Monitoring and Quality Improvement Standards for AMIkids Prevention Programs FY 2018-2019

Office of Program Accountability
Promoting continuous improvement and accountability in juvenile justice programs and services.

The Department acknowledges the Monitoring and Quality Improvement (MQI) Standards are built upon Department rules, policies, procedures and manuals. As we continue to improve and refine our competitive procurement process, there may be instances in which requirements negotiated between the Provider and the Department exceed the MQI Standards. In instances where contractual obligations surpass requirement(s) set forth in the published Standards, the contract requirement will prevail.
### Standard 1: Management Accountability

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* The Department has identified certain key critical indicators. These indicators represent critical areas requiring immediate attention if a program operates below Department standards. A program must therefore achieve at least a Satisfactory Compliance rating in each of these indicators. Failure to do so will result in a program alert form being completed and distributed to the appropriate program area.
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These standards reflect an overview of general Prevention. Contract requirements may vary and therefore a review of individual contracts and amendments should be reviewed and taken into consideration prior to annual monitoring.

* The Department has identified certain key critical indicators. These indicators represent critical areas requiring immediate attention if a program operates below Department standards. A program must therefore achieve at least a Satisfactory Compliance rating in each of these indicators. Failure to do so will result in a program alert form being completed and distributed to the appropriate program area.
1.01 Initial Background Screening

Background screening is conducted for all Department employees and volunteers and all contracted provider and grant recipient employees, volunteers, mentors, and interns with access to youth. A contract provider may hire an employee to a position that requires background screening before the screening process is completed, but only for training and orientation purposes. However, these employees may not have contact with youth or confidential youth records until the screening is completed, the rating is eligible, and the employee demonstrates that he or she exhibits no behaviors that warrant the denial or termination of employment. An Annual Affidavit of Compliance with Level 2 Screening Standards is completed annually.

— CRITICAL —

Guidelines/Requirements: Background screening is mandatory for employees, volunteers, mentors, and interns with access to youth and confidential youth records to ensure they meet established statutory Level 2 screening requirements of good moral character. The Department is cognizant of its status as a criminal justice agency and its special responsibilities in dealing with the youth population, and has determined it is appropriate to establish stringent screening requirements for all DJJ and provider personnel and volunteers. Therefore, the Department utilizes Level 2 Screening Standards as required in s.435.05, F.S.

Guest speakers, guest performers, ministers, or other visiting personnel who interact with youth on an occasional basis do not need to be background screened if they are under the constant and direct supervision of background screened staff.

Current employees of the Department or a provider are not required to submit a new background screening request when they are promoted, demoted, or transferred into another position within their organization, as long as there is no break in service.

A new background screening is required when a Department employee is hired by a provider or when a provider employee is hired by the Department or another contracted provider company.

Yes ☐  No ☐  N/A ☐
Moving from DJJ or to a contracted provider, from a contracted provider to DJJ, or from one contracted provider company to another is considered a new hire.

Neither the Department nor contracted providers shall hire any applicant until:

a. An eligible background screening rating has been received, and the criminal history report has been reviewed.
b. An application with an ineligible rating has received an approved exemption from disqualification from the Department, has received an eligible rating, and the criminal history report has been reviewed.
c. The provider has administered a pre-employment assessment tool to the direct-care position applicant prior to hiring and has determined what is a passing score. (volunteers are not required to take or pass the assessment tool.)
d. The provider has placed a copy of the pre-employment tool and passing score in the applicant/employee file.
e. The provider added the employee or volunteer to their Clearinghouse employment roster.

The provider is responsible for ensuring their hiring authority has reviewed the CCC Person Involvement Report, the SVS module, FDLE’s ATMS result, and completed any agency personnel file review prior to hiring or utilizing a volunteer that will have contact with youth, or access to confidential youth records.

A new background screening is not required for a volunteer who has been hired by the center, as long as there is no break in service.

a. Once the volunteer screening is completed, the volunteer is considered active as long as the fingerprints are being retained by FDLE/FBI, the 5-year rescreening/resubmission is being completed, and the volunteer is added to the Clearinghouse employee roster within 90-days of completing the screening request.

Teachers who are paid by the school board or who are paid through funding provided by the school board or Department of Education to provide instruction to youth in programs are not required to undergo background screening by the Department.

Review files of all staff hired since the last annual compliance review to determine a clearance was received prior to the employee being hired.
An exemption was granted by the Department prior to hiring or utilizing any staff or volunteer currently working in the program who were rated ineligible for employment.

Review documentation to determine whether the Affidavit of Compliance with Level 2 Screening Standards was submitted to the Background Screening Unit prior to January 31 of the current calendar year.

Reference:

- FDJJ-1800 PC, Background Screening Policy and Procedures

Yes ☐ No ☐ N/A ☐
1.02 Five-Year Rescreening

Background rescreening/resubmission is conducted for all Department employees, and volunteers and all contracted provider and grant recipient employees, volunteers, mentors, and interns with access to youth and confidential youth records. Employees and volunteers are rescreened every five years from the initial date of employment. When a current provider staff member transitions into the Clearinghouse, the rescreen/resubmission date starts anew and is calculated by the Clearinghouse. (Note: For the new date, see the Retained Prints Expiration Date on the applicant’s personal profile page within the Clearinghouse).

Guidelines/Requirements: A rescreening/resubmission is completed every five years, calculated from the agency hire date. Five-year rescreens/resubmissions shall not be completed more than twelve months prior to the employee’s five-year anniversary date.

When a rescreening/resubmission is submitted to the Background Screening Unit (BSU) at least ten business days prior to the five-year anniversary date or Retained Prints Expiration date, but it is not completed by the BSU on or before the anniversary or Retained Prints Expiration date, the screening shall meet annual compliance review standards.

a. Clearinghouse resubmissions must be initiated in the Clearinghouse portal at least ten business days prior to the Retained Prints Expiration Date.

b. Clearinghouse rescreening/resubmission request forms must be submitted to the BSU at least ten business days prior to the Retained Prints Expiration Date.

When a rescreening/resubmission is not submitted to the BSU at least ten business days prior to the five-year anniversary or retained prints expiration date and the BSU does not complete the rescreening prior to the anniversary or retained prints expiration date, the screening shall not meet annual compliance review standards.

Review the employee and volunteer roster to determine which staff and volunteers required a five-year rescreening/resubmission since the last annual compliance review. All eligible staff and volunteers should be reviewed.
Reference:

- FDJJ-1800PC, Background Screening Policy and Procedures
1.03 Pre-Service/Certification Training

Contracted non-residential staff are trained in accordance with Florida Administrative Code. Contracted non-residential staff satisfies pre-service/certification requirements specified by Florida Administrative Code within 180 days of hiring.

Contracted non-residential staff who have not completed essential skills training, as defined by Florida Administrative Code, or completed pre-service/certification training do not have any direct contact with youth.

Guidelines/Requirements: Review training files for the completion of a minimum of 120 hours of web-based and/or instructor-led training to include the following:

- Understanding youth
- Legal
- Interpersonal/Communication skills
- Supervision
- Changing offender behavior
- Mental health and substance abuse
- Risk and needs assessment
- Sexual harassment (must be completed within 30 days)
- Human diversity.
- Human Trafficking
- Central Communications Center (CCC) It's All About Reporting (contract 10552)
- Information Security Awareness (contract 10552)
- Trauma Informed Care (contract 10552)
- Civil Rights (contract 10552)

Staff must complete the following essential skills training prior to being in the presence of youth:

- PAR (forty hours, within ninety calendar days of hiring)
- CPR/First Aid Certified
- Professionalism and Ethics Training
- Suicide Prevention Training
- Emergency Procedures Training

The provider shall ensure staff receives training on gender-specific programming and services, which may include but are not limited to the following items:
Vision, mission, program goals, and objectives of the provider model
Adolescent boy development and related issues
Risk and protective factors impacting delinquency in boys
Trauma and trauma informed care
Cultural sensitivity

Staff who will administer the risk and needs assessment (PAT) will also need to complete:

- 2-day DJJ MI Basics course
- 1-day DJJ Prevention Assessment Tool (PAT) course

It is the expectation of the Department all training, both pre-service and instructor-led, is documented in the Department’s Learning Management System (SkillPro).

For Contracted Non-Residential staff:
Returning staff who return more than one year from separation shall complete all requirements set forth in subsection 63H-2.004(1), F.A.C., as they are no longer considered trained.

All contracted providers shall submit, in writing, a list of pre-service training to the Office of Staff Development and Training including the course name, description, objectives, and training hours for any instructor-led training on the required topics. (It may be helpful to view the “All Trainings Completed” report for each staff.)

Review staff interview results.

References:

- AMIkids Contract
- F.A.C. 63H-1, Staff Training, Basic Curricula
- F.A.C. 63H-2-.004, Staff Training, Direct Care Staff Training Contract Non-Residential Staff
- FDJJ 1520P: Employee Training Procedures
1.04 In-Service Training

Contracted non-residential staff completes in-service training in accordance with Florida Administrative Code. Contracted non-residential staff must complete twenty-four hours of annual in-service training, beginning the calendar year after the staff has completed pre-service training.

Supervisor staff shall complete eight hours of training in the areas listed below, as part of the twenty-four hours of annual in-service training.

Guidelines/Requirements: The following are mandatory training topics that must be completed each year by contracted non-residential staff (unless specific certification is good for more than one year, in which case, training is only necessary as required by certification):

- PAR update (As required by PAR Rule Chapter 63H-1)
- CPR (annually)
- First Aid (annually)
- Professionalism and Ethics
- Suicide Prevention (6 hours annually as required by Rule 63N-1.0091)

Supervisory staff shall complete eight hours of training in the areas of:

- Management
- Leadership
- Personal Accountability
- Employee Relations
- Communication Skills
- Fiscal

All contracted programs shall submit to the Office of Staff Development and Training a written list including course names, descriptions, objectives, and training hours for any instructor-led in-service training.

It is the expectation of the Department all trainings, both in-service and instructor-led, are documented in the Department’s Learning Management System (SkillPro).

In-service training begins the calendar year after a staff completes his/her pre-service training.
Programs shall develop an annual in-service calendar, which must be updated as changes occur.

Review training files and/or SkillPro for contracted non-residential staff in subsequent years of employment to ensure training was completed as required. This sample must include supervisory staff.

This indicator shall be rated based on a review of training completed during the last full calendar year prior to the annual compliance review.

Review staff interview results.

**Reference:**

- F.A.C. 63H-1.009, Staff Training, Basic Curricula
- F.A.C. 63H-2.004, Non-Residential Direct Care Staff Training
- F.A.C. 63H-1.012, Annual Training Requirement
1.05 Incident Reporting (CCC)

Whenever a reportable incident occurs, the program notifies the Department’s Central Communications Center (CCC) within two hours of the incident, or within two hours of becoming aware of the incident.

— CRITICAL —

Guidelines/Requirements: This indicator shall be rated “Non-Applicable,” if the program has not had any reportable incidents during the scope of the review. If there are no CCC reports for the past six months, the regional monitor(s)/reviewer(s) may sample reports since the date of the last annual compliance review, but no more than twelve months.

Incidents discovered and reported by the review team during the review shall be considered “Non-Applicable,” unless documentation exists that the program was aware of the incident, but failed to report it.

The purpose of the Central Communications Center (CCC) is to provide a service to DJJ, the providers, and programs in maintaining a safe environment for the treatment, care, and provision of services to youth. The CCC activities are conducted twenty-four hours a day, seven days a week. The telephone number for the CCC is 1-800-355-2280.

The reporting of incidents shall be consistent with the Department’s requirements. The regional monitor(s)/reviewer(s) shall be familiar with the Department’s incident reporting requirements and list of reportable incidents.

Review CCC reports for the past six months to determine compliance with CCC reporting procedures.

Review internal incidents and grievances to determine if additional incidents should have been reported to CCC.

Reference:

- F.A.C. 63F-11, Central Communications Center
1.06 Administration

The program provides a safe and appropriate treatment environment including administrative and operational oversight.

Guidelines/Requirements: The administration shall include, at a minimum, the following staff (these may vary per individual contract):

- Executive Director
- Program Manager
- Business Manager
- Administrative Assistant
- Behavior Interventionist
- Two Case Managers
- Two Drivers

For Contract 10552
- Executive Director
- Administrative Assistant
- Behavior Interventionist
- Case Manager
- Career Coordinator
- Vocational Instructors
- Bus Drivers (may be subcontracted)

One case manager shall be the male lead facilitator in the practice with demonstrated effectiveness curriculum, “The Council for Boys and Young Men.” (NA for 10552)

All staff identified in Section III. C., 1, Staffing Levels (including Executive Directors, Behavioral Interventionists, Case Managers, Vocational Instructors and staff with direct contact to youth) shall possess, at a minimum a Bachelors degree or higher with the exception of the Business Manager/Administrative Assistant and Drivers, who shall possess at a minimum a High School Diploma, its equivalent or a General Educational Development (GED) certificate.

Note: The Provider shall provide a written request to the Department's Contract Manager with a copy to the Chief Probation Officer within thirty (30) days after amendment execution to grandfather in any employee(s) who does not meet the above requirement for the Behavior Interventionist position(s) employed as of the date of execution of the amendment (Sept. 1, 2016). The Department's Contract Manager shall review the request and shall respond in Yes ☐ No ☐ N/A ☐
writing (email acceptable). The Provider shall include name, education, and career experience equal to or greater than four (4) years with dependent or delinquent youth, the length of time employee has been with the program and a statement to support the request to grandfather in the employee.

The provider shall provide assigned staff on-call twenty-four (24) hours per day, seven (7) days per week, in the event of an emergency.

The boys program shall be open eight (8) hours per day, five (5) days a week excluding holidays observed by the District schools. (NA for 10552)

The provider shall accept referrals Monday through Friday, from 8:00 a.m. to 5:00 p.m. E.T. (NA for 10552)

Program services shall be provided in both traditional and non-traditional hours to meet the needs of the youth. (NA for 10552)

**Contract 10552 - During the academic year, the Gadsden program operates as an after-school program from 3:00 p.m. - 6:00 p.m., five (5) days per week excluding state holidays and Good Friday. Additionally, staff is available Monday through Friday from 9:00 a.m.- 3:00 p.m. to receive referrals and for students who wish to drop in to receive services. After the academic year (summer), the program operates from 8:00 a.m. - 3:00 p.m., five (5) days per week, excluding state holidays and Good Friday.**

Review staff interview results.

**Reference:**

- AMIkids Contract
1.07  **Provision of an Abuse-Free Environment**

Any person who knows, or has reasonable cause to suspect, a child is abused, abandoned, or neglected by a parent, legal custodian, caregiver, or other person responsible for the child's welfare, as defined by Florida Statute, or a child is in need of supervision and care and has no parent, legal custodian, or responsible adult relative immediately known and available to provide supervision and care, reports such knowledge or suspicion to the Florida Abuse Hotline.

--- CRITICAL ---

**Guidelines/Requirements:** The program shall provide an environment in which youth, staff, and others feel safe, secure, and not threatened by any form of abuse or harassment. To promote an abuse free environment, the program will:

1. Adhere to a Code of Conduct forbidding staff from using physical abuse, profanity, threats, or intimidation.

2. Ensure all allegations of child abuse or suspected child abuse are immediately reported to the Florida Abuse Hotline.

3. Ensure youth have unimpeded access to self-report alleged abuse.

4. Ensure youth eighteen years of age or older report abuse allegations to the Central Communications Center (CCC).

Review CCC reports and program incident reports to determine if there have been any abuse allegations substantiated against staff or if staff have reported abuse on behalf of a youth.

If any allegations have been made against staff, review any documentation of management interventions and disciplinary actions in response to the incident.

Review youth records to ensure there were not any indication of abuse not being reported to the Florida Abuse Hotline.
Review the program’s Code of Conduct to ensure compliance with statute.

Interview youth and staff to regarding abuse free environment.

**Reference:**

- F.S. 39.201, “Mandatory reports of child abuse, abandonment, or neglect; mandatory reports of death; central abuse hotline.”
- AMIkids Contract
- AMIkids Policy and Procedures
1.08 Food Services

The program shall serve a light meal or snack (i.e. beverage, sandwich, and snack) to each youth each day.

Guidelines/Requirements: This indicator shall be rated “Non-Applicable” if the program does not offer food services.

Facilities providing food services shall:

- Ensure the food service and dining area shall be clean and well maintained.
- Meals are provided to youth admitted to the program at scheduled times reflected in the program facility schedule.
- Meals shall be served family-style.
- Provide youth special diets when prescribed for health reasons or to accommodate religious beliefs.
- Food services will be provided in accordance with the U.S. Department of Agriculture’s National School Lunch Program.
- A registered dietician must approve the menu. The dietician/nutritionist shall be licensed in accordance with Chapter 468, Florida Statutes.

Regional monitor(s)/reviewer(s) shall review contract, memorandum of understanding, and/or agreements with any outside agency providing food to the program.

Food is not withheld as a disciplinary measure – confirm with staff and youth interviews

All staff members who participate in meal distribution must complete:

- AMIkids Food Safety Training
- Food handler certification

The program must have a Certified Food Safety Manager at the program.

Contract 10552 - The Provider shall serve a snack to each youth, each day. Snacks are provided to youth admitted to the program at scheduled times reflected in the Program Facility Schedule.

Review youth and staff interview results.
Reference:

- U.S. Department of Agriculture National School Lunch Program; 7CFR; USDA Logs
- AMIkids Policy and Procedures
- AMIkids Contract
- Florida Statute 468, Miscellaneous Professions and Occupations
1.09 Transportation Services

The provider shall provide or arrange for the provision of transportation for program-related purposes.

Guidelines/Requirements: The provider shall provide or arrange for the provision of transportation for program-related purposes. Program-related purposes shall include, but not limited to:

- Medical and dental appointments
- Work sites or community volunteer and service learning projects
- Counseling appointments with community agencies
- Youth development or educational activities
- Court appointments.

Facilities providing transportation shall:

- Provide daily transportation to and from the facility, or shall arrange for such transportation.
- Ensure all vehicles are clean and safe.
- Ensure all facility vehicles transporting youth shall be maintained in safe operating conditions at all times.
- Ensure facility staff transporting youth have a valid driver’s licenses to operate the vehicle and are qualified to transport youth.
- Ensure facility vehicles meet all stated and federal requirements.
- Ensure staff do not allow passengers to exceed number of persons the vehicle was designed to carry.
- Each transport is a smoke-free environment.
- Ensure all vehicles are locked when not in use.
- Ensure all youth and staff wear seat belts while the vehicle is in operation.
- All vehicles are equipped with seat belts and a first aid kit.
- Facility vehicles shall have current insurance and automobile registration.

A youth cannot be denied services or penalized because of the lack of transportation.
Review agreement with outside agency providing transportation to ensure they meet the requirements of this indicator (if applicable).

Review youth and staff interview results.

**Reference:**

- FDJJ 1920 Operating a Vehicle for the Purpose of Transporting Youth
- FDJJ 1306 Vehicle Operation
- F.A.C. 63M-2.009, Health Services, Episodic Care
- AMIkids Contract

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<tr>
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1.10 Fire Prevention and Evacuation Procedures

The program shall have a comprehensive safety regimen including fire safety training, fire alarm and automatic detection system, fire protection equipment in strategic locations, monthly fire drills and fire safety log containing a record of annual fire safety inspections, summary of all deficiencies found by fire officials and record of corrections, and the results of periodic fire safety inspections and equipment checks.

Guidelines/Requirements: The Executive Director or designee shall serve as the designated Disaster Coordinator for the facility and is responsible for all aspects of the Fire Safety Plan. The Fire Safety Plan should include the following elements:

- The Provider shall ensure smoking is prohibited throughout the entire facility and on the grounds.

- Evacuation Egress Plans shall be conspicuously located throughout the facility by the exit/entrance of each room. The plans shall indicate the location of fire extinguishers, first aid kits, exit routes and assembly location.

- The Provider shall ensure the fire alarm system is tested monthly. The log of these tests shall be kept in the Fire Safety Log. The date, time, and comments concerning the drill shall be documented. Fire drills shall be conducted under varying conditions and during hours when the majority of youth are present.

- The Provider shall conduct fire drills on a monthly basis and document in the Fire Drill Log located in the Director of Operations/Executive Director’s office. The date, time, and comments concerning the drill shall be documented. Fire drills shall be conducted under varying conditions and during hours when the majority of youth are present.

- Fire extinguishers shall be inspected weekly as part of the facility tour. All fire extinguishers shall be inspected at least quarterly and recharged as needed. Documentation indicating extinguisher inspection and copies of invoices indicating service shall be kept in the Fire Safety Log.
The Provider shall ensure that fire extinguishers are located throughout the facility. The location of the extinguishers shall be indicated on the Evacuation Egress Plan.

The Provider shall ensure a Fire Marshall inspects the program at least annually. Completed fire inspections shall be located in the Business Manager's office. All deficiencies shall be documented on a Corrective Action Plan (CAP) and completed in a timely manner.

Fire drill and evacuation procedures shall be included in the youth handbook, which is given to all youth during intake and in the Provider's Operational Policy and Procedure Manual, which is read by all new staff members.

Weekly safety inspections are conducted and completed. Copies of inspections shall be kept within the program.

The Safety Inspection Binder shall be located in the Director of Operations/Executive Director's office.

All staff members shall receive training on proper operation and use of fire equipment as part of their new employee training plan.

The program shall maintain several cellular phones which can be used to call public safety personnel in the event the program phones become inoperable.

Fire drill and building evacuation procedures should be followed as outlined in contract language.

Review drill logs to ensure drills were conducted as required.

Review the annual fire safety inspections.

Review the facilities egress plans.

Review youth and staff interview results.

Reference:

AMIkids Contract
1.11 Cleanliness and Sanitation

The program provides a safe and appropriate treatment environment including maintenance and sanitation of the facility.

Guidelines/Requirements: Safety and welfare standards of facilities shall incorporate:

- Program shall conduct weekly sanitation and maintenance checks to ensure that the facility is clean and in good condition. All maintenance needs shall be reported to the Program's Executive Director and completed on a priority basis.
- All indoor areas and attached buildings shall be clean, neat, and well maintained.
- No graffiti shall be allowed to remain on walls, doors, or windows.
- The program shall ensure that weekly sanitation and safety inspections of all internal and external areas and equipment are conducted to ensure that the facility is clean and in good condition. Completed inspections shall be maintained in the Sanitation and Maintenance Log for a minimum of one (1) year.
- To help ensure the facility is clean and in good repair, a maintenance and housekeeping plan shall be developed and employed.
- Separate bathroom facilities shall be provided for males and females. For every thirty males and for every thirty females, there shall be at least one operable toilet and washbasin with hot and cold running water and antibacterial soap.
- Space shall be available for private counseling, group meetings, and classrooms. (Ensure space is used as described.)

Regional monitor(s)/reviewer(s) shall inspect the building/facility to ensure all bullets have been met.

Regional monitor(s)/reviewer(s) shall review weekly inspection reports.

Reference:

- AMIkids Contract
1.12 Youth Records

The program maintains an official youth record, labeled “Confidential,” for each youth.

Guidelines/Requirements:

The program clearly labels each record as “Confidential.”
All official youth records are secured in a locked file cabinet or a locked room.

The program clearly identifies any file cabinet used to store official youth case records as “Confidential.”

The program complies with the records and confidential information provisions pursuant to F.S. 985.04.

Review a sample of youth records to determine if they are marked confidential and stored appropriately.

Reference:

- F.S. 985.04
Standard 2: Assessment & Intervention Services

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* The Department has identified certain key critical indicators. These indicators represent critical areas requiring immediate attention if a program operates below Department standards. A program must therefore achieve at least a Satisfactory Compliance rating in each of these indicators. Failure to do so will result in a program alert form being completed and distributed to the appropriate program area.
2.01 Eligibility

The program shall provide services to boys ages eleven to seventeen who are at risk of delinquency for a period up to fifteen months.

**Contract 10552 - The program shall provide services to adolescent youth ages eleven (11) to seventeen (17), in Gadsden County, who are at-risk of delinquency or low-risk Probation youth referred by the Department.**

**Guidelines/Requirements:** Each youth must exhibit at least three (3) of the five (5) following characteristics:

1. Family Instability and Conflict
2. School Instability or Failure
3. Health and Mental Health (NA for 10552)
4. Attitudes/Behaviors
5. Victimization

Review documentation to ensure the youth meets all eligibility requirements.

Refer to the contract for specific criteria identified under each of the five (5) characteristics.

**Contract 10552 - Eligible youth include adolescent youth who enter the program voluntarily, who are at-risk of delinquency and are ages eleven (11) to seventeen (17). In addition, low-risk Probation youth ages eleven (11) to seventeen (17) may be referred and accepted at the program.**

**Reference:**

- AMIkids Contract
2.02 Orientation

The program shall provide Program and Facility orientation for all youth admitted to the facility. The youth's parent(s)/guardian(s) shall be encouraged to attend.

Guidelines/Requirements: Orientation shall be conducted by the case manager (or similar title) or designee in a manner that is welcoming and respectful and includes the following:

▪ All orientation information shall be written in language appropriate and understandable to the youth;
▪ The case manager (or similar title) or designee completing orientation thoroughly shall review each of the program policies with youth and parent(s)/guardian(s) to ensure understanding of program rules and expectations; and
▪ The program shall ensure all forms and consents are signed and dated by the youth, parent(s)/guardian(s), and case manager (or similar title) or designee and includes the orientation acknowledgement with checklist of materials reviewed.

All intake/orientation documentation shall be maintained in the youth's case management file.

The youth's admission/orientation session shall be documented in the youth's file and all required parties are notified of the youth's acceptance into the program.

An orientation handbook or brochure shall be provided, containing the following:

▪ Program goals and available services;
▪ Review of the case planning process;
▪ Telephone guidelines;
▪ Youth rights and grievances;
▪ Florida Abuse Hotline telephone number;
▪ Advocacy Center for Persons with Disabilities telephone number; and
▪ Facility rules governing youth conduct and consequences for major rule violations.
In addition to the handbook or brochure, the orientation shall also include the following:

- Introduction to facility staff and a tour of the facility grounds;
- A review of expectations, rules, and the behavior management system;
- A review of the daily activity schedule governing day-to-day operations;
- A review of emergency medical and mental health services, emergency safety, and the evacuation procedures for the facility;
- A list of contraband items and materials, and the consequences for introducing contraband into the facility;
- A review of the performance planning process;
- The average anticipated length of stay to successfully complete the program; and
- The facility dress code, which shall prohibit pictures, logos, emblems, and writing depicting illegal activity, violence, profanity, gang logos, or nudity.

Youth shall also receive a Program Handbook at the intake meeting that contains a written explanation of all of the following:

- Program goals and available services;
- Review of the case planning process;
- Telephone guidelines;
- Search policy;
- Youth rights and grievances;
- Florida Abuse Hotline telephone number 1-800-962-2873;
- Florida Advocacy Center for Persons with Disabilities telephone number;
- Facility rules governing youth conduct and consequences for major rule violations;
- Facility organization chart;
- Summary of expectations, rules and the behavior management system;
- Daily activity schedule governing day-to-day operations;
- Summary of emergency medical and mental health services, emergency safety, and the evacuation procedures for the facility;
- A list of contraband items and materials and the consequences for introducing contraband into the facility;
- A review of the performance planning process;
- Explanation of the average anticipated length of stay to successfully complete the program; and
▪ The facility dress code, which shall prohibit pictures, logos, emblems and writing that depict illegal activity, violence, profanity, gang logos, or nudity.

The case manager or designee shall maintain documentation of the youth's parent(s)/guardian(s) notification of the youth's admission within twenty-four (24) hours. A copy shall be filed in the youth's case file. Written notification shall include:

▪ A brief overview of the program;
▪ Information to the parent(s)/guardian(s) about scheduled recreational activities; and
▪ Explanation of the requirement that the parent(s)/guardian(s) inform the program of an objection to youth's participation in recreational activities due to a physical or medical problem. Objection must be accompanied by written documentation from a physician.

For Contract 10552 –

The Provider shall conduct an Orientation and Facility Tour for all youth and parent(s)/guardian(s) within twenty-four (24) hours of the youth's admission to the Program to include, but not be limited to the following:

• delivery of information detailing program goals and services;
• review of the service planning process;
• telephone usage guidelines (including calls to the Florida Abuse Hotline);
• program's policy on searches, youth's rights, incident and grievance reporting, and the transportation plan;
• name, title, contact information for key staff;
• review of the State of Florida's Child Abuse Reporting procedures;
• referrals for mental health services (as needed);
• referrals for substance abuse services (as needed);
• goals, expectations of the youth and his/her parents/guardian(s);
• emergency procedures;
• dress code

Proof of Program Orientation and the discussion between the youth and staff shall be documented by the signature of the youth, participating family member/guardian, and staff member and maintained in the youth's file.
<table>
<thead>
<tr>
<th>Standard 2.</th>
<th>Assessment &amp; Intervention Services</th>
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<tbody>
<tr>
<td>Review documentation of the date and time orientation was provided and the youth received orientation documents.</td>
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<tr>
<td>Review youth interview results.</td>
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<tr>
<td><strong>Reference:</strong></td>
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<tr>
<td>▪ AMIkids Contract</td>
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</table>
2.03 Gender-Specific Programming

The program provides gender-specific delinquency intervention and treatment services.

— CRITICAL —

Guidelines/Requirements: This indicator shall be rated “Non-Applicable” if the program does not provide gender-specific programming (contract 10552).

The program designs its services and service delivery system based on the common characteristics of its primary target population, including age, gender, and special needs, and their impact on youth responsively to intervention or treatment.

The program demonstrates a program model or component addressing the needs of a targeted gender group. Health and hygiene, the physical environment, life management through the practice with demonstrated effectiveness curriculum “The Council for Boys and Young Men”, recreation and leisure activities, addresses trauma, and fosters positive gender identity development that are key components in providing a gender-specific program.

The program shall provide gender-specific life management skills training and instruction that addresses the needs of adolescent boys, addresses trauma, and fosters positive gender identity development.

Review the program’s activity schedule to determine gender-specific programming is provided.

Review the curriculum or material used to instruct youth on gender-specific issues.

Reference:

- F.S. 985.02 (1) (i)
- AMIkids Contract
2.04 Prevention Assessment Tool (PAT)

The Prevention Assessment Tool (PAT) shall be administered to each youth in the program during the initial intake and at completion of the program.

— CRITICAL —

Guidelines/Requirements: Program staff shall complete a PAT on all youth. Staff completing the PAT shall use the interview with the youth along with his or her own observations and those of collateral sources such as parents/guardians, other Department staff, law enforcement, or other informed persons who have knowledge of the youth’s behavior and background.

The PAT shall be completed during the youth’s initial intake into the program within 7 calendar days of admission and upon completion of the program, at a minimum.

Program staff are responsible for completing all assessments for youth in the program and entering the information from the PAT in JJIS within 24 hours of completion.

Positive Achievement Change Tools (PACTs) completed by DJJ staff will not be used to determine compliance with this indicator.

Regional monitor(s)/reviewer(s) shall review PAT completion list from JJIS to ensure the PAT was completed in a timely manner.

Reference:

- AMIkids Contract
2.05 Individualized Care Plan

The provider shall develop an individualized care plan for each youth.

Guidelines/Requirements: Within 30 calendar days of admission, the provider shall develop an individualized care plan for each youth. The care plan shall include the following:

- For all program youth the care plan shall specify gender-specific life management skills through the practice with demonstrated effectiveness curriculum "The Council for Boys and Young Men"
- Support services and case management services
- Monthly family contacts
- Goal setting and problem solving to attain goals
- Mental Health services or substance abuse treatment may be provided through referrals to appropriate community providers.

Based on the findings of the initial assessment of the youth, the care review team, including the youth, shall meet and develop the individualized care plan within thirty calendar days of the youth’s admission.

Review a sample of youth case management records to determine if the plan was developed within thirty calendar days and included input from all members of the care review team.

For Contract 10552 –

Within fifteen (15) calendar days of admission, the Provider shall develop an ICP for each youth. The care plan shall include the following:
1) Vocational and career training;
2) Drop-in career counseling and placement services;
3) Mentoring.

The Provider shall review the PAT to ensure the ICP reflects services to address demonstrated needs of the Prevention youth per the assessment. The Provider shall review the C-PACT provided with low-risk youth to review risk factors and review other information provided in the referral packet to ensure the ICP reflects services to address demonstrated needs of the low-risk probation youth.
Review a sample of youth case management records to determine if the plan was developed within fifteen calendar days and included input from all members of the care review team.

Interview youth to ensure the youth participated in the development of their plan.

Reference:

- AMIkids Contract
2.06 Transition Plan

Each youth must have an individual transition plan and transition services for a period of six months for all youth enrolled in the program a minimum of 30 days regardless of the status of the transition.

Guidelines/Requirements: This indicator shall be rated “Non-Applicable” if the program does not require transition planning (contract 10552).

Review a sample of youth case management records to determine if the plan was developed within the required timeframe and includes input from all members of the care review team.

Reference:

- AMIkids Contract
2.07 Referrals for Mental Health and Substance Abuse Assessment and Treatment Services

If mental health and/or substance abuse needs are identified by the PAT or other information obtained, staff shall ensure referrals for appropriate services are made. Staff shall ensure all referrals for services are made within seventy-two hours of identification of the need for services.

If referred for services, staff follows up with the service provider within thirty days to ensure the youth and parent/guardian have taken the appropriate steps to initiate services. Staff receives, reviews, and documents written and verbal progress reports from the provider. Staff shall act upon negative reports, such as missed appointments or lack of participation, and document the response.

— CRITICAL —

Guidelines/Requirements: The provider shall refer the youth and parent/guardian to the appropriate mental health and/or substance abuse treatment service(s) based upon the youth’s PAT needs within seventy-two hours of the identification of the need for service and provide support and follow-up as necessary to ensure the completion of goals.

Mental health and substance abuse service planning should focus on ensuring youth are referred for mental health and/or substance abuse assessment by an appropriate service provider when needs are identified. When clinically indicated by mental health and/or substance abuse assessment, youth receive treatment(s) by a service provider which will reduce or alleviate the youth’s symptoms of mental disorder(s) and/or substance abuse impairment and enable the youth to function adequately in the community.

The provider shall make contact with the service provider within thirty calendar days of the referral to ensure the youth and parent/guardian have participated in the admission process and are receiving services.

The provider shall ensure progress reports, written or verbal, are received from the provider on a regular basis. The provider shall follow-up with the youth and parent/guardian on any compliance issues communicated by the service.
The provider shall document referrals for services, follow-up with the service provider, youth, and parent/guardian, and any other related contacts.

**For Contract 10552**

The Provider shall ensure that all referrals to community resources for mental health and/or substance abuse services are made as indicated by the youth's PAT assessment and set forth in the ICP and are made to address the needs of the youth and family.

The Provider shall establish appropriate linkages with local resources/service providers with the ability to provide services at a reduced or zero amount.

1) Referred services shall be paid for through the use of Medicaid, if the youth is eligible, or by the family if individual insurance is available.

2) In the event that the youth has no ability to pay for referred services for mental health and/or substance abuse services, the Provider shall contact the CPO, who shall determine mental health and/or substance abuse services availability and make the referral, if appropriate.

The Provider shall have a documented method of follow-up and monitoring for all outside referrals made as a result of a youth's ICP. The Provider's staff shall follow up within thirty (30) days to ensure that the youth and parent(s)/guardian(s) have taken the appropriate steps to obtain services and determine if services are ongoing, or have been completed.

When documenting follow-up or monitoring, the Provider shall act upon reports of non-participation such as missed appointments, or not adhering to the policies of the program and retain all documents and monitoring forms in the youth's program case file.

Youth identified by assessment with mental health issues and/or substance use issues shall be referred to a community mental health and/or substance abuse provider for necessary and appropriate treatment. In the case of a youth whose assessment identifies the need for inpatient placement for mental health and/or substance abuse services, the Provider shall forward written notification (email acceptable) to the Department's Contract Manager and the CPO of any youth admitted to a mental health and/or substance abuse (inpatient) treatment program to
address risks and needs critical to the youth's rehabilitation.
- The youth shall be removed from the Provider's Youth Census Report and shall not be included on the monthly invoice.

Reference:

- AMIkids Contract
2.08 Individualized Care Plan Re-Evaluation

The individualized care plan shall be re-evaluated, throughout the youth’s enrollment period.

Guidelines/Requirements: Review the new Individualized Care Plan to determine if newly identified needs are addressed and if youth progress is reflected. If the Individualized Care Plan has been revised, review documentation to ensure a discussion regarding the new Individualized Care Plan was documented.

The ICP shall be re-evaluated, at a minimum, every six (6) months throughout the youth’s enrollment period.

The ICP shall be re-evaluated, at a minimum, every three (3) months throughout the youth’s enrollment period. (contract 10552)

There should be a process in place for ongoing revisions to the plan as goals are accomplished and other needs are addressed.

Reference:
- AMIkids Contract
2.09 Educational Access

The facility shall integrate educational instruction (personal accountability and behavioral, as well as academic instruction) into their daily schedule in such a way ensuring the integrity of required instructional time.

Guidelines/Requirements: This indicator shall be rated “Non-Applicable” if the program does not provide educational access (contract 10552).

DJJ education programs operate on a year-round basis. Students are required to participate in educational and career-related programs for 250 days of instruction, or its hourly equivalent, 20 of which can be used for teacher training and planning. Programs can still use twenty of these days for teacher training and planning.

Programs are given the flexibility to provide instruction based on hours rather than days, schools may choose to distribute the hours differently. The hourly equivalent of 230 days of instruction is 1,150 hours.

Given the limited school day, the skills developed in the career training and education programs need to be supported by the academic courses to the maximum extent possible.

Youth enrolled in educational programs will receive credit for participation in the education and training experience by an approved credentialing agency.

Review the program’s daily schedule and logbook to ensure education classes are taking place as scheduled with minimal interference of educational instruction.

Conduct an interview with the lead teacher and principal to determine what the educational instruction schedule is for the program.

Reference:

- AMIkids Contract
- F.A.C. 63B-1.003 (3) Career Related Programs, Career and Vocational Programming
2.10 Vocational and Career Training

The program shall provide vocational and career training to support continuous progression towards job placement.

Guidelines/Requirements: This indicator shall be rated “Non-Applicable” if the program does not provide vocational and career training.

The Provider shall provide vocational and career training to support continuous progression towards job placement. This shall include assistance in earning industry recognized vocational certificates.

The Provider shall ensure services are provided through a comprehensive approach in such a manner to impact academic achievement and reduce risk behaviors leading to court involvement while providing each youth vocational training that leads to job readiness and employment.

Review the youth’s ICP to determine if vocational and career training is included.

Review documentation to confirm the youth is receiving vocational or career training.

Review youth interview results.

Reference:

- AMIkids Contract
2.11 Youth Development

The program provides development activities building positive character, instilling positive values, or enhancing educational or community engagement experiences. Activities may include outings to local attractions, the arts, historical sites, and other activities promoting healthy lifestyles.

Guidelines/Requirements: This indicator shall be rated “Non-Applicable” if the program does not youth development (contract 10552).

Each youth will have the opportunity to participate in community and service learning each 90 day enrollment period.

Services will also include career exploration, career planning, and development of school to work employability skills.

Review daily schedule and compare to logbook for adherence to the daily schedule.

Observe daily activities to determine if schedules are followed.

Review youth interview results.

Reference:
- AMIkids Contract
2.12 Release

The provider must administer the PAT prior to the youth’s release or discharge from the program.

Guidelines/Requirements: An exit PAT must be completed prior to the youth’s release from the program, within the youth’s last 14 days in the program.

The release or discharge PAT must be entered into JJIS within 24 hours of completion.

The youth must be released from the program in JJIS within 24 hours of release or discharge.

The length of stay is up to fifteen months (or eleven months – contract 10552). Exceptions to the length of stay will be considered on a case by case basis and must be approved in writing by the Department’s contract manager.

Review documentation to ensure the PAT was administered prior to the youth’s release and in JJIS.

Compare the program’s JJIS census with the program roster for accuracy.

Reference:

- AMIkids Contract