

**ADMINISTRATIVE POLICY
JRA POLICY 39**

SUBJECT: **SEXUALLY AGGRESSIVE/VULNERABLE YOUTH
ASSESSMENT (SAVY) AND SUPERVISION**

**INFORMATION
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**AUTHORIZING
SOURCE:** **RCW 13.40.460; RCW 13.40.470; RCW 72.05.435; WAC 388-730-
060 and Prison Rape Elimination Act (PREA) of 2003, P.L.108-79**

**EFFECTIVE
DATE:** **July 1, 2009**

APPROVED BY:

J.C. 07-09

John Clayton, Assistant Secretary
Juvenile Rehabilitation Administration

**SUNSET REVIEW
DATE:** **July 1, 2011**

39-100 **PURPOSE**

This document establishes policy and procedure for determining sleeping quarter assignments, supervision requirements, and special community placement eligibility based on an assessment of a Juvenile Rehabilitation Administration (JRA) resident's risk for sexually aggressive behavior and vulnerability to sexual victimization.

39-200 **SCOPE**

This policy applies to JRA organizational units and contracted programs.

39-300 **DEFINITIONS**

- 1. Authorized Personnel:** A person who has received superintendent/regional administrator or designee approval to supervise residents or supervises residents as a part of his/her regular work duties.
- 2. Resident:** A youth who is currently serving his/her JRA commitment or a parole revocation in a JRA operated or contracted residential facility.
- 3. Automated Client Tracking (ACT):** An electronic database utilized by JRA for client information.

4. **Separate Living Unit:** Sleeping quarters and areas used for daily living activities not specific to treatment and education programs located in a building, wing, or on a different floor which separates residential groups.
5. **Sexually Aggressive/Vulnerable Youth Assessment (SAVY):** An assessment tool developed by JRA to determine a resident's risk for sexually aggressive behavior and vulnerability to sexual victimization within JRA residential settings (Attachment A, available on the DSHS web site at http://asd.dshs.wa.gov/forms/wordforms/word/20_222.doc or through your facility/regional Treatment Coordinator).
6. **Sexually Aggressive Resident:** A resident identified through the SAVY as moderate to high risk for sexual aggression in a JRA residential setting.
7. **Sexually Vulnerable Resident:** A resident identified through the SAVY as being vulnerable to sexual victimization in a JRA residential setting.
8. **Sleeping Quarters:** Bedrooms or other rooms within a residential facility where residents are assigned to sleep.
9. **Specialized Treatment Program:** A program that addresses additional rehabilitation needs such as sexually abusive behavior treatment, drug/alcohol treatment, mental health interventions, gang intervention, gender/age specific intervention, and other programs meeting specific rehabilitation needs of residents.
10. **Unsupervised Contact:** Contact occurring outside the sight or hearing of authorized personnel for more than a reasonable period of time under the circumstances.
11. **Non-Consensual Sexual Act:** Contact of any person without his or her consent, or of a person who is unable to consent or refuse; and contact between the penis and the vagina or the penis and the anus including penetration, however slight; or contact between the mouth and the penis, vagina, or anus; or penetration of the anal or genital opening of another by a hand, finger, or other object.
12. **Abusive Sexual Contact:** Contact of any person without his or her consent, or of a person who is unable to consent or refuse; and intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks of any person. Excludes incidents in which the intent of the sexual contact is to harm or debilitate rather than sexually exploit.

39-400

POLICY

1. **JRA has “zero tolerance” for resident on resident sexual violence, such as non-consensual sexual acts and abusive sexual acts.**
2. **JRA must assess all residents for risk of sexual aggression and sexual vulnerability.**
 - A. Staff must use the Sexually Aggressive/Vulnerable Youth Assessment (SAVY), in conjunction with available relevant records, to assess each resident’s risk for sexually aggressive behavior and vulnerability to sexual victimization.
 - B. Staff must complete an initial assessment of all residents for risk of sexual aggression and sexual vulnerability within 30 days of commitment
 - C. Staff should update the SAVY within three days of knowing of any significant change in behavior or receipt of new documents related to sexual aggression or sexual victimization.
 - D. Staff of the receiving JRA residential facility should update each new resident’s most recent SAVY within 30 days of transfer from a different JRA residential facility.
 - E. Authorized personnel will familiarize themselves with the SAVY results and associated restrictions of residents under their supervision and provide the supervision required.
 - F. Staff may consider additional behaviors or information to determine sleeping quarters and/or supervision requirements if the SAVY does not identify the youth as vulnerable or aggressive. This information should be documented in the “Significant Considerations” section of the SAVY.
3. **JRA must follow mandatory reporting requirements if during the SAVY interview a resident discloses sexual abuse/assault that has not previously been reported (Policy 34, “Reporting of Youth Abuse and Neglect” and Chapter 26.44 RCW).**
4. **Resident sleeping quarter restrictions are required prior to completion of the SAVY.**

These restrictions are required prior to completion of the initial SAVY or an updated SAVY as required in 39-400(2)(B) and 39-400(2)(C) of this policy.

- A. A resident should remain in single occupancy sleeping quarters until the SAVY has been completed; or
- B. A resident may be assigned to multiple occupancy sleeping quarters if those sleeping quarters are regularly monitored by staff via visual surveillance equipment or by staff checks consistent with level of risk and circumstances.

5. Resident sleeping quarter restrictions are required to protect sexually vulnerable residents from sexually aggressive residents.

- A. Staff should avoid assigning a sexually aggressive resident to the same multiple occupancy sleeping quarters as a sexually vulnerable resident whenever possible.
- B. Staff may assign a sexually aggressive resident to the same multiple occupancy sleeping quarters as a sexually vulnerable resident only if those multiple occupancy sleeping quarters are regularly monitored by staff via visual surveillance equipment or by staff checks consistent with level of risk and circumstances.
- C. Staff must prohibit and take reasonable steps to prevent a sexually aggressive resident from entering any occupied sleeping quarters other than the one to which he/she is assigned, unless accompanied by authorized personnel.

6. Reasonable steps must be taken to minimize unsupervised contact between a sexually aggressive resident and a sexually vulnerable resident.

7. Special placement restrictions are required for sexually aggressive residents and sexually vulnerable residents who are being considered for placement in a residential facility with youth under the jurisdiction of the DSHS Children's Administration.

- A. A sexually aggressive resident must not be placed in a facility with youth under the jurisdiction of the Children's Administration unless:
 - (1) Placed in a separate living unit solely for juveniles currently under the jurisdiction of JRA; or
 - (2) Placed in a program that contracts specifically for the provision of services to sexually aggressive youth.
- B. A resident under commitment to JRA for a class A felony must not be placed in a facility with youth under the jurisdiction of the Children's Administration unless:
 - (1) Placed in a separate living unit solely for juveniles currently under the jurisdiction of JRA;
 - (2) Placed in a community facility that is a specialized treatment program and the resident is not a sexually aggressive resident; or

(3) Placed in a community facility that is a specialized treatment program, housing one or more sexually aggressive youth and the resident is not a sexually vulnerable resident.

8. Staff must provide SAVY results to the Children's Administration prior to a resident's release or discharge from commitment if it is known or anticipated by JRA the resident will require residential services from the Children's Administration.

Whenever possible, this notification should at least 60 days prior to release.

9. Staff must provide SAVY results to the Children's Administration as soon as possible when it is known or anticipated by JRA that a youth on parole will require residential services from the Children's Administration.

10. SAVY results may be shared consistent with Policy 29, Confidentiality And Release Of Juvenile Records And Operations Records.

11. Superintendents/Regional Administrators must establish and implement local procedures to comply with resident sleeping quarter restrictions, including supervision requirements.

39-500

PROCEDURE

1. To complete the initial JRA Sexually Aggressive/Vulnerable Youth Assessment (SAVY).

Action by:

Action:

Residential Case
Manager/Designee

1. Review relevant Case File material prior to completing the initial SAVY within 30 days of commitment to JRA.
2. Complete SAVY electronically in Automated Client Tracking (ACT).
3. Submit completed SAVY to the PM/designee electronically in ACT for review & approval.
4. Print hard copy of authorized SAVY; have resident sign the "Youth Signature Section", and submit signed form to PM/designee.
5. Document most recent SAVY results in all transfer and release Record of Official Actions (ROA).
6. Document SAVY results in the living unit record.

Program Manager/
Designee

1. Review and authorize the completed SAVY electronically in ACT.
2. Ensure a hard copy of the authorized/signed SAVY is placed in Section VI of the resident's Case File.

2. To complete the SAVY due to a significant change in behavior or receipt of new documentation related to sexual aggression or sexual victimization.

Action by:	Action:
Residential Case Manager/Designee	<ol style="list-style-type: none">1. Complete an updated SAVY within three days of behavioral change requiring reassessment, or receipt of new documents relevant to SAVY scoring.2. Review Case File material, including documentation related to the behavioral change to determine SAVY level and submit an updated SAVY electronically in ACT.3. Submit completed SAVY to the PM/designee electronically in ACT.4. Print hard copy of authorized SAVY; have resident sign the "Youth Signature Section", and submit signed form to PM/designee.5. Document most recent SAVY results in all transfer and release Record of Official Actions (ROA).6. Document updated SAVY results in the living unit record.
Program Manager/Designee	<ol style="list-style-type: none">1. Review the completed SAVY electronically in ACT.2. Ensure a hard copy of the updated authorized/signed SAVY is placed in Section VI of the resident's Case File

3. To meet SAVY review/completion requirements by a receiving JRA residential facility, following a transfer from a different JRA residential facility.

Action by:	Action:
Residential Case Manager/Designee	<ol style="list-style-type: none">1. Review relevant Case File material prior to completing a review of the current SAVY within 30 days of transfer from a different JRA residential facility.2. Complete an updated SAVY electronically in ACT.3. Submit completed SAVY to the PM/designee electronically in ACT.4. Print hard copy of authorized SAVY; have resident sign the "Youth Signature Section", and submit signed form to PM/designee.5. Document most recent SAVY results in all transfer and release Record of Official Actions (ROA).6. Document updated SAVY results in the living unit record.

- | | |
|------------------------------|---|
| Program Manager/
Designee | <ol style="list-style-type: none">1. Review the completed SAVY electronically in ACT.2. Ensure a hard copy of the updated authorized/signed SAVY is placed in Section VI of the resident's Case File |
|------------------------------|---|

4. To assign sleeping quarters based on SAVY results.

- | Action by: | Action: |
|-------------------|--|
| Living Unit Staff | <ol style="list-style-type: none">1. Inform sexually aggressive residents of rules related to sleeping quarter restrictions.2. Ensure sexually aggressive and sexually vulnerable residents are assigned sleeping quarters as required by sections 39-400 (4) and (5) of this policy and consistent with local procedures.3. Document sleeping quarter assignment in the living unit record. |

5. To avoid unsupervised contact between sexually aggressive and sexually vulnerable residents.

- | Action by: | Action: |
|--------------------------------------|---|
| Residential Case
Manager/Designee | <ol style="list-style-type: none">1. Inform other authorized personnel of a resident's SAVY restrictions and supervisory requirements.2. Document the restrictions and supervisory requirements consistent with local procedures in the living unit record and transfer ROA. |
| Authorized Personnel | <ol style="list-style-type: none">1. Review the SAVY and provide for the associated restrictions and supervisory requirements for residents under your supervision. |

6. To prohibit and prevent any sexually aggressive resident from entering any occupied sleeping quarters other than the one to which they are assigned, unless accompanied by authorized personnel.

- | Action by: | Action: |
|--------------------------------------|--|
| Residential Case
Manager/Designee | <ol style="list-style-type: none">1. Inform sexually aggressive residents of rules related to sleeping quarter restrictions.2. Inform other authorized personnel of a resident's SAVY restrictions and supervisory requirements.3. Document the restrictions and supervisory requirements consistent with local procedures in the living unit record and transfer ROA. |
| Authorized Personnel | <ol style="list-style-type: none">1. Review the SAVY and provide for the associated |

restrictions and supervisory requirements for residents under your supervision.

7. To notify the Children's Administration of resident's SAVY results.

Action by:	Action:
Residential Case Manager/Designee	1. Review and forward a copy of the most recent SAVY to the appropriate regional Children's Administration office, at least 60 days when possible, prior to release for all residents who based on JRA's knowledge may require residential services from the Children's Administration.
Community Case Manager/Designee	1. Review and forward a copy of the most recent SAVY to the appropriate Children's Administration regional office as soon as possible when a youth on parole is in need of residential services from the Children's Administration.

8. To provide JRA residential facility personnel with updated information for youth who are returned to a JRA residential facility for a parole revocation.

Action by:	Action:
Community Case Manager/Designee	1. Review available relevant information in Case File and ACT. 2. If any updated information is known that would affect a SAVY score or classification that information will be forwarded to the receiving facility.
JR Residential Case Manager/Designee	1. Review relevant available Case File material prior to completing a review of the current SAVY within 30 days of intake of a youth serving a parole revocation. 2. Complete an updated SAVY in ACT. 3. Submit completed SAVY to the PM/CFA/designee electronically in ACT. 4. Print hard copy of authorized SAVY; have resident sign the "Youth Signature Section", and submit signed form to PM/designee. 5. Document most recent SAVY results in all transfer and release Record of Official Actions (ROA). 6. Document updated SAVY results in the living unit record.

Program Manager/
Designee or
Community Facility
Administrator/
Designee

1. Review the completed SAVY in ACT.
2. Ensure a hard copy of the updated and signed SAVY is placed in Section VI of the resident's Case File.

Attachment A: "Sexually Aggressive/Vulnerable Youth Assessment" (available on the DSHS web site at http://asd.dshs.wa.gov/forms/wordforms/word/20_222.doc or through your facility/regional Treatment Coordinator).

Sexually Aggressive / Vulnerable Youth Assessment

<input type="checkbox"/> Sexually Aggressive
<input type="checkbox"/> Sexually Vulnerable
<input type="checkbox"/> Neither
<input type="checkbox"/> Both
<input type="checkbox"/> Significant Consideration

BACKGROUND INFORMATION

YOUTH'S NAME	DATE OF BIRTH (DOB)	JRA NUMBER
COMMITTING OFFENSE(S)	CURRENT HEIGHT	
	CURRENT WEIGHT	
	GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	
DOCUMENTED PHYSICAL DISABILITIES <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify:		
DOCUMENTED DEVELOPMENTAL DISABILITIES <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify:		
DOCUMENTED MENTAL HEALTH DIAGNOSIS <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify:		

SEXUAL AGGRESSION ITEMS: TO BE COMPLETED AFTER A CASE FILE REVIEW.

1. Is there documented history of **persistent sexualized behavior** (adjudicated or non-adjudicated) **toward peers within the last three (3) years?**

Yes No; if yes, include date(s):

Home	_____ (+2)	_____ (0)	(Within a private family household where the youth was living at the time.)
Residential	_____ (+2)	_____ (0)	(Any professionally staffed or state licensed residential setting where the youth was living, such as foster homes, group homes, detention centers, institutions, work camps, etc.)
Community	_____ (+2)	_____ (0)	(Any setting within the general community which does not meet the criteria above, such as the victim's home (if different than that of the youth being screened), public parks, school property, community centers, etc.)

Mark the "Yes" box if there is any form of written documentation in the youth's case file indicating that the youth has engaged in persistent sexualized behavior with or against a peer age person within three (3) years of the current screening date (this may include, but is not limited to, case notes, professional evaluations, treatment reports/summaries, Child Protective Services (CPS) reports, police reports/statements, etc.). "Peer age" is defined as an individual whose age falls within 24 months (older or younger) from that of the youth being screened. This item should be endorsed whether or not the documented behavior was adjudicated within the court system. If the "Yes" box is checked, assign two (2) points next to the setting in which the sexual behavior occurred. If sexual behavior occurred in more than one of the categories listed, mark two (2) points for each applicable category. This provides for a maximum of six (6) possible points. The categories are defined above, in brackets.

2. Is there documented history of **sexual aggression or sexual assault** (adjudicated or non-adjudicated) toward peers within the last three (3) years?

Yes No; if yes, include date(s):

Home _____ (+3) _____ (0) (Within a private family household where the youth was living at the time.)

Residential _____ (+3) _____ (0) (Any professionally staffed or state licensed residential setting where the youth was living, such as foster homes, group homes, detention centers, institutions, work camps, etc.)

Community _____ (+3) _____ (0) (Any setting within the general community which does not meet the criteria above, such as the victim's home (if different than that of the youth being screened), public parks, school property, community centers, etc.)

Mark the "Yes" box if there is any form of written documentation in the youth's case file indicating that the youth has perpetrated sexual aggression or a sexual assault against a peer age person within three (3) years of the current screening date (this may include, but is not limited to, case notes, professional evaluations, treatment reports/summaries, Child Protective Services (CPS) reports, police reports/statements, etc.). "Peer age" is defined as an individual whose age falls within 24 months (older or younger) from that of the youth being screened. This item should be endorsed whether or not the documented assault was adjudicated within the court system. If the "Yes" box is checked, assign three (3) points next to the setting in which the sexual aggression or sexual assault occurred. If sexually aggressive incidents or sexual assaults occurred in more than one of the categories listed, mark three (3) points for each applicable category. This provides for a maximum of nine (9) possible points. The categories are defined above, in brackets.

3. Is there documented history of **sexual aggression or sexual assault** toward victim(s) two or more years older than him/herself?

Yes No _____ (+1) _____ (0)

Mark the "Yes" box and assign one (1) point if there is a documented history of any sexual aggression or sexual assault against one or more victim(s) who is at least 24 months older than the youth.

4. Are there adjudicated **sexual assaults** against more than one victim?

Yes No _____ (+1) _____ (0)

Mark the "Yes" box and assign one (1) point only if the youth has been adjudicated for more than one sexual assault, and these adjudications were for offenses that were perpetrated against at least two (2) different individuals (Note: multiple adjudications for offenses perpetrated against the same victim would not be endorsed here).

5. Is there documented history of continued illegal sexual behavior despite legal and/or therapeutic intervention?

Yes No _____ (+3) _____ (0)

Mark the "Yes" box and assign three (3) points if there is documentation indicating that the youth continued to engage in illegal sexual behavior even after the implementation of legal and/or therapeutic intervention (arrest, evaluation, treatment, incarceration, etc.).

6. Is there documented history of the following:

Major Mental Health Issue(s): Yes No _____ (+1) _____ (0)

Major School Behavior Problem(s): Yes No _____ (+1) _____ (0)

If yes, include the dates of the last two suspensions or the last expulsion.

Suspensions: _____ and _____; Expulsion: _____

Mark the "Yes" box and assign one (1) point to each applicable item within this category for a possible total of two (2) points maximum. If you mark the "Yes," you must include the required date(s). The criteria to endorse each item is as follows: Major Mental Health Issue(s), the youth must have a documented DSM IV diagnosis from a licensed mental health professional which currently requires the youth to take one or more psychotropic medications to adequately manage the disorder; and Major School Behavior Problem(s), within the last three (3) school quarters/semesters attended, there must be documentation indicating either of the following: a) two or more school suspensions of at least one full day; and/or b) one or more school expulsion(s).

OTHER SIGNIFICANT CONSIDERATIONS

Total Sexual Aggression score: _____

Total the scores of Items 1 through 6 above, then mark the appropriate sexual aggression level based on the points assigned.

LEVEL OF SEXUAL AGGRESSION

- Minimal (0 - 1 point)
- Low (2 - 4 points)
- Moderate (5 - 6 points)
- High (7+ points)

Note: If the youth scores into the moderate or high range of sexual aggression (i.e., five (5) points or more) designate the youth as "sexually aggressive" by marking the box at top of Page 1.

SEXUAL VULNERABILITY ITEMS: DETERMINED AFTER A CASE FILE REVIEW AND INTERVIEW WITH THE YOUTH.

7. Is there documented history of being sexually abused within the last three (3) years?

Yes No _____ (+3) _____ (0)

If yes, when: _____ where: _____

by whom: _____

Mark the "Yes" box and assign three (3) points if there is any form of written documentation indicating that the youth has been a victim of sexual abuse within the last three (3) years, then briefly describe the circumstances of the abuse as requested.

8. Is there documented history of being physically abused within the last three (3) years?

Yes No _____ (+1) _____ (0)

If yes, when: _____ where: _____

by whom: _____

Mark the "Yes" box and assign one (1) point if there is any form of written documentation indicating that the youth has been a victim of physical abuse (**not of a sexual nature**) within the last three (3) years, and include a brief description where requested.

9. Is there documented history of routine inability to physically protect self within the last three (3) years?

Yes No _____ (+1) _____ (0)

If yes, when: _____ where: _____

by whom: _____

Mark the "Yes" box and assign one (1) point if there is any documentation of the youth being routinely unable or unwilling to protect him/herself from physical harm perpetrated by others (being bullied, for example). Include brief specifics where requested.

10. Is there documented history of routine exploitation by peers within the last three (3) years?

Yes No _____ (+1) _____ (0)

If yes, when: _____

describe: _____

Mark the "Yes" box and assign one (1) point if there is any documentation of the youth being regularly exploited by his/her peers in emotional, social, or other non-physical ways within the last three (3) years (for example, being manipulated into giving away personal property on a regular basis, doing favors for others without any reciprocity, etc.). If yes, include brief descriptions where requested.

11. Is there a current significant impairment that impacts peer interactions?

Yes No _____ (+1) _____ (0)

If yes, please specify: _____

Mark the "Yes" box and assign one (1) point if the youth currently displays any significant impairment in social skills, cognitive abilities, etc., that negatively impacts his/her peer interactions in such a way as to put him/her at an apparent disadvantage within his/her peer group. This could include, but is not limited to developmental disabilities, physical disabilities, a history of excessive isolation from peer group, mental health issues, etc. If checked, include brief specifics where requested.

YOUTH SIGNATURE SECTION

I was asked if I have ever been a victim of sexual abuse and I answered: Yes No

I was asked if I have ever been a victim of physical abuse and I answered: Yes No

If youth answers "Yes," please summarize briefly what was disclosed (i.e., when and where the abuse occurred, by whom, where, etc.):

IF YOUTH REFUSES TO ANSWER, INDICATE ON SIGNATURE LINE.

Youth's signature: _____ Date: _____

NOTE: It is important that you ask the youth if she/he has ever been a victim of sexual abuse and/or physical abuse, record his/her answer, then have him/her sign and date this item where indicated. This item is not scored; it is included to provide evidence that you asked the youth about this issue in the process of completing the screen, regardless of whether or not there was prior documentation in his/her file. If no such prior documentation exists and the youth indicates he/she has been sexually and/or physically abused, complete the appropriate documentation and the CPS referral, then mark and score the assessment accordingly.

OTHER SIGNIFICANT CONSIDERATIONS

<p>Total Sexual Vulnerability score: _____</p> <p>Total the scores of Items 7 through 11 above, then mark the appropriate sexual vulnerability level based on the points assigned.</p>	<p>SEXUALLY VULNERABLE?</p> <p><input type="checkbox"/> Yes (4+ points)</p> <p><input type="checkbox"/> No (0 - 3 points)</p>	<p>Note: If the point total is four (4) or higher, designate the youth as "sexually vulnerable" by marking the appropriate box at the top of Page 1.</p>
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COMPLETED BY: _____ DATE _____	APPROVED BY: _____ DATE _____
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FACILITY'S NAME _____

This signature box can be used for a youth returning to residence following a parole revocation or anytime a subsequent review is needed and the information has not changed. Following a subsequent review, sign and date the form.

SUBSEQUENT REVIEW BY: _____ DATE _____	APPROVEDBY: _____ DATE _____
SUBSEQUENT REVIEW BY: _____ DATE _____	APPROVEDBY: _____ DATE _____
SUBSEQUENT REVIEW BY: _____ DATE _____	APPROVEDBY: _____ DATE _____
SUBSEQUENT REVIEW BY: _____ DATE _____	APPROVEDBY: _____ DATE _____
SUBSEQUENT REVIEW BY: _____ DATE _____	APPROVEDBY: _____ DATE _____
SUBSEQUENT REVIEW BY: _____ DATE _____	APPROVEDBY: _____ DATE _____

CC: Original to case file, Section IV, Residential