"/> All DJJ Staff <input type="checkbox"/> Administration <input type="checkbox"/> Community Services <input checked="" type="checkbox"/> Secure Facilities (YDCs Only)	Related Standards & References: ACA Standards: 3-JDF-5B-01, 4-JCF-5C-02, 03, 06, 4-JCF-4D-05 DJJ 3.54, 14.10, 15.5, 17.20, 17.23, 17.5, 18.1, 20.36, 25.1	
Chapter 18: PROGRAMS AND SERVICES	Effective Date: 9/27/16 Scheduled Review Date: 9/27/17	
Subject: SEXUALLY HARMFUL BEHAVIORS INTERVENTION PROGRAM	Replaces: 4/18/15 Division of Support Services	
Attachments: A. Sexually Harmful Behavior Treatment Parent Letter	APPROVED:  <hr/> Avery D. Niles, Commissioner	

I. POLICY:

The Department of Juvenile Justice will ensure that all youth that require treatment for sexually harmful behaviors will be provided individualized services directed towards their assessed risks and needs.

II. DEFINITIONS:

Certified Community Sex Offender Supervision Specialist (CCSOSS): A departmental community services staff that has completed the DJJ sponsored Sex Offender Supervision certification program and all its requirements and provides services and supervision described in the attached CCSOSS Scope of Services (see DJJ 20.36, Supervision of Sexually Abusive Youth in the Community).

Clinical Consultant: A licensed mental health professional designated to provide clinical input and support to the Sex Offender Treatment Team.

DJJ Sponsored Sex Offender Counselor Certification Program: An approved training and certification program which aids participants in their work with sexually abusive youth.

Emergency Pass: For the purposes of this policy, an approved leave of absence for a youth from a RYDC, YDC or Residential Program due to an emergency (e.g. critically or terminally ill family members, medical emergencies, death of an immediate family member, etc.).

Juvenile Sex Offender Assessment Protocol-II (JSOAP-II): A checklist to aid in the systematic review of risk factors that have been identified in the professional literature as being associated with sexual and criminal offending. It is designed to be used with youth who have been adjudicated for sexual offenses.

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Sex Offender Treatment Services Administrator: The licensed clinician responsible for providing clinical oversight of the Sexually Harmful Behavior Program and to ensure the quality of the program in regards to best practice.

Sexually Abusive Youth: Youth who have been adjudicated for a sexually harmful behavior, who have exhibited sexually harmful behaviors, or have been assessed by a licensed professional and found to be in need of treatment.

Sexually Harmful Behavior Intervention Treatment Team: A monthly to bi-monthly meeting to discuss youth progress in the SHBIP program and facility, service planning, PBIS, reentry/transitional planning, and family/community staff updates and involvement. The team will consist of, but not be limited to: all staff specifically designated as Sex Offender Treatment Specialist, Institutional Program Directors (IPD), Sex Offender Coordinators, Juvenile Detention Counselors, Psychologist/Clinical Consultant, Social Service Workers, Recreation staff, administration representative, security representative, education representative and medical representative. Community Case Managers, youth and family, DFCS case workers and other community support persons may be included.

Sexually Harmful Behaviors: Rape, sodomy, aggravated sodomy, child molestation, aggravated child molestation, enticing a child for indecent purposes, bestiality, necrophilia, sexual battery, aggravated sexual battery, public indecency and statutory rape.

Treatment Needs and Progress Scale (TNPS): A checklist for the assessment of dynamic risk factors that have been identified among youth who have committed sexually harmful behaviors. It is designed to establish an initial baseline to measure progress.

Sexually Abusive Behavior Review Panel: A panel of multi-disciplinary members who meet monthly to bi-monthly to review cases of our sexually harmful youth in order to make recommendations regarding treatment, reentry and placement options.

III. PROCEDURES:

- A. The Sex Offender Treatment Services Administrator or designee will approve the Juvenile Sex Offender Counselor certification training program used by the Youth Development Campuses (YDC).
- B. The Sex Offender Treatment Services Administrator and the Director of OBHS will select sex offender counselor candidates.
- C. Youth adjudicated as or meeting the criteria for a sexually harmful behavior and screened for YDC will have a Juvenile Tracking System (JTS) Sexual Offense alert set by the Office of Classification Services. A Sexually Harmful Behavior Treatment Plan will be initiated within the first 30 days of entry into the facility.
- D. Upon consultation with the Clinical Consultant the Sex Offender Treatment Coordinator will assign to the youth a Sex Offender Treatment Specialist when

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admitted to the YDC. The Juvenile Detention Counselor will be responsible for all case management services not related to the Sexually Harmful Behaviors Intervention Program.

- E. A youth who meets any of the following criteria will be considered a Sexually Abusive Youth (a safety plan will be completed and the youth will be supervised according to DJJ 20.36, Supervision of Sexually Abusive Youth in the Community):
 - 1. The youth has a current adjudication for a sexually harmful behavior;
 - 2. The youth has a prior adjudication for a sexually harmful behavior in which the order has not been closed and the youth has not completed sex offender treatment;
 - 3. The youth has received a psychosexual evaluation that indicates treatment for sexually harmful behaviors is appropriate and treatment has not been successfully completed;
 - 4. The youth is assessed as a sexually abusive youth by the Sexually Harmful Behaviors Treatment Team;
 - 5. The youth is exhibiting sexually harmful behaviors and is referred for a Psychosexual Evaluation. Youth will be considered a sexually harmful youth and placed in treatment if recommended by the evaluation; or
 - 6. The youth does not exhibit significant disturbances of mood or thought that would prevent him/her from participating in the program.

- F. A youth is not considered a Sexually Abusive Youth and a Safety Plan will not be needed if the youth's prior adjudication for a sexually harmful behavior has been successfully closed with all required treatment.

- G. The Sex Offender Treatment Team will provide all management and oversight of treatment, programming and case management for youth in sex offender treatment and are not on the mental health caseload.
 - 1. Youth who are on the mental health caseload will have their mental health services managed by the Behavioral Health Treatment Team.
 - 2. All other programs and case management will be managed by the Sex Offender Treatment Team.
 - 3. The Sex Offender Treatment Team will provide information to the Youth Centered Reentry Team in accordance with DJJ 25.1, Youth Centered Reentry Team.

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- H. Each sexually abusive youth will be staffed by the Sex Offender Treatment Team to assign appropriate services and will be placed in the Sexually Harmful Behavior Intervention Program within 30 days of admission to a YDC. The Parent Letter (Attachment A) will be given to the youth and mailed to the parent or guardian at the time the youth is placed in the program.
1. Admission to the program may be temporarily deferred by the Sex Offender Treatment Team due to clinical necessity.
 2. Youth who are deferred will be reviewed by the treatment team monthly to determine whether the issues have been resolved sufficiently to allow participation in the intervention program.
 3. The assigned Sex Offender Treatment Specialist will enter a Sex Offender Treatment Team note documenting the review and determination made by the team.
 4. The Sex Offender Treatment Team will review the screening packet which must contain:
 - a) JSOAP II;
 - b) Psychosexual and/or psychological evaluation, if completed;
 - c) Offense history;
 - d) CRN Assessment;
 - e) Disposition;
 - f) Complaint;
 - g) Social Summary; and
 - h) Other JTS Assessments (e.g., Mental Health Assessment, Education Assessment, Medical Assessments).
 5. The Sex Offender Treatment Specialist will deliver and document the delivery of services in accordance with the Sexually Harmful Behavior Intervention Program Treatment Manual located on the OBHS Intranet.
 6. A Treatment Plan will be initiated within the first 30 days of a youth's placement in treatment.
- I. The Sex Offender Treatment Specialist must review and approve the youth's visitation list generated from JTS Demographics Module prior to the youth receiving visitors (see DJJ 15.5, Youth Visitation). The approval will be based on the youth's social

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summary, police report, JSOAP II, clinical interview, and TNPS in consultation with the Certified Community Sex Offender Supervision Specialist or assigned Community Case Manager.

- J. The Sex Offender Treatment Specialist will complete a JSOAP II and TNPS in JTS upon the youth's completion of the Sexually Harmful Behaviors Program.
- K. The Sexually Harmful Behaviors Treatment Program is a long-term program based on the youth's risk, which may include services in a secure facility and/or the community. Upon completion of program, the Sex Offender Treatment Specialist will provide the youth with a certificate of participation and have a copy scanned into the correspondence section in JTS.
- L. The Sex Offender Treatment Specialist will facilitate family counseling meetings to discuss details of Relapse Prevention Plan prior to the youth's release from the Sexually Harmful Behaviors Intervention Program. The Certified Community Sex Offender Supervision Specialist or assigned Community Case Manager, youth and parents/legal guardians will be invited to the meeting.
- M. All youth placed in the program are expected to complete all requirements of the four stages of the Sexually Harmful Behaviors Intervention Program.
- N. At least 120 days prior to the minimum release date of a sexually abusive youth the Sexually Harmful Behaviors Treatment Team will make a referral to the Sexually Harmful Behavior Review Panel for recommendations and reentry planning. Youth may also be referred to the Sexually Harmful Behavior Review Panel at any time if they have a complicated clinical presentation that requires additional consultation.
- O. YCRT meetings will take place in accordance with DJJ 25.1 YCRT. The youth's Sex Offender Treatment Team or the SHIBP Treatment Specialist will present information developed by the managing team to the YCRT. Information and planning developed at the YCRT will be incorporated into the Service plan of YDC youth.
- P. If the Sex Offender Treatment Team finds that the youth has not completed all requirements of the Sexually Harmful Behavior Intervention Program, the team will request an extension for 30 to 90 days to allow the youth to complete program requirements in accordance with DJJ 18.21, Extension of Youth Time in Secure Facilities. A comprehensive narrative, the JSOAP II and the TNPS must be included with the extension request.
- Q. Prior to the youth's release from secure confinement, the Sex Offender Treatment Specialist will upload the following documents in JTS Correspondence module:
 1. A copy of the certification of participation of the Sexually Harmful Behavior Program;
 2. A copy of the youth's Relapse Prevention Plan; and

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3. Updated recommendations for treatment/supervision.

- R. Each sexually abusive youth released from a YDC will have a Relapse Prevention Plan for the Certified Community Sex Offender Supervision Specialist or assigned Community Case Manager to use in completing the Safety/Supervision Plan. The JSOAP II and the TNPS will be used in completing the Safety/Supervision Plan. The Safety/Supervision Plan must be approved by the Certified Community Sex Offender Supervision Specialist or Assigned Community Case Manager and Regional Administrator through the chain of command. The Relapse Prevention Plan will be signed by the youth, parent/legal guardian, and Certified Community Sex Offender Supervision Specialist or assigned Community Case Manager.
- S. Passes for YDC youth who are receiving treatment for sexually harmful behaviors will be managed in accordance with DJJ 17.20, Facility Passes. The Sex Offender Treatment Specialist will provide input into the decision to grant the youth a pass.

III. LOCAL OPERATING PROCEDURES: NO