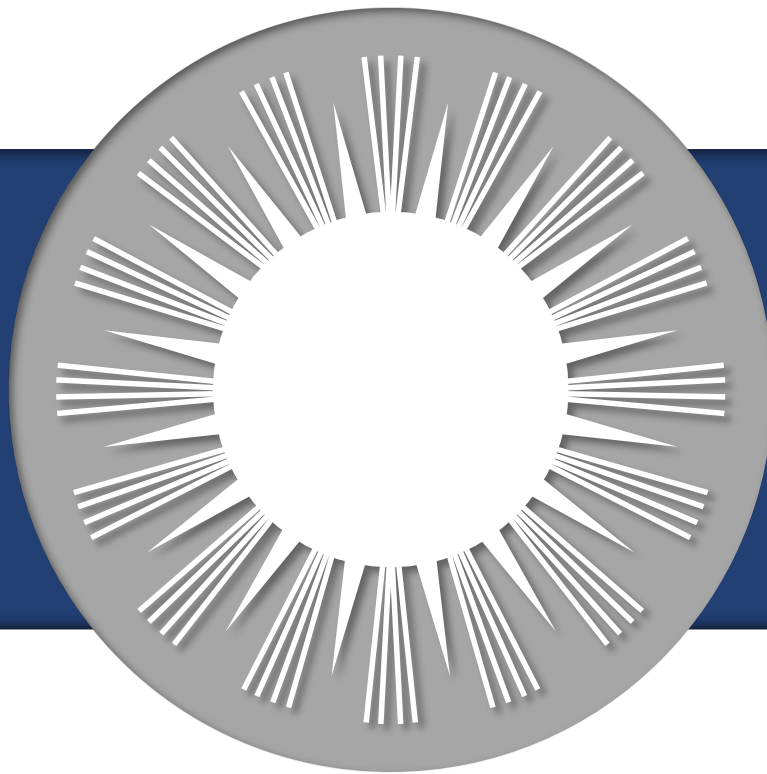




Ministry of  
Children and Family  
Development

# PROVINCIAL COMMUNITY YOUTH JUSTICE PRACTICE EVALUATION



**REPORT COMPLETED**  
**JUNE 2024**

Office of the Provincial Director and Aboriginal Services  
Quality Assurance Branch



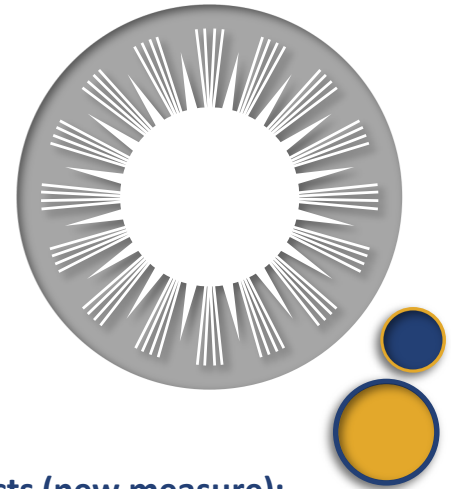
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# COMMUNITY YOUTH JUSTICE PRACTICE EVALUATION

## AT A GLANCE

Community Youth Justice (CYJ) practice evaluations are designed to assess the practice of MCFD youth probation officers (YPO) in relation to key components of the CYJ Operations Manual and related practice directives and guidelines. This report contains information and findings related to the CYJ practice evaluation that was conducted provincially from June 2023 – February 2024. This evaluation consists of measures identified by Specialized Intervention and Youth Justice (SIYJ), that would provide the most useful feedback to both them and Service Delivery Areas with respect to ongoing planning and policy development.



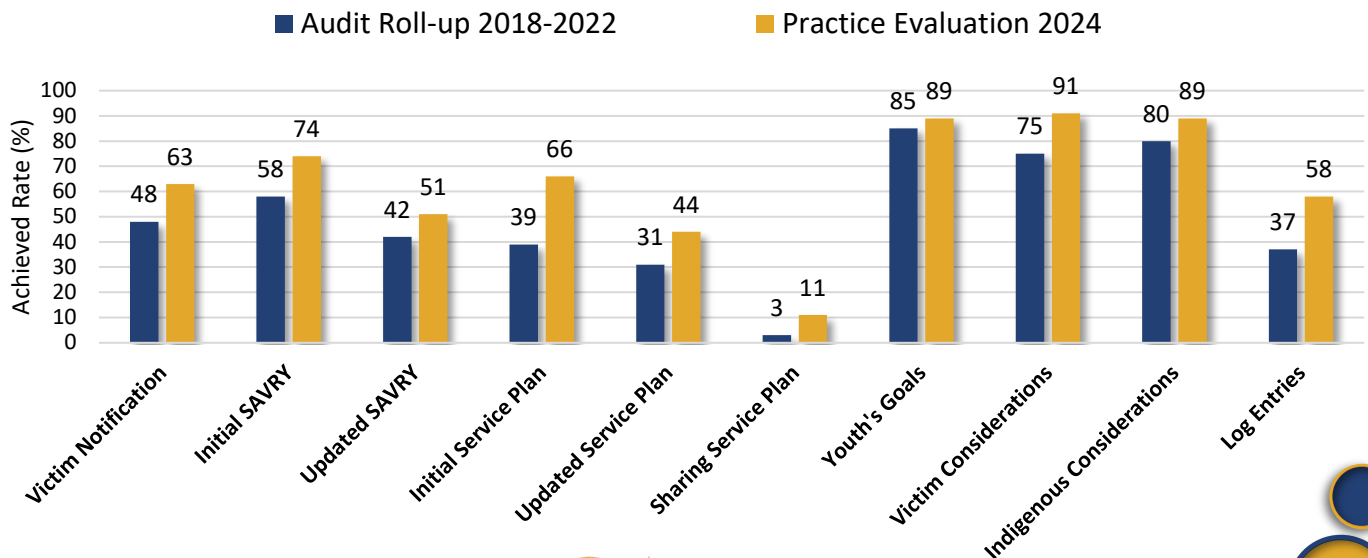
### Strengths:

- ❖ CYJ 8 - Service Plan addressed Youth’s goals: 89% compliance
- ❖ CYJ 9 - Service Plan addressed Victim consideration: 91% compliance
- ❖ CYJ 10 - Service Plan addressed considerations specific to Indigenous Youth: 89% compliance

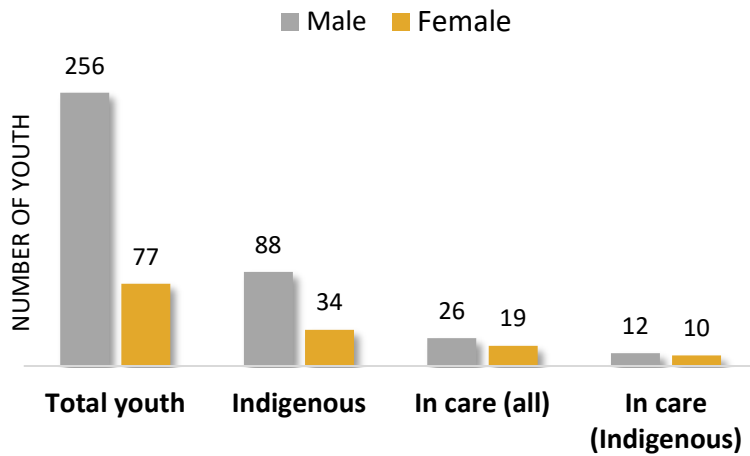
### Supervision Contacts (new measure):

- ❖ Qualitative look at number and type of contacts with youth
- ❖ Required number and type of supervision contacts per month, as determined by overall SAVRY risk rating, were met: 29% compliance
- ❖ Direct contact with youth (in office, in community, direct by phone) over 90% achieved across all risk level

## PROVINCIAL LEVEL COMPARISON



## DEMOGRAPHICS



## COLLABORATION WITH SIYJ

- ❖ Member of the Quality Assurance Audit team collaborated with Specialized Intervention and Youth Justice (SIYJ) throughout the evaluation development process
- ❖ Of the 12 measures, some were identified by SIYJ
- ❖ SIYJ requested these measures as they felt they would provide the most useful feedback to both them and Service Delivery Areas

## ACTION PLAN

- ❖ New policy clarification will be implemented on sharing service plans
- ❖ SDA level findings will be shared to support local practice improvements

## GROWTH OPPORTUNITIES

### CYJ 1

Initial interview with youth documented reviewing all required elements

#### 30% COMPLIANCE

- 15% not informing Youth of MCFD complaints process
- 20% not informing of Victim Notification
  - 65% missing both pieces

### CYJ 7

Service plan reviewed and shared with youth and parent/guardian

#### 11% COMPLIANCE

- Chronically low compliance
- Previous action plans have not mitigated the issue

### CYJ 12

Required # of supervision contacts per month

#### 29% COMPLIANCE

- Applied to all 333 records; 235 Not Achieved  
Of those, 225 had 1 or more months not meeting required # of contacts

QA



## INTRODUCTION

Provincial practice evaluations are conducted regularly by practice analysts in the Quality Assurance branch of the Office of the Provincial Director and Aboriginal Services division across several of the Ministry of Children and Family Development (MCFD) service lines and for services provided by an Indigenous Child and Family Services Agency (ICFSA) under the *Child, Family and Community Service Act* (CFCSA). These evaluations inform continuous improvements in policy, practice, and overall service delivery. They provide quality assurance oversight and demonstrate public accountability.

Community Youth Justice (CYJ) practice evaluations are designed to assess the practice of MCFD youth probation officers (YPO) in relation to key components of the CYJ Operations Manual and related practice directives and guidelines. The CYJ Operations Manual contains policy and procedures for MCFD YPOs, who have responsibility for the provision of community youth justice services across the province.

This report contains information and findings related to the CYJ practice evaluation that was conducted provincially from June 2023 – February 2024. This practice evaluation was conducted as a follow-up to previous audit results completed from 2018 to 2022, and a more focused practice evaluation that was completed in 2023. This evaluation consists of measures identified by Specialized Intervention and Youth Justice (SIYJ), that would provide the most useful feedback to both them and Service Delivery Areas with respect to ongoing planning and policy development. It also includes, at the suggestion of Quality Assurance practice analysts, a new measure related to the type and amount of supervision each youth received. Additional contextual information was compiled through demographic analysis and ancillary questions attached to the measures.

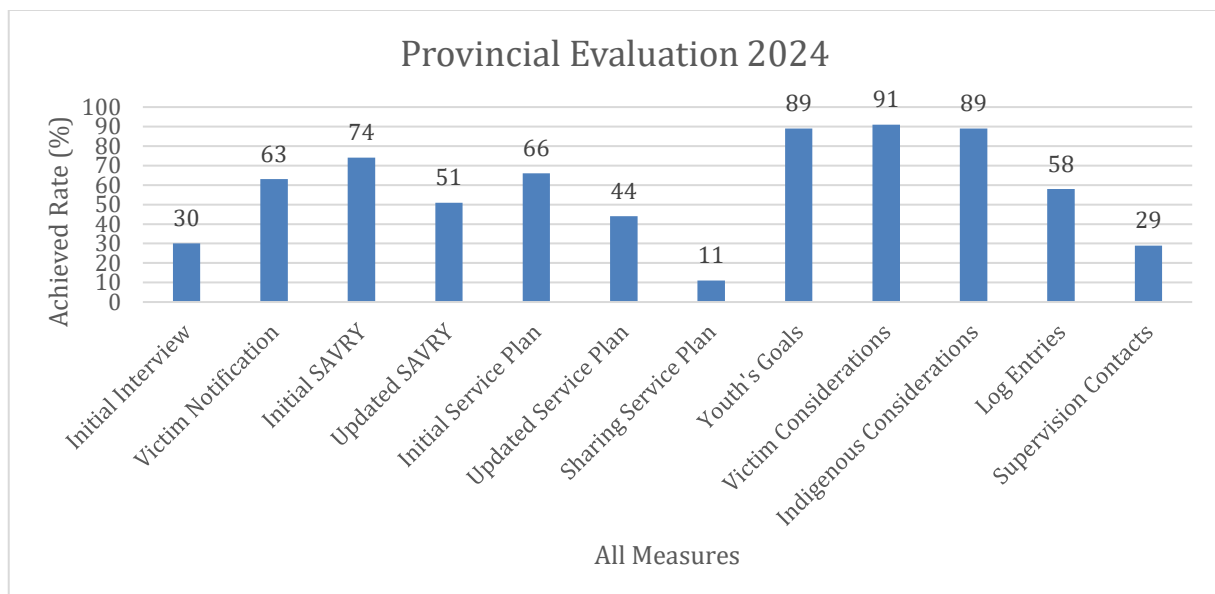
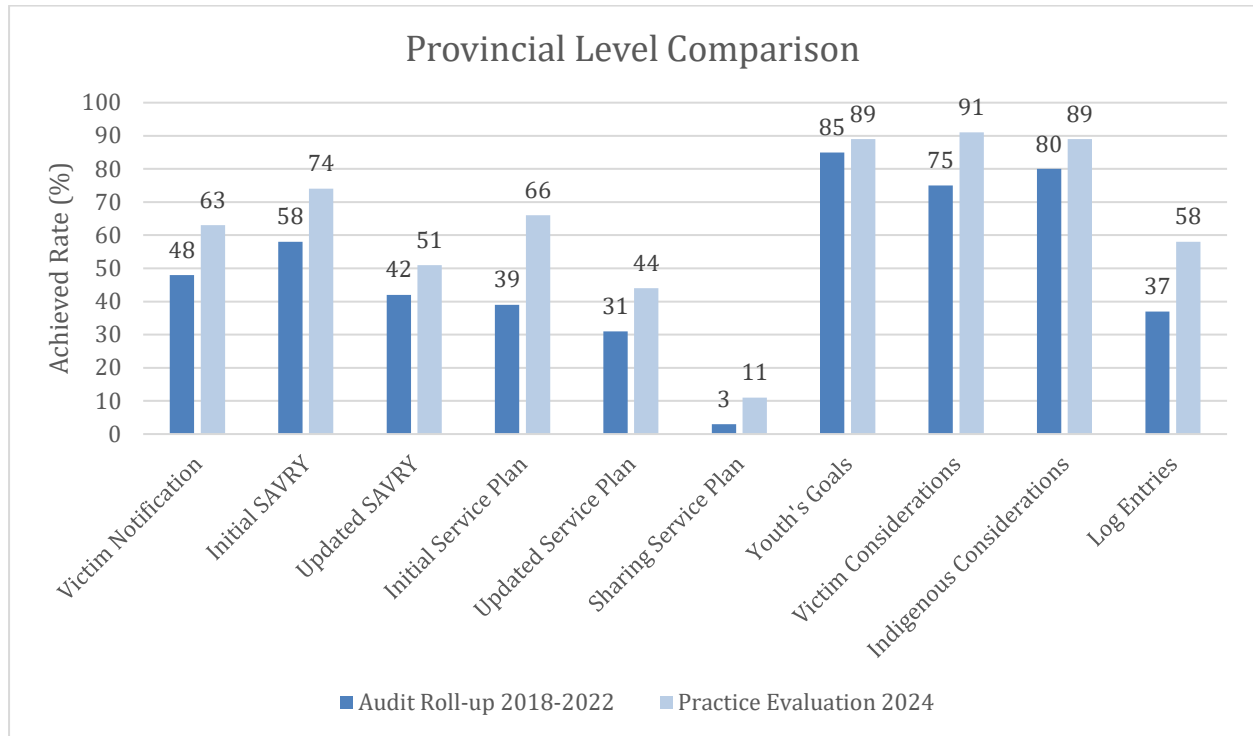
In the interest of clarity, nine of the measures in this practice evaluation are directly comparable to the results from the previous audits. Of the three remaining measures, one has been rewritten to limit the scope of what was measured but essentially still allows for a direct comparable with the previous findings. A second measure was rewritten to place the focus on content versus timeframe which renders any comparison to previous results impossible. As the third measure is new, there are no previous results to allow for any comparison.

### 1. SUMMARY OF FINDINGS

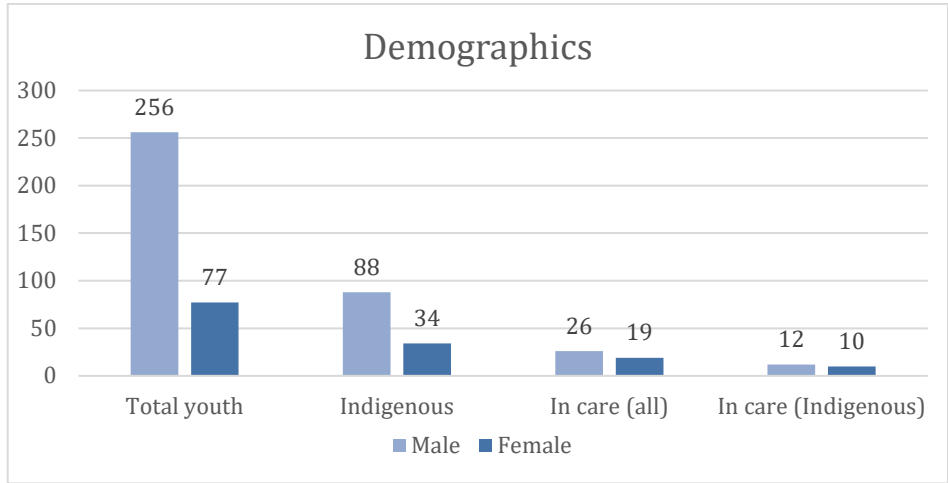
The following sub-sections contain the findings and observations of the practice analysts who conducted the practice evaluation through measures that were designed within the context of the policy, standards and procedures that guide the work of YPOs in the province.

Figure 1 identifies measures from the practice evaluation and the provincial roll-up of previous audits that are directly comparable. These findings and additional context are referenced throughout the report.

**Figure 1: Audit Results versus Practice Evaluation Results**



**Figure 2: Demographic Characteristics of Youth**

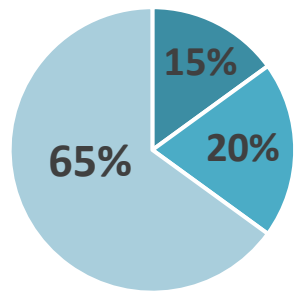


### 1.1 Initial Interview with Youth

When a youth is the subject of a court order that requires the youth to report to a probation officer, MCFD youth justice policy requires that an initial interview is completed by the date stipulated in the order, or within five days of the issuance of the order if a date is not stipulated in the order itself. The intended outcomes of this policy are that youth understand their orders and the consequences of not complying with their orders. The initial interview process is repeated for each new order.

The standard for an initial interview is that a YPO confirms the identity of the youth; explains the conditions in the order and the consequences of not complying with those conditions; explains the right to apply to the court for a review of the conditions in the order and the provisions for records disclosure and non-disclosure; explains the ministry's complaints process; communicates the date, time and manner of the next contact the youth will have with a YPO; and, if there's a victim, informs the youth that the victim will be contacted and informed about the conditions in the order. There are other more procedural and documentary requirements that are part of standard practice for completing an initial interview. All Client Logs must be recorded in CORNET as soon as it is practical to do so, but within five working days.

### Missing Elements of Initial Interview (227 records)



- Complaints process
- Informed of Victim notification
- Both

The practice analysts found that almost one third of the records in the sample had all the required initial interviews documented in the CORNET Client Log with all the required elements. Of the records missing elements of the initial interview, almost all of them (227/233) were missing documentation of reviewing the MCFD complaint process, informing the youth the victim would be notified (where applicable), or some combination of missing elements including one, or both, of these.

Also gathered, through an ancillary question, was whether the initial interview was documented in the CORNET Log within 5 business days.

Of the records that had documented initial interviews, the vast majority (87%) were done within 5 business days. This finding can be compared to the previous audit results which had a 73% compliance rate.

#### 1.2 Victim Contact and Victim Considerations

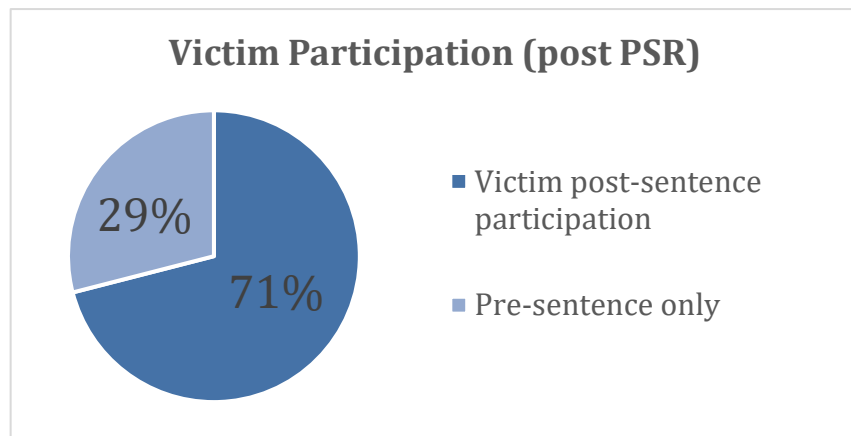
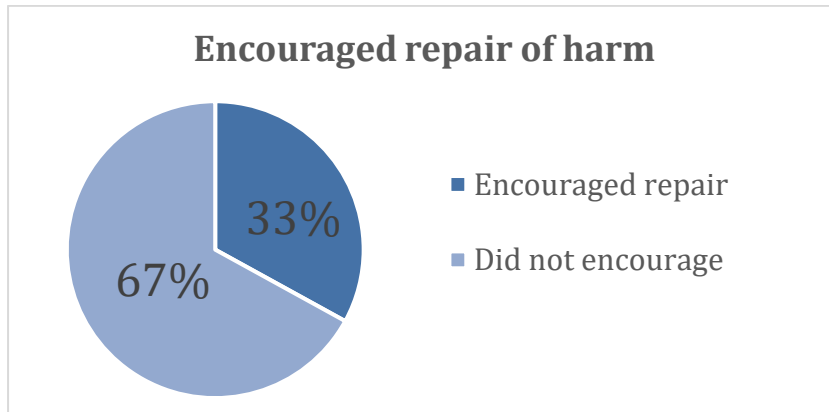
According to policy, a YPO is required to provide the victim with information about court proceedings and the opportunity to participate and be heard throughout the youth's involvement with the justice system. The intended outcomes are victim safety, youth accountability, and opportunities for youth to make amends for harm caused to victims.

The standard is for a YPO to inform the victim, within five working days of receiving an order, about any relevant conditions imposed on the youth, including protective conditions and how to report violations of protective conditions.

In reviewing this measure, the analysts found a high rate of compliance with respect to victim notification within 5 working days. When compared to the provincial roll-up of the previous audit results this is a 15% increase in compliance. (See figure 1)



**Figure 3: Ancillary Questions related to Measure 2 and Restorative Justice**



There were three ancillary questions attached to this compliance measure, designed to extract some details around the utilization of Restorative Justice (RJ) principles:

1. Is there any documentation the YPO encouraged the repair of harm done to an identifiable victim?
  - ❖ The analysts found that more than one third of the applicable records (95/291) had some documentation of YPO encouraging repair of harm to a victim.
2. Is there any documentation the YPO provided an opportunity for the victim to participate and be heard?
  - ❖ The analysts found that more than half of the applicable records (161/281) had some documentation of victim involvement. The question did not consider template letters sent to victims that did not solicit input into the justice process.

3. Was the victim contacted only for the purposes of preparation of a pre-sentence report (PSR)?
  - ❖ Of the 150 applicable records, less than one-third had documentation of victim contact after the preparation of a PSR (see figure 3). Again, the question did not consider template letters sent to victims that did not solicit input into the justice process.

Almost all the records (279/308) that had orders with victim considerations, such as apology letters, restorative justice processes or restitutions, had service plans that addressed these conditions. For the remaining records, the majority (11/14) did not have a service plan completed during the timeframe reviewed. These results mark a 16% improvement over the previous audit results (see table 1).

### **1.3 Structured Assessment of Violence Risk in Youth (SAVRY)**

A YPO is required to continually assess risk and protective factors by completing a SAVRY for every youth who is sentenced and required to report to a YPO, and by updating the SAVRY on a regular basis. The intended outcomes are reduced recidivism and to support public safety.

The standard is that a YPO completes a SAVRY within 30 days after the initial interview with the youth, when the youth is the subject of a new court order and/or when the youth's record is transferred to a YPO, and every six months thereafter, for the time that the youth is under supervision.

Almost three quarters of the records had SAVRYs that were completed within the required timeframes. One fifth of the records had SAVRYs that were completed more than 30 days after the initial interviews or more than 30 days after the transferred records were received. Of the 65 records with SAVRYs that were completed after the 30-day timeframe, the extra time they took to complete was between two and 158 days, with the average being 33 days.

Just over half of the records in the sample required updated SAVRYs. In half of the applicable records, all the required updates to the SAVRYs were completed. One fifth of the applicable records had SAVRY updates, but one or more of the updates were not completed every six months, and only five records did not have any required updates. Of the SAVRY updates that took longer than six months to complete, the extra time they took to complete was between one and 375 days, with the average being 34 days.

### **1.4 Service Plan**

When a youth is sentenced and under community supervision, a YPO is required to develop a service plan that identifies goals, objectives and strategies that are relevant to the youth's needs

and reduce the risk of further offending. With few exceptions, a new service plan is required for each new court order and, therefore, there can be multiple service plans within a record.

The intended outcome is effective management of the risks presented by youth in ways that protect the public and bring about positive changes in the youths' offending behaviours.

The standard is that a YPO completes a service plan within 30 days of an initial interview with the youth and within 30 days of a record transfer and updates the service plan every six months thereafter for as long as there is an active supervision order.

This practice evaluation found that two thirds of the records had service plans that were completed within 30 days of the initial interviews with youth and, if required, within 30 days of receiving transferred records. Of the remaining records, one fifth had one or more service plans that were completed more than 30 days after the initial interviews or more than 30 days after receiving transferred records, almost one quarter had no service plan at all during the timeframe reviewed, just over one tenth of the records (39/333) were missing one or more required service plans and 14 of the records had service plans that were completed before a required SAVRY risk assessment was completed. Of the service plans that were completed after the 30-day timeframe, the extra time they took to complete was between two and 485 days, with the average being 41 days.

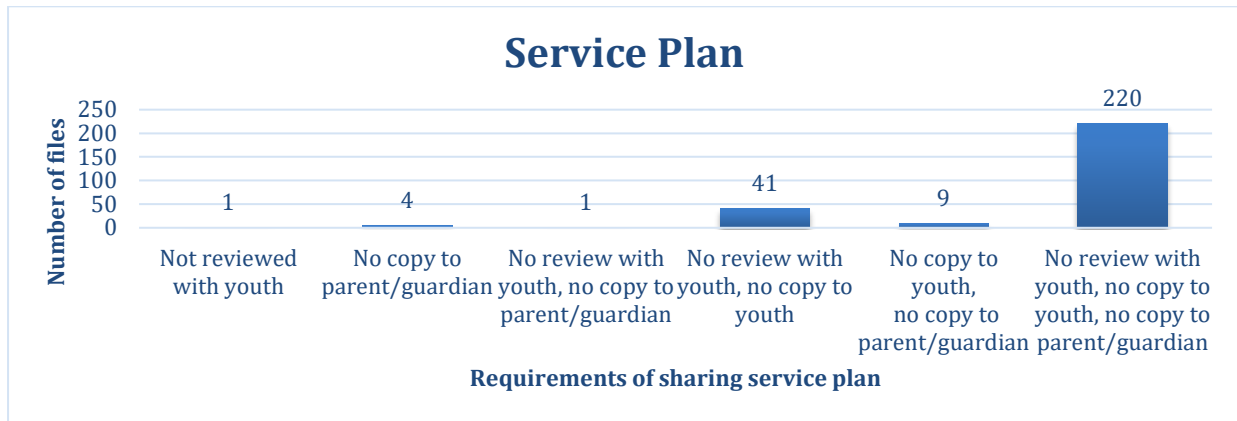
Of the applicable records that required the service plans to be updated every six months, less than half had all service plans updated every six months. More than one quarter had all service plans updated, but one or more were not updated every six months, almost one quarter had service plans that were never updated, and three had no service plan at all during the timeframe reviewed. Of the service plans that were updated after the 6-month timeframe, the extra time they took to complete was between one and 187 days, with the average being 42 days.

### **1.5 Review Service Plan with Youth and Parent**

When a youth is sentenced and under community supervision, a YPO is required to develop a service plan that identifies goals, objectives and strategies that are relevant to the youth's needs and reduce the risk of further offending.

The standard is that a YPO reviews the plan with the youth and provides copies of the plan to the youth and the youth's parent or guardian.

**Figure 4: Review and Sharing of Service Plan**



Upon reviewing the records for the practice evaluation, the analysts found that while there was a small improvement from the previous audit results in reviewing and sharing the service plan, the compliance rating continued to be extremely low (see figure 1). Figure 4 above, shows a breakdown of when the service plan was not reviewed or shared.

The compliance concerns with this measure have existed since the inception of audits with respect to Youth Justice. The question remains, what are the challenges or barriers contributing to low compliance? This is particularly pertinent as SIYJ, following a review and rewrite of their Operations Manuals, continues with this requirement with no appreciable change.

An attached ancillary question asked whether there was documentation that a youth was involved or invited to a case management meeting. A review of the CORNET logs showed about one third (114/333) of the records had documentation of youth involvement in case planning meetings or being encouraged to attend case planning meetings.

### 1.6 Youth’s Goals

Youth justice policy requires that a YPO recognize the capacity of the youth to determine and meet their self identified needs, when feasible. The intended outcome is to provide opportunities for the youth to engage and participate in service planning.

The standard is that a YPO has a conversation with the youth about specific goals the youth would like to work toward or accomplish and includes in the service plan the youth’s goals and the strategies that will be used to support the youth in accomplishing their goals.

In most of the records (298/333), the service plans included the youths’ goals along with strategies to support the youth in attaining their goals. There were 33 records that contained no service plans during the timeframe reviewed or did not address the youth’s goals in the service plan and two had the youth’s goals documented, but no identified strategies.

## 1.7 Considerations Specific to Indigenous Youth

A YPO is required by policy to consult with, and involve, Indigenous communities to make services more relevant and responsive to the needs of Indigenous youth who are under community supervision and required to report to a YPO. The intended outcome is that the roles of Indigenous families and communities, including the importance of Indigenous values, traditions, and processes in resolving harm, are acknowledged.

The standard associated with this policy is that a YPO complete the cultural connectedness section in the service plan, including the youth's current level of involvement with their culture and community, the level of involvement the youth would like to have, and the strategies that a YPO will use to provide opportunity for the youth to be involved, and to maintain or enhance their involvement with their culture and community.

A review of this measure showed a very high level of compliance of 89% with respect to completing the Indigenous considerations section of the service plan. Figure 1 highlights an improvement of 9% over the results noted in the provincial roll-up of the previous audit results.<sup>1</sup>

An ancillary question attached to this measure asked, "Is there any documentation of attempted contact with youth's cultural community or a local representative agency/program?" A review of the client log and service plans showed that more than three quarters of the applicable records (95/120) had documentation indicating the YPO has been in contact with the youth's cultural community or a representative of an Indigenous program or agency or that this was not a concern given the youth's current circumstances (ex. already heavily involved with their culture).

## 1.8 Documentation in CORNET

Policy requires that a YPO is to record and attach all relevant client information in CORNET. The intended outcomes are continuity of service, including day-to-day supervision and support for the youth, public accountability, and to support public safety.

The standard is that a YPO records information in the CORNET Client Log within five working days of an event in a way that allows someone unfamiliar with the record to understand what occurred and attaches all relevant documents to the log.

The practice analysts found that more than one half of the records had all CORNET Client Log entries recorded within the required five-day timeframe. Of the records with log entries entered after 5 working days, more than one quarter (32/122) had log entries that were entered more than a month after the information was received.

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<sup>1</sup> The service plan does not require a YPO to document the sources of information utilized to complete the Cultural Connectedness section. As such, this measure only looks at completion of the section, not the quality or type of information that was considered for its completion.

## 1.9 Monthly Supervision Contacts

Policy requires that a YPO create a case management plan that includes the required number, and type, of supervision contacts as determined by the risk rating from the SAVRY assessment. The number of contacts is subject to the nature of the offence or by remote supervision standards. The intended outcomes include appropriate supervision and support for the youth, public accountability, and to support public safety.

The standard is that a youth probation office develops a case management plan that meets the minimum number and types of monthly supervision contacts. These supervision contacts are documented in the CORNET Client Log and may be amended when the risk level changes or the needs of the youth, or public safety, change.

The practice analysts found that more than one quarter of the records meet the minimum number and type of supervision contacts for each full month of supervision reviewed. There are numerous reasons why the number of required supervision contacts may not be met in any given month, so the analysts also looked at the total number of months supervision was provided and the number of months the standard was met. This revealed that more than half of the months (1461/2507) met the required number and manner of supervision contacts.

When looking at individual types of supervision contact, the highest rate of compliance was with seeing the youth, more than 90% compliance across all risk ratings. There was also a high rate of compliance with both contact with a collateral and youth being in a YJ focused program, with compliance rates ranging from 79% to 96% across all risk ratings. Contact with a caregiver had lower compliance rates ranging from 56% to 72% across risk ratings. The lowest compliance rate was for case specific home visits at 54%. Further analysis also showed that when there were multiple occurrences of a supervision contact, these were predominantly with youth who had higher risk ratings.

## 2. ACTION PLAN

ACTION	PERSON RESPONSIBLE	INTENDED OUTCOMES	DATE TO BE COMPLETED
1. New policy on service planning is in development and will be rolled out and presented to the Service Delivery Areas (SDA)	Rose Anne Van Mierlo, Director of SIYJ	The new policy will clarify and enhance the current requirement and obligations to review and share service plans with youth and guardian.	November 30, 2024
2. Quality Assurance will provide provincial and SDA findings to the SDAs and Practice Branch for review to support regional staff planning.	Megan Tardif, Director of Quality Assurance	Individual SDAs will know how they compare to the provincial averages and can plan accordingly to address their areas of challenge.	August 30, 2024
3. Executive Director of Provincial Practice Branch will ensure the responsible Directors of Practice review the findings of this evaluation with regional staff and develop a plan to address challenges in the SDA.	Darren Jones, ED of Provincial Practice Branch or designate.	Directors of Practice / SDA YJ staff and management will review the audit findings to support opportunities for improvement with a focus on documentation.	October 30 2024

## APPENDIX

This appendix contains a description of the practice evaluation methodology and a detailed breakdown of the findings for each of the measures in the practice evaluation tool.

### A. METHODOLOGY

This practice evaluation was based on a review of records in a sample of Correctional Service (CS) records obtained from the Province of British Columbia's CORNET database. The service evaluation consisted solely of a review of electronic records in the CORNET computer system. The data collection phase of this practice evaluation took place from June 2023 through February 2024.

The sample was selected using the following process:

1. A list of CS record numbers was obtained from the Youth Justice Project Consultant in the Specialized Intervention and Youth Justice Branch:
  - The list contained records that were open on April 12, 2023 and had an active sentencing order.
2. Records that were custody only orders and orders that were less than six months in length were removed from the list.
3. The most significant court order in each record on both lists was selected, and practice related to that court order, as well as all other orders that were active within the timeframe of that order, was reviewed using the CYJ practice evaluation tool and rating guide.

The sample contained a combined total of 333 records.

The CYJ practice evaluation tool is a SharePoint based form, designed by data specialists on the Monitoring Team, in the Child Welfare Branch, using 12 measures designed by practice analysts that assess compliance to practice. These 12 measures were selected in consultation with analysts in SIYJ as follow-up to the findings from previous audit work. Each measure contains a scale with "achieved" and "not achieved" as rating options as well as ancillary questions designed to assist the practice analysts in collecting categorical and qualitative data that explain or provide context for the ratings.

The measures in the CYJ practice evaluation tool apply to practice that occurred within the timeframe of community supervision defined by the most significant court order in effect on April 12, 2023.



The most significant court order was identified through the following process:

- If there was one court order in effect within the practice evaluation timeframe, that order was selected.
- If there were multiple orders in effect within the practice evaluation timeframe, the longest order was selected.
- If the orders were roughly of the same length, selection was based on the severity of the offence (i.e., personal harm offences over property offences).
- If the orders were roughly of the same length and for the same type of offence, the most recent order was selected.

The selected records were reviewed and assessed by practice analysts with youth justice experience and specialization, on the Provincial Audit Team, in the Quality Assurance Branch.

Quality assurance policy and procedures require that practice analysts identify for action any record that suggests a child or youth may need protection under section 13 of the *Child, Family and Community Service Act*. During the practice evaluation process, the practice analyst watched for situations in which the information in the record suggests that a child may have been left in need of protection. When identified, the record is brought to the attention of the responsible team leader (TL) and director of operations (DOO), as well as the executive director of service (EDS), for follow up, as deemed appropriate. This procedure is also used to identify for action any youth justice record that suggests there may be a current public safety concern, and when a record, such as a Youth Forensics Psychiatric Services report, is inappropriately attached to CORNET. During this practice evaluation, no record was identified for possible follow up.

## **B. DETAILED FINDINGS AND ANALYSIS**

In this section of the report, findings are presented in tables that contain counts and percentages of ratings of achieved and not achieved for all the measures in the practice evaluation tool (CYJ 1 to CYJ 12). The measures correspond with specific components of the CYJ Operations Manual and are labelled accordingly. Each table is followed by an analysis of the findings presented in the table. The analysis includes a breakdown of the reasons why a measure was rated achieved or not achieved. It is important to note that some measures can result in a rating of not achieved for more than one reason.

There were 333 records in the sample selected for this practice evaluation. Figure 5 provides an overview of the youth whose records were included in the samples.

Not all the measures in the practice evaluation tool were applicable to all 333 records. The “Total Applicable” column in the tables below contains the total number of records that had records to which the measure was applied.

### b.1 Initial Interview with Youth

Table 1 provides the compliance rate for measure CYJ 1, which has to do with documenting the initial interview with the youth.

**Table 1: Initial Interview with Youth**

Measure	Total Applicable	# Achieved	% Achieved	# Not Achieved	% Not Achieved
CYJ 1: Initial interview with youth documented reviewing all required elements	333	100	30%	233	70%

#### **CYJ 1: Initial interview with youth documented with all required elements**

The compliance rate for this measure was **30%**. The measure was applied to all 333 records in the sample; 100 were rated achieved and 233 were rated not achieved. To receive a rating of achieved, the required initial interviews with the youth were documented in the CORNET Client Log and documented a review of all the required elements of an initial interview. Of the 233 records rated not achieved, 2 had no documentation of reviewing the conditions of the order, and/or the consequences for failing to comply, and/or the right to apply for a review, and/or the records disclosure provisions; 4 had no documentation that the date, time and manner of next contact was communicated to the youth; 34 had no documentation that the MCFD complaints process was explained to the youth; 45 had no documentation of informing the youth the victim will be contacted (where applicable), advised of protective conditions and provided with a copy of the court order; and 146 records had a combination of these factors.

The measure was accompanied by 2 ancillary questions, the first being: "If initial interview was documented, but not within 5 business days, how many extra days did it take?" This question did not impact the compliance rate for the measure. Of the 333 records, 29 had an initial interview that was documented after 5 business days. The extra days required ranged from 1 to 77 days with the average being 11 days.

The second ancillary question looked at the number of intakes that were completed during the timeframe reviewed. This was explored to understand the number of records that had additional work requirements versus those records with only one intake. These additional intakes were of various types (bail, extra judicial sanctions, etc.) and not just for a sentencing order. There were 62 records that had multiple intakes ranging from two to eight intakes with an average of 3 intakes over those 62 records.

## b.2 Victim Contact

Table 1 provides the compliance rate for measure CYJ 2, which has to do with contacting the victim within five working days of receipt of the court order. The note below the table provides the number of records to which the measure was not applicable and explains why.

**Table 1: Victim Contact and Victim Considerations**

Measure	Total Applicable	# Achieved	% Achieved	# Not Achieved	% Not Achieved
CYJ 2: Victim contacted within five working days of receipt of court order, if order included protective conditions (i.e., no contact)	278*	174	63%	104	37%

\*This measure was not applicable to 55 records because there were no protective conditions.

### **CYJ 2: Victim contacted within five working days of receipt of order**

The compliance rate for this measure was **63%**. The measure was applied to 278 of the 333 records in the sample; 174 were rated achieved and 104 were rated not achieved. To receive a rating of achieved, the victim was contacted within five working days of receipt of an order with protective conditions (i.e., no contact order).

Of the 104 records rated not achieved, 68 had one or more occurrences when the victims were contacted, but not within the required five working days; 31 had one or more occurrences when the victims were not contacted and the reasons were not recorded in the CORNET Client Log; and 5 had a combination of these occurrences.

For the 73 records where victim notification took longer than the requisite 5 business days, the amount of extra time ranged from 1 day to 289 days with the average being 23 extra days.

The measure was accompanied by 3 ancillary questions; the first was, “Is there any documentation the YPO encouraged the repair of harm done to an identifiable victim”? The analysts looked through the Client Log to find any documentation of a referral to a RJ specialist, or documentation of direct YPO involvement in encouraging the youth to engage in some form of restorative process. A process may include writing a letter of apology, an empathy project or agreeing to an in-person meeting with the victim. The analysts saw documentation in 95 records that the YPO encouraged the youth to consider the issue of repairing harm to a victim.

The second ancillary question attached to this measure was, “Is there any documentation the YPO provided an opportunity for the victim to participate and be heard”? The analysts looked through the Client Log to find documentation of victim input and/or participation and included statements by the victim gathered for the preparation of a pre-sentence report (PSR). Here the analysts found 161 records where the victim was contacted, and their input was sought.

Note that there is no direct connection between the measure and the ancillary questions; there were records where repair of harm to a victim was encouraged and victim participation was sought, but there was no requirement for victim notification.

The third ancillary question for this measure queried if a victim in the matter was only contacted for the purposes of gathering information for the completion of a PSR. Of the 150 applicable records, 107 had documentation that the only contact with the victim was for the purposes of gathering information for a PSR.

### b.3 Structured Assessment of Violence Risk in Youth (SAVRY)

Table 3 provides compliance rates for measures CYJ 3 and CYJ 4, which have to do with completing and updating the SAVRY. The note below the table provides the number of records to which one of the measures was not applicable and explains why.

**Table 3: Structured Assessment of Violence Risk in Youth (SAVRY)**

Measure	Total Applicable	# Achieved	% Achieved	# Not Achieved	% Not Achieved
CYJ 3: SAVRY completed within 30 days of initial interview with youth, and when a transferred file is received	333	248	74%	85	26%
CYJ 4: SAVRY updated every six months	170*	86	51%	84	49%

\*This measure was not applicable to 163 records because the length of the orders did not require updates or the periods of supervision extended beyond the timeframe covered by the practice evaluation

#### **CYJ 3: SAVRY completed within 30 days of initial interview with youth**

The compliance rate for this measure was **74%**. The measure was applied to all 333 records in the samples; 248 were rated achieved and 85 were rated not achieved. To receive a rating of achieved:

- the SAVRY was completed within 30 days of the initial interview with the youth
- the SAVRY was completed within 30 days of receiving a transferred file, or
- an extension to the timeframe to complete the SAVRY was approved by a supervisor and their direction was documented.

Of the 85 records rated not achieved, 61 had one or more SAVRYs that were not completed within 30 days of the initial interviews with the youth or within 30 days after transferred records were received; 20 did not have one or more of the required SAVRYs; and 4 had combinations of the above noted reasons. Of the 65 records with SAVRYs that were completed after the 30-day timeframe, the extra time they took to complete was between two and 158 days, with the average being 33 days.

The measure was accompanied by the ancillary question, “How many comment boxes in the initial SAVRY were filled out by the youth probation officer?” This question did not impact the compliance rate for the measure but was designed to provide feedback on how frequently rationales are provided for the ratings in the SAVRYs. The practice analysts found the following results:

- 72 had less than half of the comment boxes filled out
- 9 had none of the comment boxes filled out
- 173 had more than half, but not all, of the comment boxes filled out
- 69 had all the comment boxes filled out, and
- 10 files had no SAVRYs completed during the timeframe reviewed.

**CYJ 4: SAVRY updated every six months**

The compliance rate for this measure was **51%**. The measure was applied to 170 of the 333 records in the samples; 86 were rated achieved and 84 were rated not achieved. To receive a rating of achieved:

- the SAVRY was updated within six months of the completion date of the previous SAVRY or
- an extension to the timeframe to update the SAVRY was approved by a supervisor and their direction was documented.

Of the 84 records rated not achieved: 68 had SAVRY updates, but some or all the updates were not completed every six months, 10 had one or more SAVRYs that were not updated, 5 had no SAVRYs that were completed, and 1 had a combination of the above-noted reasons. Of the SAVRY updates that took longer than six months to complete, the extra time they took to complete was between one and 375 days, with the average being 34 days.

**b.4 Service Plan**

Table 4 provides compliance rates for measures CYJ 5, and CYJ 6, which have to do with completing the service plan within 30 days of an initial interview with the youth, and updating the plan every six months. The note below the table provides the number of records to which one of the measures was not applicable and explains why.

**Table 4: Service Plan**

Measure	Total Applicable	# Achieved	% Achieved	# Not Achieved	% Not Achieved
CYJ 5: Service Plan completed within 30 days of initial interview with youth	333	219	66%	114	34%
CYJ 6: Service Plan updated every six months or when transferred file received	156	68	44%	88	56%

\* This measure was not applicable to 177 records because the length of the orders did not require updates or the periods of supervision extended beyond the timeframe covered by the practice evaluation

### **CYJ 5: Service plan completed within 30 days of initial interview with youth**

The compliance rate for this measure was **66%**. The measure was applied to all 333 records in the samples; 219 were rated achieved and 114 were rated not achieved. To receive a rating of achieved, a service plan was completed within 30 days of an initial interview related to a new order or within 30 days of receiving a transferred record, and each service plan was developed after the SAVRY was completed.

Of the 114 records rated not achieved, 62 had one or more service plans that were not completed within 30 days of initial interviews or within 30 days after transferred records were received; 31 did not have one or more service plans completed for new orders or when transferred records were received; 10 had one or more service plans that were completed prior to the completion of SAVRYs; and 11 had combinations of the above noted reasons. Of the service plans that were completed after the 30-day timeframe, the extra time they took to complete was between two and 485 days, with the average being 41 days.

### **CYJ 6: Service plan updated every six months**

The compliance rate for this measure was **44%**. The measure was applied to 156 of the 333 records in the samples; 68 were rated achieved and 88 were rated not achieved. To receive a rating of achieved, the record contained documentation indicating that the service plan had been updated within six months of a previously completed service plan and after the SAVRY was updated.

Of the 88 records rated not achieved, 46 had one or more service plans that were updated, but not within six months of a previously completed service plan; 36 had one or more service plans that were not updated every six months; 3 did not contain any service plans during the timeframe reviewed; and 3 had combinations of the above noted reasons. Of the service plans that were updated after the 6-month timeframe, the extra time they took to complete was between one and 187 days, with the average being 42 days.

## **b.5 Review Service Plan With Youth And Parent**

Table 4 provides compliance rate for measure CYJ 7, which has to do with reviewing the plan with the youth and parent/guardian.

**Table 4: Service Plan**

<b>Measure</b>	<b>Total Applicable</b>	<b># Achieved</b>	<b>% Achieved</b>	<b># Not Achieved</b>	<b>% Not Achieved</b>
CYJ 7: Service Plan reviewed with youth and parent/guardian and copy provided to youth and parent/guardian	333	36	11%	297	89%

### **CYJ 7: Service plan reviewed with youth and parent/guardian**

The compliance rate for this measure was **11%**. The measure was applied to all 333 records in the sample; 36 were rated achieved and 297 were rated not achieved. To receive a rating of achieved, the record contained documentation indicating:

- each service plan was reviewed with the youth, and
- a copy was provided to the youth, and
- a copy was provided to the parent/guardian.

Of the 297 records rated not achieved, 271 had combinations of missing the above requirements; 1 had no documentation the service plans were reviewed with the youth; 4 had no documentation the service plans were provided to the parent/guardian; and 21 did not contain any service plans during the timeframe reviewed.

The measure was accompanied by the ancillary question, “Was there any documented indication of youth being involved in or invited to case planning/ICM”? Of the records reviewed, 114 had documentation of the youth either participating in case planning/ICMs or being invited to participate.

### **b.6 Youth’s Goals**

Table 6 provides the compliance rate for measure CYJ 8, which has to do with addressing the youth’s goals in the service plan.

**Table 6: Other Issues Related to Court Orders and Youth’s Goals**

<b>Measure</b>	<b>Total Applicable</b>	<b># Achieved</b>	<b>% Achieved</b>	<b># Not Achieved</b>	<b>% Not Achieved</b>
CYJ 8: Service Plan addressed Youth’s goals	333	298	89%	35	11%

### **CYJ 8: Service plan addressed youth’s goals**

The compliance rate for this measure was **89%**. The measure was applied to all 333 records in the samples; 298 were rated achieved and 35 were rated not achieved. To receive a rating of achieved, each service plan:

- addressed at least one of the youth’s goals, and
- included planned strategies/frequency of contact, and
- had a target date.

Of the 35 records rated not achieved, 24 did not contain any service plans during the timeframe reviewed; 9 had at least one or more service plans that did not address Youth’s goals; and 2 had at least one or more service plans that included the youth’s goals but did not identify the strategies to be implemented.

### b.7 Victim Considerations

Table 7 provides the compliance rate for measure CYJ 9, which has to do with addressing victim considerations in the service plan. The notes below the table provide the number of records to which two of the measures were not applicable and explain why.

**Table 7: Victim Contact and Victim Considerations**

Measure	Total Applicable	# Achieved	% Achieved	# Not Achieved	% Not Achieved
CYJ 9: Service Plan addressed victim considerations	308*	279	91%	29	9%

\*This measure was not applicable to 25 records because there were no victim considerations that needed to be addressed.

#### **CYJ 9: Service plan addressed victim considerations**

The compliance rate for this measure was **91%**. The measure was applied to 308 of the 333 records in the samples; 279 were rated achieved and 29 were rated not achieved. To receive a rating of achieved, each service plan:

- addressed victim considerations, and
- identified the strategies that would be used to address victim considerations.

Of the 29 records rated not achieved, 24 did not contain any service plans during the timeframe reviewed; 4 had one or more service plans that did not address the victims’ considerations; and 1 had one or more service plans that addressed victim considerations but did not identify strategies to be used.

Examples of victim considerations include potential victim-offender meetings, restorative justice conferences, compensation, apology letters, no contact conditions, and victim notifications.

### b.8 Considerations Specific to Indigenous Youth

Table 2 provides compliance rates for measure CYJ 10, which has to do with addressing considerations specific to Indigenous youth in the service plan. The note below the table provides the number of records to which the measure was not applicable and explains why.

**Table 2: Considerations Specific to Indigenous Youth**

Measure	Total Applicable	# Achieved	% Achieved	# Not Achieved	% Not Achieved
CYJ 10: Service Plan addressed considerations specific to Indigenous youth	122*	108	89%	14	11%

\* This measure was not applicable to 211 records because the youth were not identified as Indigenous.



### **CYJ 10: Service Plan addressed considerations specific to Indigenous youth**

The compliance rate for this measure was **89%**. The measure was applied to 122 of the 333 records in the sample; 108 were rated achieved and 14 were rated not achieved. To receive a rating of achieved, each of the required service plans:

- addressed cultural connectedness, and
- included strategies to be used to address cultural connectedness, and
- included a plan for implementing the strategies, and
- had a target date.

Of the 14 records rated not achieved, 9 had one or more service plans where the “Cultural Connectedness” sections were not completed; 3 had one or more service plans that did not describe how strategies would be implemented; and 11 did not contain any service plans during the timeframe reviewed.

The measure was accompanied by the ancillary question, “Is there any documentation of attempted contact with youth’s cultural community or a local representative agency/program”?

There were 50 records that had some form of documentation that the YPO had reached out either to the youth’s cultural community or an Indigenous agency.

### **b.9 Client Logs Recorded Within 5 Working Days**

Table 11 provides the compliance rate for measure CYJ 11, which has to do with recording client records in CORNET within 5 working days and as separate entries.

**Table 11: Documentation in CORNET**

<b>Measure</b>	<b>Total Applicable</b>	<b># Achieved</b>	<b>% Achieved</b>	<b># Not Achieved</b>	<b>% Not Achieved</b>
CYJ 11: Client Logs recorded in CORNET, in separate entries, not as an attachment, within five working days	333	194	58%	139	42%

### **CYJ 11: Client Logs recorded in CORNET within five working days**

The compliance rate for this measure was **58%**. The measure was applied to all 333 records in the sample; 194 were rated achieved and 139 were rated not achieved. To receive a rating of achieved:

- the CORNET Client Log entries were recorded within five working days,
- the CORNET Client Log entries were recorded separately, and
- the CORNET Client Log entries were not in the form of an attachment (ex. WORD doc).

Of the 139 records rated not achieved, 92 had one or more occurrences when Client Logs were recorded in CORNET, but not within five working days; 17 had one or more occurrences when Client Logs were not recorded as a single entry; and 30 had combinations of the above noted reasons.

**b.10 Required number of supervision contacts per month were completed**

Table 12 provides the compliance rate for measure CYJ 12, which has to do with meeting the required number of supervision contacts per month based on the SAVRY risk rating.

**Table 11: Documentation in CORNET**

Measure	Total Applicable	# Achieved	% Achieved	# Not Achieved	% Not Achieved
CYJ 12: Required number of supervision contacts per month, as determined by overall SAVRY risk rating, were completed	333	98	29%	235	71%

**CYJ 12: Required number of supervision contacts per month were completed**

The compliance rate for this measure was **29%**. The measure was applied to all 333 record in the sample; 98 were rated achieved and 235 were rated not achieved. To receive a rating of achieved:

- a SAVRY risk assessment was completed to determine the overall risk rating,
- the YPO completed the required number, and manner, of supervision contacts based on the overall risk rating; and
- the YPO completed any additional supervision requirements if required because of the nature of the offence.

Of the 235 records rated not achieved, 225 had one or more months where the number of supervision contacts did not meet the required number, or manner, as determined by the overall risk rating; and 10 had no SAVRY completed in which to determine the overall risk rating.