

Guidance Document	Statutory Authority: Title 66 of the <u>Code of Virginia</u>
Subject: Self-Audits / Evaluations	Regulations: 6VAC35-20-61
	ACA # None

I. PURPOSE

The purpose of this guidance document is to establish uniform guidelines for scheduling and self-audits and evaluations of a juvenile residential facility, detention center or a juvenile correctional center and Virginia Juvenile Community Crime Control Act funded programs (VJCCCA).

The purpose of the self audit and self evaluation is to assist regulated facilities with determining their compliance with the applicable regulatory requirements. The self-audit is intended to serve as a compliance assistance tool although a finding of noncompliance with a health welfare or safety violation may be included in a certification audit report if during a certification audit a subsequent noncompliance is identified.

II. SCOPE

This guidance document applies to all juvenile residential facilities, juvenile correctional centers, and detention centers and VJCCCA programs.

III. DEFINITION

Board - the Virginia Board of Juvenile Justice

Director - the Director of the Department of Juvenile Justice

Detention center or secure juvenile detention center - a local, regional, or state, publicly or privately operated secure custody facility that houses individuals who are ordered to be detained pursuant to the Code of Virginia. This term does not include juvenile correctional centers

Juvenile correctional center, (JCC) - a public or private facility, operated by or under contract with the Department of Juvenile Justice, where 24-hour-per-day care is provided to residents under the direct care of the department

Juvenile residential facility - a publicly or privately operated facility or placement where 24-hour per day care is provided to residents who are separated from their legal guardians and that is required to be certified. As used in this regulation, the term includes, but is not necessarily limited to, group homes, family-oriented group homes, and halfway houses and excludes juvenile correctional centers and juvenile detention centers

Resident - An individual, who is legally placed in, committed, formally placed in, or admitted to a juvenile residential facility, juvenile correctional center or secure detention center for supervision, care, training, or treatment on a 24-hour per day basis

Written - the required information is communicated in writing. Such writing may be available in either hard copy or in electronic form

IV. PROCEDURES

A. Self Audits Generally

1. All programs and facilities subject to certification audits shall conduct at least one self audit per year in accordance with 6VAC35-20-61 of the Virginia Administrative Code.
2. The self audit shall be conducted within the 13 months following the last certification and annually thereafter. A self audit need not be conducted if a certification audit has been or is scheduled to be completed within the same year.
3. Program and facility administrators shall identify the dates to conduct a self audit by January 31st of each calendar year. The date shall be reported in writing to the Department Certification Manager.
4. The Certification Unit Manager shall provide the program administrator with a packet of information, including all applicable procedures, governing the self –audit in advance of the scheduled audit. The packet shall include a self-audit checklist of applicable regulatory requirements.
5. The self audit report shall contain the following information:
 - a. Program or facility information (name, address, administrator, contact information);
 - b. The name and contact information of the self-audit coordinator;
 - c. Date self-audit was conducted and completed (if the self-audit is conducted on multiple days, indicated on which dates which regulatory requirements were audited);
 - d. Names of the self-audit team members;
 - e. For interviews: Identification of individual (s) interviewed and how selected. (The identification may be through a unique identifier).
 - f. For record reviews: Identification of the specific records reviewed and how selected (the identification may be through a unique identifier).
 - g. The percentage of compliance with critical and noncritical regulatory requirements,

- h. A list of not applicable standards and reasons for such,
- i. Regulatory requirements found not in compliance, and
- j. A list of each category of noncompliance standards and their deficiencies
- k. Any corrective action plans and requests for variances shall be attached to the Self-Audit Report.

B. Residential Facilities

1. During the self-audit the audit team shall:
 - a. Complete the self audit checklist
 - b. Conduct a facility walkthrough
 - c. Review compliance with all action plans developed in response to previous monitoring visits or certification audits;
 - d. Review compliance with all critical regulatory requirements and other regulatory requirements issued by the Board;
 - e. Review all policies and procedures;
 - f. Observe the physical plant;
 - g. Review case files, applicable records, other relevant documentation and conduct interviews of staff and residents as appropriate.
 - h. Review the personnel files of all staff hired since certification audit.
2. Findings of noncompliance that can be readily corrected by the program or facility shall be corrected during the self-audit. The self-audit team shall document that the finding was identified and corrected.
3. In the event the self-audit identifies areas of non-compliance the program or facility administrator (or designee) shall, within 30 days, develop a corrective action plan. For each citation of non-compliance, the corrective plan of action should indicate:
 - a. The non-compliance and its cause, including contributing factors when applicable;
 - b. Resolution needed, including specific steps to correct the problem;
 - c. Time frames for each step; and
 - d. The individual(s) responsible for each step of the resolution plan.
4. The program administrator shall submit a summary of the results of the self audit to the Certification Unit Manager.
5. The program administrator shall also submit a copy of the written report to the Regional Program Manager and the Deputy Director of Operations for all Department operated juvenile correctional centers, and halfway houses.
6. In instances of non-compliance affecting the health, welfare, or safety of the residents the

Certification unit will conduct a monitoring visit within three months of the self-audit and submit a written report the results to facility or program administrator, and the Director.

C. Court Service Units

1. During the self-audit the audit team shall:
 - a. Review compliance with all action plans developed in response to previous monitoring visits or certification audits;
 - b. Review all new or re-issued policies and procedures since the last monitoring visit or certification audit;
 - c. Review compliance with all regulatory requirements issued by the Board
 - d. Review case files;
 - e. Review the personnel files of all staff hired since the last monitoring visit or certification audit.

2. If any non-compliance is found, the CSU Director or designee shall, within 30 days, develop a corrective action plan, For each citation of non-compliance, the corrective action plan should indicate:
 - a. The non-compliance and its cause, including contributing factors when applicable;
 - b. Resolution needed, including specific steps to correct the problem;
 - c. Time frames for each step; and
 - d. The individual(s) responsible for each step of the resolution plan.

3. The CSU Director shall submit a written report of the results of the monitoring visit including the corrective action plan, within 30 working days of the self audit to the Certification Unit Manger and the Regional Program Manager.

7. In instances of non-compliance affecting the health, welfare, or safety of the juveniles the Certification Unit will conduct a monitoring visit within three months of the self-audit and submit a written report the results to the CSU Director, and the Director.

D. Virginia Juvenile Community Crime Control Act - Non Residential Programs.

1. All non residential VJCCCA programs and Offices on Youth shall conduct an annual self evaluation.

2. Program administrators shall identify the dates to conduct the self evaluation, the self evaluation team leader and the members of the evaluation team by January 31st of each calendar year. The date and the names of the evaluation team members shall be reported in writing to the Department's Division of Community Programs.

3. During the self evaluations the team shall examine case records, data, personnel information and other documents as appropriate and conduct interviews to determine compliance with:
 - a. Applicable statutes
 - b. The requirements of the approved local plan

- c. Applicable regulatory requirements
 - d. Applicable Department procedures and manuals
4. The self evaluation team leader shall indicate to the program administrator or designee the results of the monitoring visit.
 5. If substantial non-compliance is found the program administrator shall submit a written corrective action plan within 30 days of the monitoring visit.
 6. The VJCCCA staff shall monitor the progress of non residential programs or Offices on Youth in correcting the identified noncompliance through subsequent documentation and monitoring visits.

V. RESPONSIBILITY

The Certification Unit in consultation with Division of Community Programs shall be responsible for updating this guidance document as needed.

VI. INTERPRETATION

The Director of Policy and Planning is responsible for interpreting this guidance document.