

<p>Milwaukee County Department of Health and Human Services Division of Youth and Family Services</p> <p>POLICY & PROCEDURE</p>	<p>Original Date Issued: 09/01/2018</p> <hr/> <p>Last Revision Date: 01/01/2021</p>	<p>Current Review Date: 09/03/2020</p> <p>Current Review By: DB</p>	<p>Section: AFTERCARE</p>	<p>Policy No: 063</p>	<p>Pages: Page 1 of 4 (5 Attachments)</p>
<p><input checked="" type="checkbox"/> Division of Youth and Family Services (DYFS)</p> <p><input checked="" type="checkbox"/> Detention Center</p> <p><input type="checkbox"/> DYFS Services Network</p> <p><input checked="" type="checkbox"/> Purchase of Service Agencies</p>	<p>Current Effective Date: 01/01/2021</p>	<p>Subject: Aftercare Youth Policy: Conduct and the 72-Hour Hold Process</p>			

I. Policy

It is the policy of Division of Youth and Family Services (DYFS) that the delivery of our Aftercare programming and services is provided consistently and effectively to all youth in the program. DYFS has the right to hold a youth in secure custody as a means of both, providing protection to the community and allowing time to investigate the current allegations and/or violation(s) of supervision presented to the assigned Human Service Worker (HSW) and/or Human Service Worker Supervisor (HSWS) regarding the youth.

In the event that an Aftercare Youth's conduct reaches the threshold requiring secure custody, the purpose of this policy is to provide the necessary guidance to ensure DYFS will respond with a formal process that will address the conduct and hold youth accountable in a manner consistent with applicable statute, department guidelines and best practices that uphold community safety.

II. Scope

Aftercare youth are subject to be held up to a 72 hours per incident for the duration of their aftercare supervision.

III. Definitions

A. 72-Hour Hold

In Aftercare programming, the 72-hour hold is the apprehension request that is also referred to as a "warrant or capias" for the youth.

Wisconsin State Legislature statute [938.355\(6d\)\(b\)2g](#) authorizes the assigned aftercare HSW to impose a short term detention only if the court has explained the conditions of aftercare supervision to the youth or the youth has signed form *JD-1749 State of Wisconsin Acknowledgement of Dispositional Conditions and Sanctions (Delinquency/JIPS)* acknowledging that s/he has read or has had them read to s/he prior to the alleged violation or allegation. *(Please refer to Attachment A).*

Youth on aftercare supervision may be held in a youth detention facility, youth portion of a county jail, or placed in non-secure custody for a maximum of 72-hours. If a youth exceeds 72-hours per [s. 938.355\(6d\)\(d\)](#) the youth is entitled to a court hearing to determine whether to continue to hold the youth. The court proceeding must be conducted within 24 hours after the decision was made to continue the hold, excluding Saturday, Sunday, and legal holidays per [s. 938.21\(1\)\(a\)](#).

B. Capias Request/Withdrawal

Wisconsin State Legislature statute 938.19(1)(d)6 authorizes the assigned HSW to request a capias be issued by the court if a youth has violated conditions of court ordered supervision, community supervision, or aftercare supervision. *(Please refer to Attachment B: Capias Request/Withdrawal Template).*

C. Detainer

Wisconsin State Legislature statute 976.05 authorizes the assigned HSW to file a notification with the institution in which a youth is serving a sentence, advising the facility the youth is wanted to face consequences or is pending criminal charges in another jurisdiction. *(Please refer to Attachment C: Detainer Form).*

IV. Reason to Impose

- A. If youth are noncompliant with two (2) or more rules of supervision within a week timespan, and the behaviors were addressed with alternative measures in the community and there are no signs of progress.
- B. If a youth has been identified as an imminent danger to themselves or others.
- C. Arrest resulting in a referral for formal charges, and only if the youth was apprehended by law enforcement and released to a non-secure placement pending intake.
- D. Youth is incarcerated in an adult facility pending adult charges (Detainer will be filed to avoid release).
- E. If the youth leaves their assigned placement without permission and has not reached out to the assigned HSW or monitoring agency for a maximum of three (3) hours. A Capias Request/Withdrawal *(Attachment B)* will be filed immediately following the 3 hours in addition to the 72-hour hold.

V. Procedure – 72-Hour Hold

A. Human Service Worker Responsibilities

The following steps (#1-3) should always be submitted separately.

1. Complete the following forms:
 - JD-1770 Short Term Detention *(Please refer to Attachment D)*
 - DYFS Request for Short Term Detention *(Please refer to Attachment E) (Include: sequence of events, how behaviors have been addressed for all violations including responsiveness, and what services will be in place during 72-hour hold)*
2. Submit completed documents to assigned HSW Supervisor or coverage for review & approval
3. Submit the following signed forms to assigned Section Manager:
 - JD-1770 Short Term Detention *(Attachment D)*
 - DYFS Request for Short Term Detention) *(Attachment E)*
 - JD-1749 State of Wisconsin Acknowledgement of Dispositional Conditions and Sanctions *(Delinquency/JIPS) (Attachment A)*

B. Human Service Worker Supervisor Responsibilities

1. Review, approve and/or sign
 - JD 1770 Short Team Detention form *(Attachment D)*

- DYFS Request for Short Term Detention (*Attachment E*)
 - JD-1749 State of Wisconsin Acknowledgement of Dispositional Conditions and Sanctions (Delinquency/JIPS) (*Attachment A*)
2. Submit completed forms to the assigned Section Manager or coverage.

✚ Capias should only accompany a 72-hour hold request in the event the youth is missing or refuses to turn themselves in at the time the assigned HSW has advised them too.

C. Section Manager Responsibilities

1. Review, approved and/or sign:
 - JD 1770 Short Term Detention form (*Attachment D*)
 - DYFS Request for Short Term Detention (*Attachment E*)
 - JD-1749 State of Wisconsin Acknowledgement of Dispositional Conditions and Sanctions (Delinquency/JIPS) (*Attachment A*)
2. Submit the completed document via DocuSign to:
 - CCCcustodyintake@milwaukeecountywi.gov
 - Assigned HSW
 - Assign HSWS
 - Co-Section Manager
 - DYFS Community Intervention Specialist
 - Public Defender Office: milwjuveclericals@opd.wi.gov
 - Assistant District Attorney Officer: milwdelqref@da.wi.gov

D. Milwaukee County Youth Detention (DT) Center Youth Correctional Officer Supervisors (YCOS)

1. File the 72-hour hold in a centralized location.
2. Complete a DRAI for a youth who **exceeds 72-hours** in DT
3. Schedule a placement review hearing for youth that have **exceeded 72-hour** in Milwaukee County Secure Detention Facility.

✚ If a youth is placed on a **non-secure 72-hour hold** and it exceeds 72-hours in a placement outside of secure detention, the assigned HSW will work with the assigned Public Defender to schedule the placement hearing.

VI. Procedure – Capias Request/Withdrawal

A. Human Service Worker Responsibilities

- a. Complete the DYFS Capias Request/Withdrawal (*Attachment B*) located on H:\DYFS Documents\AFTERCARE\Detention and Apprehension Forms (*accurate/active case numbers)
- b. Include the violations accrued, interventions, and when the youth last made contact with the assigned aftercare HSW and/or monitoring agency.
- c. Submit the completed DYFS Capias Request/Withdrawal to the assigned supervisor or coverage in a word document.

✚ If a youth reports for the 72-hour hold cancel the Capias by repeating the same steps

B. Human Service Worker Supervisor Responsibilities

- a. Review, approve and sign the DYFS Capias Request/Withdrawal (*Attachment B*)
- b. Submit the completed document to the assigned Section Manager via DocuSign.

C. Section Manager Responsibilities

- a. Review, approve and sign the Completed DYFS Capias Request/Withdrawal (*Attachment B*)
- b. Submit the signed and approved Capias Request/Withdrawal to:
 - Assigned HSW
 - DYFSefile@milwaukeecountywi.gov
 - Assigned HSW Aftercare Supervisor
 - Section Managers
 - Co-Deputy Administrator

D. DYFS Assigned E-File Clerical Staff

- a. E-File the completed DYFS Capias Request/Withdrawal for court approval
- b. Send E-file confirmation email to assigned HSW and Supervisor

VII. Procedure – Detainer

A. Human Service Worker Responsibilities

1. Complete the DYFS Detainer (*Attachment C*)
2. Submit the completed DYFS Detainer to your immediate supervisor for review and approval.

B. Human Service Worker Supervisor Responsibilities

1. Review and approve the DYFS Detainer (*Attachment C*)
2. Submit the approved Detainer to the assigned Section Manager via DocuSign

C. Section Manager Responsibilities

1. Review, approve and sign the DYFS Detainer (*Attachment C*)
2. Submit the completed document to:
 - Public Defender Office: milwjuveclericals@opd.wi.gov
 - Assistant District Attorney Officer: milwdelqref@da.wi.gov
 - Sheriff Control Center: Estelle.Smith@milwaukeecountywi.gov
 - DYFS Community Intervention Specialist

- ✚ Once the detainer has been submitted to the facility the youth is awaiting charges or release. The assigned aftercare HSW is responsible for submitting a Capias Withdrawal by following (V.) Procedure (C.) Capias Request/Withdrawal.

Reviewed & Approved By: Wanda S. Morgan for Mark Mertens
Mark Mertens, Division Administrator

IN THE INTEREST OF

**Acknowledgment of
Dispositional Conditions
and Sanctions
(Delinquency/JIPS)**

Name

Date of Birth

Case No. _____

1. I am the juvenile. The court has imposed a Dispositional Order in this case.
2. I have read have had read to me the conditions of that Dispositional Order.
3. I understand the conditions of the Order I must obey.
4. I understand that if I violate the order, the court could order one or more of the following sanctions:
 - Place me in a juvenile detention facility or the juvenile portion of a county jail for up to ten days with educational services. *(delinquency only)*
 - Place me in nonsecure custody for up to ten days with educational services.
 - Suspend or limit the use of my operating privilege (driver's license) or any Department of Natural Resources approval for a period of up to three years.
 - Detain me in my home or current residence for up to 30 days under rules of supervision, including electronic monitoring.
 - Perform up to 25 hours without pay in a supervised work program or other community service.
5. I understand that if my case worker is investigating whether I violated the order, my case worker may, without a hearing, place me for up to 72 hours in:
 - A juvenile detention facility. *(delinquency only)*
 - The juvenile portion of a county jail. *(delinquency only)*
 - Nonsecure custody.
6. I understand that if I violate the order or my after care status, my case worker may, without a hearing, place me for up to 72 hours in:
 - A juvenile detention facility. *(delinquency only)*
 - The juvenile portion of a county jail. *(delinquency only)*
 - Nonsecure custody.

Signature of Case Worker

Signature of Juvenile

Name Printed or Typed

Name Printed or Typed

Address

Address

Email Address Telephone Number

Email Address

Date State Bar No. (if any)

Telephone Number Date

DISTRIBUTION:

1. Juvenile Clerk
2. Case Worker
3. Juvenile/Juvenile's attorney
4. Juvenile's parents



MILWAUKEE COUNTY DEPARTMENT OF HUMAN SERVICES
DIVISION OF YOUTH AND FAMILY SERVICES

CAPIAS REQUEST/WITHDRAWAL

Date: Enter Today's Date

Request for Issuance of Capias: Request for Withdrawal of Capias

Name: Last Name, First Name, Middle Name
(Last, First, Middle)

Sex: _____ Race: _____ D.O.B.: _____ Height: _____ Weight: _____ Hair _____

Distinguishing Marks: _____

CCAP Number: _____ Branch: _____

Juvenile ID: _____ Probation Number: _____

Address: Street, City, State, Zipcode
(Street, City, State, Zip)

The original Offense/Statute number/Description is: _____

Offense Type is: Misdemeanor Felony

The person has been reported: As a Runaway from Placement Other (See Below)

Explain

Transport to the Detention Pending a 72-hour Hold/Administrative Hearing

Human Service Worker

Human Service Worker Supervisor

Section Manager or Designee



DYFS | Division of Youth & Family Services

A Division of the Department of Health & Human Services

Mary Jo Meyers • Director DHHS
Mark Mertens • Division Administrator DYFS

Milwaukee County Juvenile Detention Detainer

DATE: Click or tap to enter a date.

ISSUE **CANCEL**

YOUTH'S NAME: Click or tap here to enter text.		
DOB: Click or tap here to enter text.	RACE:	GENDER:
CASE #	OFFENSE	

Please hold the above-named Juvenile for the Milwaukee County Detention Center. Return is Mandatory after charges are satisfied, unless detainer is cancelled.

Signature (for Section Manager or Superintendent)	Date:
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IN THE INTEREST OF

Short Term Detention -
 Pending Investigation
 As a Consequence

Name

Date of Birth

Case No. _____

1. The juvenile is subject to a current dispositional order having been adjudicated: delinquent JIPS
for _____

2. The dispositional conditions and possible sanctions, and the authority to take the juvenile into custody and hold without a hearing for up to 72 hours:

- were explained to the juvenile by the court at the dispositional hearing.
- were acknowledged in writing by the juvenile.

3. I believe the juvenile:

- may have violated one or more of the terms of the dispositional order and should be taken into custody while the alleged violation and the appropriateness of a sanction is being investigated.
- has violated a condition of the dispositional order.
- is on aftercare and may have violated a condition of the aftercare status and should be taken into custody while the alleged violation and the appropriateness of revoking the juvenile's aftercare status is being investigated.
- has violated a condition of the aftercare order.

4. The juvenile being held as a consequence has been advised that he or she has the right to make a written or oral statement concerning the possible placement.

- The juvenile has declined to make a statement.
- The juvenile's statement is attached.

5. The juvenile is to be taken into custody and held as follows:

- in juvenile detention (*delinquency only*) at _____
- in the juvenile portion of the county jail (*delinquency only*) at _____
- in non-secure custody (*delinquency or JIPS*) at _____

6. Transportation to the facility shall be provided by _____
Return transportation shall be provided by _____

7. The juvenile was taken into custody on _____ at _____ a.m. p.m.
Date Time

and the juvenile must be released 72 hours after this date and time unless the court conducts a hearing and orders the hold continued.

Distribution:

- 1. Original - Court
- 2. Case Worker
- 3. Facility
- 4. Facility Transporter

Signature

Name Printed or Typed

Date

Request for Short Term Detention
MILWAUKEE COUNTY DIVISION OF YOUTH AND FAMILY SERVICES

The below youth is a subject to the provisions of a short-term detention for either investigation or consequence. The juvenile was advised of possible short-term detention.

Youth's Name

Date of Birth

Youth's Address

Juvenile ID

Program

CCAP Number

Non-Compliance Violations (Check All that Apply)

- | | | | |
|--------------------------|---|--------------------------|--|
| <input type="checkbox"/> | Failure to meet with probation | <input type="checkbox"/> | Failure to meet monitoring requirements of program |
| <input type="checkbox"/> | Failure to participate in program activities | <input type="checkbox"/> | Failure to keep curfew |
| <input type="checkbox"/> | Failure to attend school | <input type="checkbox"/> | Failure to obey school rules |
| <input type="checkbox"/> | Possession of any weapon | <input type="checkbox"/> | Use of alcohol/drugs |
| <input type="checkbox"/> | Unsupervised contacted with accomplices and individuals on probation/parole | <input type="checkbox"/> | Failure to cooperate with court ordered conditions |
| | | <input type="checkbox"/> | Other |

Provide details regarding the above:

Describe reasonable attempts that have been made to correct the above non-compliance:

Team Response Prior to Detention Release

HSW Supervisor

Date

Section Manager

Date

HSW Staff

Date