



Florida Network of Youth and Family Services Quality Improvement Program Report

Review of Nehemiah Educational and Economic Development (NEED)

on 11/29/2017

CINS/FINS Rating Profile

Standard 1: Management Accountability

1.01 Background Screening of Employees/Volunteers	Satisfactory
1.02 Provision of an Abuse Free Environment	Satisfactory
1.03 Incident Reporting	Satisfactory
1.04 Training Requirements	Satisfactory
1.05 Analyzing and Reporting Information	Satisfactory
1.06 Client Transportation	Not Applicable
1.07 Outreach Services	Satisfactory
Percent of indicators rated Satisfactory:100.00%	
Percent of indicators rated Limited:0.00%	
Percent of indicators rated Failed:0.00%	

Standard 2: Intervention and Case Management

2.01 Screening and Intake	Satisfactory
2.02 Needs Assessment	Satisfactory
2.03 Case/Service Plan	Satisfactory
2.04 Case Management and Service Delivery	Satisfactory
2.05 Counseling Services	Satisfactory
2.06 Adjudication/Petition Process	Satisfactory
2.07 Youth Records	Satisfactory
Percent of indicators rated Satisfactory:100.00%	
Percent of indicators rated Limited:0.00%	
Percent of indicators rated Failed:0.00%	

Percent of indicators rated Satisfactory:100.00%
Percent of indicators rated Limited:0.00%
Percent of indicators rated Failed:0.00%

Rating Definitions

Rating were assigned to each indicator by the review team using the following definitions:

Satisfactory Compliance	Non-systemic exceptions that do not result in reduced or substandard service delivery; or exceptions with corrective action already applied and demonstrated.
Limited Compliance	Exceptions to the requirements of the indicator that result in the interruption of service delivery, and typically require oversight by management to address the issues systemically.
Failed Compliance	The absence of a component(s) essential to the requirements of the indicator that typically requires immediate follow-up and response to remediate the issue and ensure service delivery.
Not Applicable	Does not apply.

Review Team

Members

Keith Carr, Lead Reviewer, FOREFRONT LLC/FNYFS

Nitara LaTouche, Quality Management Manager, Children's Home Society of Florida

Janet Valdez, Clinical Supervisor CINS/FINS Non-Res Program, Children's Home Society of Florida

Persons Interviewed

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Chief Executive Officer | <input type="checkbox"/> Executive Director | <input type="checkbox"/> Chief Operating Officer |
| <input type="checkbox"/> Chief Financial Officer | <input checked="" type="checkbox"/> Program Director | <input type="checkbox"/> Program Manager |
| <input type="checkbox"/> Program Coordinator | <input type="checkbox"/> Direct- Care Full time | <input type="checkbox"/> Direct-Care Part Time |
| <input type="checkbox"/> Direct-Care On- Call | <input type="checkbox"/> Volunteer | <input type="checkbox"/> Intern |
| <input checked="" type="checkbox"/> Clinical Director | <input type="checkbox"/> Counselor Licensed | <input type="checkbox"/> Counselor Non- Licensed |
| <input checked="" type="checkbox"/> Case Manager | <input type="checkbox"/> Advocate | <input type="checkbox"/> Human Resources |
| <input type="checkbox"/> Nurse | | |
| 2 Case Managers | 0 Maintenance Personnel | 1 Clinical Staff |
| 0 Program Supervisors | 0 Food Service Personnel | 0 Other |
| 0 Health Care Staff | | |

Documents Reviewed

- | | | |
|---|---|---|
| <input type="checkbox"/> Accreditation Reports | <input type="checkbox"/> Fire Prevention Plan | <input type="checkbox"/> Vehicle Inspection Reports |
| <input checked="" type="checkbox"/> Affidavit of Good Moral Character | <input type="checkbox"/> Grievance Process/Records | <input type="checkbox"/> Visitation Logs |
| <input checked="" type="checkbox"/> CCC Reports | <input type="checkbox"/> Key Control Log | <input type="checkbox"/> Youth Handbook |
| <input type="checkbox"/> Logbooks | <input type="checkbox"/> Fire Drill Log | 0 # Health Records |
| <input type="checkbox"/> Continuity of Operation Plan | <input type="checkbox"/> Medical and Mental Health Alerts | 0 # MH/SA Records |
| <input checked="" type="checkbox"/> Contract Monitoring Reports | <input checked="" type="checkbox"/> Table of Organization | 8 # Personnel Records |
| <input checked="" type="checkbox"/> Contract Scope of Services | <input type="checkbox"/> Precautionary Observation Logs | 7 # Training Records |
| <input checked="" type="checkbox"/> Egress Plans | <input type="checkbox"/> Program Schedules | 3 # Youth Records (Closed) |
| <input type="checkbox"/> Fire Inspection Report | <input type="checkbox"/> Telephone Logs | 4 # Youth Records (Open) |
| <input checked="" type="checkbox"/> Exposure Control Plan | <input type="checkbox"/> Supplemental Contracts | 0 # Other |

Surveys

0 Youth 3 Direct Care Staff

Observations During Review

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Intake | <input checked="" type="checkbox"/> Posting of Abuse Hotline | <input type="checkbox"/> Staff Supervision of Youth |
| <input checked="" type="checkbox"/> Program Activities | <input type="checkbox"/> Tool Inventory and Storage | <input type="checkbox"/> Facility and Grounds |
| <input type="checkbox"/> Recreation | <input type="checkbox"/> Toxic Item Inventory and Storage | <input checked="" type="checkbox"/> First Aid Kit(s) |
| <input type="checkbox"/> Searches | <input type="checkbox"/> Discharge | <input type="checkbox"/> Group |
| <input type="checkbox"/> Security Video Tapes | <input type="checkbox"/> Treatment Team Meetings | <input type="checkbox"/> Meals |
| <input type="checkbox"/> Social Skill Modeling by Staff | <input type="checkbox"/> Youth Movement and Counts | |
| <input type="checkbox"/> Medication Administration | <input type="checkbox"/> Staff Interactions with Youth | |

Comments

Items not marked were either not applicable or not available for review.

Rating Narrative

Agency reported not having examples of cases related to Abuse or Incident Reporting and Adjudicated Youth/CINS Petitions.

Strengths and Innovative Approaches

Rating Narrative

Nehemiah Educational & Economic Development, Inc. (N.E.E.D.) is a 501 (c) (3) organization and was incorporated in February 2000. N.E.E.D. provides an array of services to the community, including Youth Services. N.E.E.D.'s Youth Services Division is experienced in providing prevention and intervention services to youth and families. The management staff has over 27 years' experience working directly with youth. The Florida Department of Juvenile Justice awarded N.E.E.D. several prevention grants to operate mentoring and afterschool programs. (N.E.E.D. has also operated employability skills programs.)

N.E.E.D.'s CINS/FINS program targets children, ages 6-17, which meet the following criteria for admissions: Runaway, Ungovernability/Beyond Control, Truancy/School Issues and Homelessness.

N.E.E.D. seeks partners (judiciary, law enforcement, schools, churches, community based organizations, parents and concerned citizens) to work with, as their focus is on helping youth and their families be successful and enjoy healthy relationships. They have collaborative partnership with Macedonia Missionary Baptist Church of Eatonville FL, Inc., the Walt Disney Boys and Girls Club and a well-respected psychologist. Through their collaborations, they are able to offer youth and their parents a vast array of programs and services such as counseling, mentoring, life skills groups, character development, gender specific groups, annual college tours to eligible students, scholarship opportunities and opportunities for youth to voluntarily participate in creative arts (drama, choir, dance, mime groups). For parents, they offer, through collaboration, soup kitchen, clothes closet, health services, RESTORE group meetings, Addictive Behavior Recovery Ministry, prison ministry and referrals through the Social Services Ministry for financial assistance (public assistance and housing).

As N.E.E.D. moves into their third year, they are pleased to have accomplished the following:

- **Programmatically, 100% of case management staff have Bachelor level or above degrees and are experienced in CINS/FINS or case management programs.**
- **Hired a new part-time case manager.**
- **Hired a new Administrative Assistant/Data Coordinator.**
- **Met training hours for direct care staff.**
- **For Christmas, they partnered again with Macedonia's Angel Tree program to submit some of their children's names to receive donated gifts that includes gift cards, games and other items.**
- **Case Managers made numerous referrals for service such as counseling, substance abuse assessments, psychological assessments, mentoring, tutoring, community programs, etc.**
- **Case Managers mentored and coached youth on decision making, peer relations, drug education, educational and vocational activities.**
- **Concluded life skills and character development through their drama classes at Walt Disney Boys & Girls Club.**
- **They now offer life skills at the Boys and Girls Club through a nationally certified Arise Instructor, in weekly Boys Groups.**
- **Case Managers engaged parents beyond the initial intake visit by calling them with regular updates on their child's progress with Service Plan. This encouraged parents to become more involved with their child's success.**
- **Achieved 99% positive feedback on Client Satisfaction Reports.**
- **Achieved 100% on Annual Agency Report Card from the Florida Network for 2017.**
- **Achieved 100% of deliverables, YTD Performance by conducting 133 assessments in the 2016-2017 contract year, (contracted to conduct 131). They are on track to meeting or exceeding deliverables for**

2017-2018.

- **They have moved to the town of Winter Park and look forward to establishing new referral sources for families in the area.**

Standard 1: Management Accountability

Overview

Narrative

The Nehemiah Educational and Economic Development program is staffed by a Director, an Administrative Assistant/Data Coordinator, a Clinical Psychologist, three Case Managers and a Drama Instructor/Group Facilitator.

Level 2 background screening is mandatory for employees and volunteers, working with direct access to youth, to guarantee they meet statutory requirements of good moral character as required in s.435.05, F.S. There were three staff members that were screened since the last quality improvement review. All background screening requirements were fulfilled.

The primary goal of the CINS/FINS program is to provide services to pre-delinquent youth and their families in an effort to prevent entry into the Juvenile Justice System. Staff training ensures that staff assigned to the program has the proper credentials to perform their job responsibilities. Program orientation and training is an essential component of this effort. Staff are trained to conduct screenings and assessment services to youth and families that meet the CINS/FINS criteria. Individual training records are maintained in a binder for each staff that includes: training plan, individual certificates, and training hours. The provider has numerous partnership agreements throughout the local service area and conducts outreach to educate the community and market the program's services.

1.01 Background Screening

Satisfactory

Limited

Failed

Rating Narrative

The agency has a policy for Nehemiah Educational and Economic Development program for CINS/FINS called 1.01 Background Screening. The policy contains reference to the agency requiring that all staff and/or volunteers that have access to juvenile records and clients must adhere to Florida Statute Chapter 435 prior to being employed. This is to ensure that the Department does not hire any individuals that have violated or been adjudicated for provisions identified in Section 985.644 and 985.66 under Florida state law. The policy was last reviewed on August 1, 2016. The policy was signed and approved by the agency's Director of Youth Services.

The agency background screening policy lists the persons in the organization that must be screened. These applicants include owners/operators, any one seeking employment, contractors, volunteers, mentors and interns. The background screening policy also list when screening is not required and when not to complete a background screening. The procedures required that a criminal history acknowledgement and Prison Rape Elimination Act (PREA) Compliance Form is required when commencing the request for screenings during the hiring process. All applicants must complete Section A of the Form IG/BSU-002 or Form IG/BSU-005. The agency has a process for accessing the Clearing House for submitting and accessing/printing fingerprints and photographs. The procedures list provisions for 5-Year resubmission, disqualifying offenses, exemption process, and completing the annual affidavit before January 31 of each year.

The agency has a total of one full-time Director; one full-time Administrative Assistant; three (3) Part-time Case Managers; one Part-time Clinician and one part-time Life Skills group leader. Two of the staff (Director and Clinician) were screened when the program began in July 2015. Two (2) part-time Case Managers were properly screened in 2016. One administrative staff person was screened in August 2017; one part-time Case Manager was screened in July 2017; and one Life Skills trainer was screened in August 2017.

Evidence of a fully executed Level 2 background screening with Eligible Rating results was completed for all eight (8) directors, staff, owners, part-time staff and/or volunteers. None of the 8 persons required Exemption procedures be completed prior to working with youth. None of the current persons employed,

contracted or affiliated with NEED was due for a five-year rescreening. The agency provided evidence of the past and current application for the 2018 Annual Affidavit of Compliance. The annual affidavit of good moral Standards was submitted prior to January 31, 2017. At the time of this onsite review, the agency was in the process of submitting this affidavit for 2018.

No exceptions are noted for this indicator.

1.02 Provision of an Abuse Free Environment

Satisfactory

Limited

Failed

Rating Narrative

The agency has a policy called Nehemiah Educational and Economic Development program for CINS/FINS 1.02 Abuse Reporting/Abuse Free Environment. The agency's policy addresses the organization's adherence to a code of conduct that prohibits the use of physical abuse, profanity, threats or intimidation. The agency's policy requires that all staff report all suspected or alleged cases of child abuse or neglect. For program staff, failure to report these situations constitutes a second-degree misdemeanor. In general, the policy meets the requirement of Abuse Reporting indicator. The policy was last reviewed on July 31, 2015. The policy was signed and approved by the agency's Director of Youth Services.

The agency requires that all staff report all suspected or alleged instances of child abuse or neglect. The agency staff are required to refrain from the use physical abuse, profanity, threats or intimidation directed towards program youth. Further, NEED staff are prohibited from depriving clients from any basic needs. In addition, procedures require Management staff to investigate and take immediate action to address any and all alleged incidents. The agency has Orientation to NEED Personnel policies as part of their on-boarding process for all staff members and contractors.

The agency had no reported cases related to incident reporting to the Department of Juvenile Justice's Central Communications Center. The agency had no alleged cases that were required to be reported to the Department of Children and Families. Agency had evidence of the Abuse Registry number posted in plain view in the reception area of the program office. The staff members are trained and receive specific training related to Child Abuse Reporting Training in the DJJ Skill Pro system.

No exceptions are noted for this indicator.

1.03 Incident Reporting

Satisfactory

Limited

Failed

Rating Narrative

The agency has a policy called Nehemiah Educational and Economic Development program for CINS/FINS 1.03 Incident Reporting/Abuse Free Environment. The policy requires that all staff members must report incidents that meet the reportable incident criteria set by the Department of Juvenile Justice. In general, the policy meets the requirement of Abuse Reporting indicator. The policy was last reviewed on July 31, 2015. The policy was signed and approved by the agency's Director of Youth Services.

The agency requires that all incidents will be reported that meet the Department of Juvenile Justice's reporting criteria. Further, all incidents will be reported to the DJJ CCC as soon as they gain knowledge, but no later than 2 hours after the reportable incident occurs. The agency is required to use the DJJ Office of the Inspector General incident reporting form. Incidents are required to be placed in a log. All incidents must be reviewed and signed by the program director.

The agency had no reported cases related to incidents reported to the Department of Juvenile Justice's Central Communications Center. Agency had evidence of the Abuse Registry number posted in plain view

in the reception area of the program office. The staff members are trained and receive specific training related to mandatory Abuse Reporting and DJJ Reporting Overview delivered internally by the NEED Director of Youth Services. The agency is prepared to use the incident reporting form used by the DJJ OIG. Further, the agency has a binder and logging system to document any future incidents.

No exceptions are noted for this indicator.

1.04 Training Requirements

Satisfactory

Limited

Failed

Rating Narrative

The agency has an approved policy signed by the Director of Youth Services dated 7/31/2016. The policy outlines that all direct care staff have a minimum of 80 hours of training within the first year and 24 hours for each full year of employment thereafter. The policy details several of the courses that are required according to the QI standards. However, the policy did not include the 'universal precaution' training that is required within the first 120 days from date of hire.

Per the agency policy, the agency utilizes a variety of training services throughout the year that may be provided by Florida Network, the Department, Nehemiah Educational & Economic Development, Inc., local community resources and various approved or certified local providers' personnel. The policy states that staff receive the necessary training that is essential to perform job specific functions.

There is an approved training plan for the current fiscal year that was electronically signed by the Director of Youth Services on 7/1/2017. It highlights the NEED agency's focus on ensuring that staff receive the necessary training and development as a contribution to the success of the program and service provision to the CINS/FINS families served. The training plan includes that each staff, volunteer, or intern will keep track of training hours by maintaining a personal training log for documentation. NEED, Inc. will be responsible for verifying all staff training and record on each staff individual training log.

Employee files include a contractual amendment agreement between the agency and the staff that includes the expectation of staff to designate and adhere to 4 hours per week in the office to allow for ensuring files are documented, paperwork is turned in, and training is completed and to attend meetings. The contractual amendment agreement includes that staff will complete training within the required time frame and discusses that failure to meet this expectation may result in a 30 day probationary period to allow for completion and failure to complete training will result in termination.

The agency provided five staff training files and all files reviewed contained a training log that list the staff members' name, date of hire, training title, hours planned for the training, provider or name of trainer, date of training, and hours completed. The training tracking log form for one administrative staff included trainings relevant for their role and was more individualized in comparison to the training tracking log form required for direct care staff. One training log did not have documentation that was consistent with the training listed.

The agency provides a comprehensive orientation that includes: CINS FINS Service Delivery Process, DJJ & FNYFS Mission and Vision Statements, Centralized Screening & Intake Assessment Process (including referrals, screening, intake assessment, needs assessment, risk assessment, service plan and review, discharge/termination), organizing files/checklist, Mandatory Abuse Reporting & CCC Reporting overview.

One staff file was reviewed for the required first year trainings. The training file included 80 hours of training for the clinical case manager. The following trainings were completed within the first 120 days as required: program orientation, suicide prevention, CINS FINS Core training, Signs and symptoms of MH and SA, CPR, First Aid, Equal Employer Opportunity, Sexual Harassment, Child Abuse Reporting, Information Security Awareness, Trauma Informed Care, PREA, Serving LGBTQ Youth, and Diversity. The staff training log reflects a total of 80 hours.

One direct care staff file was reviewed for ongoing annual training requirements and met all required

annual training requirements including suicide prevention, CPR, First Aid, Fires Safety Equipment, and PREA. The staff training log reflects a total of 25 hours.

One administrative staff file reviewed reflected a total of 17.5 hours from attending FNYFS Quality Improvement Committee and Executive Advisory events and included meeting minutes and agendas from events attended for the annual year.

Exceptions:

One file reviewed did not have supporting documentation to include 'Civil Rights' training is completed as part of the required ethics training as well as the 'Serving LGBTQ Youth' which is required within the first 120 days. There was one training completed outside of the required timeframe 'Fire and Safety Equipment'.

None of the files reviewed had evidence of 'Confidentiality' or 'Understanding Youth/Adolescent Development' training. During an interview with the Director of Youth Services, the agency has identified a trainer to provide the 'Understanding Youth/Adolescent Development' training that is required within the first 120 days. Dr. Robertson will provide this training to new staff and have a future training scheduled on January 25, 2018 between 6-8pm. According to the Director, Dr. Robertson will also be providing the training curriculum to allow the agency to provide the training to staff going forward.

1.05 Analyzing and Reporting Information

Satisfactory

Limited

Failed

Rating Narrative

The agency has an approved policy signed by the Director of Youth Services on 7/31/2016. The policy indicates that the program will collect and review data from several sources of information to identify patterns and/or trends. The sources of information include: quarterly case record review reports that may be completed by peers, quarterly review of incidents, accidents and grievances, annual review of customer satisfaction data, annual review of outcome data and monthly reviews of the NetMIS data reports. Per the program policy, the findings shall be reviewed regularly by management and communicated to staff and stakeholders.

The procedure indicates that the Director of Youth Services shall provide written reports or minutes that evidence an analysis of the aggregated data for the Executive Director that includes the various sources of information and data collection.

During interview with the Director of Youth Services, it was highlighted that the program has created an internal NEED CINS FINS tracker that is a weekly review of the file compliance concerning dates for referrals, screening, intake, need assessments, and the service plan. The program also captures dates for when the 30, 60, 90 day service plans are due as well as when they are actually completed. The Director states that this tracker is maintained on a weekly basis by the data coordinator through onsite reviewing of the hard copy files. After the CINS FINS tracker is updated by the data coordinator the Director of Youth Services follows up with program staff directly regarding any items that are showing as outstanding or need to be addressed on an ongoing basis. An example of this written communication was reviewed, and it was noted that the email provided guidance and clarification that outlined the process more clearly for staff to make sure that there is consistency in meeting program requirements and expectations. This form of written communication was clear and concise and provided immediate action to address any area of compliance and corrective action.

The Director of Youth Services indicated that she completes individual case record reviews on a quarterly basis. Upon review of the files sampled, there was evidence documented in the note section of the file along with a signature that a review was completed. During the interview, the Director of Youth Services stated that immediate verbal or written feedback is provided to staff to address any concerns highlighted

during the review.

The Director of Youth Services stated that staff have the opportunity to receive incentives for exceeding expectations or implementing new innovative ideas for the program.

The Director of Youth Services completes an annual report for the Executive Director that captures an overview of how the program performed over the fiscal year as well as any other critical information related to staff changes and the services provided by the program. The report specifically addresses that the program achieved 100% on the annual agency report card from the Florida Network and achieved 100% in deliverables including performance in conducting 133 assessments for the FY 16-17, which they were contracted to conduct 132.

An example of meeting minutes for June 2017 were reviewed that highlighted the agenda topics addressed during team meetings such as case file documentation, providing quality case management services, staff changes, summer plans for kids etc.

Exception:

While the program does complete the annual report that captures the annual review of outcome data, there was no evidence that an annual review of customer satisfaction data was discussed in the report provided. There were no written reports to demonstrate the quarterly case record review reports were completed and during the staff interview, it was mentioned that while this is discussed with staff informally, the Director of Youth Services plans to return to completing written reports to share this information in the future.

1.06 Client Transportation

Satisfactory Limited Failed

[Rating Narrative](#)

1.07 Outreach Services

Satisfactory Limited Failed

[Rating Narrative](#)

The agency has a policy for Nehemiah Educational and Economic Development program for CINS/FINS called 1.07 Outreach Services. The policy indicates the program will develop formal and informal interagency agreements essential to developing a comprehensive continuum of service to support the coordination of services for agency clients. The program will develop a written plan to address site specific outreach activities targeting youth who are most at-risk and most likely to become delinquent. The policy was last reviewed on August 1, 2016. The policy was signed and approved the agency's Director of Youth Services.

Procedures for the NEED program include a completed annual targeted outreach plan. The plan consists of establishing networking and partnership relationships with local organizations, entities and public and private agencies. This organizational plan supports the agency's goal of securing partnerships with various types activities to increase the local community's awareness of NEED and how to access its program services. The NEED agency still maintains an annual outreach plan that includes goals for 2017-2018. The plan identified three primary goals or outcomes in the area of prevention and outreach services. The plan identified enrichment programs, speakers' bureau, assigned designated staff to perform prevention and outreach services, targeted areas, interagency agreements informal linkages, participation in community boards, coalitions, and committees, committee needs assessment, informal service providers, formal service providers, law enforcement, and education/school system. The program

requires that outreach events and activities be entered into the NetMIS data base on a monthly basis.

A review of the current outreach practice was conducted. The program has established relationships and partners contacts with multiple agencies including local area high schools (Evans High School, Wekiva High School), local community-based organizations, faith-based organizations and various public/private entities such Fresh Start Academy, JAC Center, St. Mark AME Church. The agency provided evidence of attending recent DJJ board meetings in 2017. The program has established and maintains written interagency agreements with Orange County Government's Youth Shelter, Boys and Girls Clubs of Central Florida, Macedonia Missionary Baptist Church, and Robertson and Associates Psychological Services, LLC.

No exceptions to this indicator were found as of the date of the onsite QI review.

Standard 2: Intervention and Case Management

Overview

Rating Narrative

N.E.E.D is contracted with the Florida Network of Youth and Families to provide non-residential CINS/FINS services for youth and their families in Orange County. The program provides centralized screening and intake services during regular business hours. The program accepts referrals from established referral partners and local elementary, middle and high schools. The agency also receives referrals from youth, parents/guardians, and local community-based organizations. The agency trains staff members to screen for presenting problems, current risk and CINS/FINS eligibility criteria to determine the needs of the family and youth. The agency has screening, intake and assessment components to address a various array of issues presented by youth and their families. The agency conducts follow-up status checks on each former client after their discharge.

The agency employs a Psychologist to work with the agency on a contractual basis. This contracted staff member provides clinical oversight and access to a license professional to assist with any technical assistance related to mental health issues and suicide risks assessment. The case managers are responsible for completing assessments, developing case plans, providing case management services, and linking youth and families to community services.

Case staffings have not yet been conducted by the agency. However, the Case Staffing Committee (a statutorily-mandated committee that develops a treatment plan for habitual truancy, lockout, ungovernable, and runaway youth when all other services have been exhausted or upon request from the parents/guardians) would be prepared when the need arises.

2.01 Screening and Intake

Satisfactory

Limited

Failed

Rating Narrative

The agency Nehemiah Educational and Economic Development (NEED) has a written screening policy and procedure for the CINS/FINS program, titled Screening and Intake, Policy #2.01. The Screening and Intake Policy meets the general requirements of the indicator. The policy manual is current. The policy was last updated on 7/31/2015 and approved by the Director of Youth Service.

The policy and procedures state that the initial screening is completed within 7 calendar days of the referral to the program and documented on the CINS/FINS NetMIS screening form.

This policy further states once the screening process is completed, a face-to face appointment is scheduled with the youth and parent/guardian(s) for the initiation of the intake process. The CINS/FINS Case Manager is required to provide eligible families at the time of intake with a written copy of 1) available service options, 2) rights and responsibilities, and 3) parent brochure.

A total of Seven (7) files were reviewed. Four (4) files were active and three (3) were closed.

Seven (7) files indicated that contact was made with the family within 7 calendar days from the date of the referral. All 7 files that were reviewed had signed documentation from the client and parent that they received information at intake.

The parents and clients were given the "A Guide For Parents in Need Solutions for At-Risk Youth" brochure which describes the case staffing committee, and CINS petition process. Consent for services form, client rights and responsibilities, grievance procedures, confidential agreement, receipt of notice off privacy practices, youth rights and parent book were given to the client and parents. The latter is evidenced by singled forms listed in the file. The youth and parents received a copy of the service availability options in writing.

No exceptions to this indicator were found as of the date of the onsite QI review.

2.02 Needs Assessment

Satisfactory

Limited

Failed

Rating Narrative

There is a written policy and procedure titled Needs Assessment, Policy #2.02 and was last updated on 7/31/2015. Reviewed and approved by the Director of Youth Service, this policy and procedures adheres to all of the key elements of the indicator.

The agency completes a needs assessment for each incoming youth receiving services. The procedure details the process staff follows for the completion of the needs assessments. The assessments are to be initiated within the required time frames. All needs assessments include a suicide risk screening section.

Seven (7) files were reviewed for four (4) active files and three (3) closed files.

The needs assessments were completed in all seven (7) files within the required time and completed by a Bachelors or Masters level staff and with a supervisor's review signature upon completion.

All policies were adhered to with requirements pertaining to needs assessments and suicide assessments. One case needed a suicide assessment and was immediately referred to a licensed psychologist and an evaluation was completed (copy was found in the file).

No exceptions to this indicator were found as of the date of the onsite QI review.

2.03 Case/Service Plan

Satisfactory

Limited

Failed

Rating Narrative

There is a written policy and procedure titled Service Plan, Policy #2.03 and was last updated on 7/31/2015. It was reviewed and approved by the Director of Youth Service. This policy and procedures adheres to all of the key elements of the indicator.

The provider's policy requires Service Plans for non-residential youth to be completed within 7 days of the completion of the Needs Assessment and reviewed at minimum for the first three months (at 30, 60 and 90-day) for progress towards stated goals.

Seven (7) of seven (7) Service Plans completed contained service goals, type, frequency and location of services. The persons responsible for completing each goal, a target date for completion, and actual completion dates were also included in the Service Plans.

The service plans also include a section for the 30, 60 and 90 day reviews.

Each file had a service plan completed within the expected time frame. All treatment plans were completed the same day of the psychosocial assessment.

No exceptions to this indicator were found as of the date of the onsite QI review.

2.04 Case Management and Service Delivery

Satisfactory

Limited

Failed

Rating Narrative

There is a written policy and procedure titled Case Management & Economic Development, Policy #2.04, Family Involvement 2.4A, Case Termination 2.4B and they were last updated on 7/31/2015. They were reviewed and approved by the Director of Youth Service. This policy and procedures adheres to all of the key elements of the indicator.

The program policy requires the Case Manager to assess the need of the family by establishing referral needs and coordinates referrals by implanting the service plan; monitoring the youth's/family's progress; providing support; monitoring out of home placement if necessary; the pursuit of family engagement; as needed referrals to the case staffing committee to address the problems and needs of the family and recommending the pursuit of judicial intervention in selected cases and make additional referrals if needed. The program also requires to complete case termination and follow up.

The files showed written documentation of CM monitoring youth's/family's progress in services, as well as the monitoring of progress in services and family support and making referrals according to the treatment plan. All of the treatment plans were developed with the youth and parent as evidenced by the service plan signature of the parent, youth and CINS/FINS staff.

Three (3) of seven (7) cases reviewed were closed. All of the cases showed evidenced that a Counselor/Case Manager completed the discharge summary.

The 30 day follow up are presently due, but still within the allotted time frame of compliance.

No exceptions to this indicator were found as of the date of the onsite QI review.

2.05 Counseling Services

Satisfactory

Limited

Failed

Rating Narrative

There is a written policy and procedure titled Service Plan, Policy #2.05 and was last updated on 7/31/2015. They were reviewed and approved by the Director of Youth Service. This policy and procedures adheres to all of the key elements of the indicator.

The program policy requires the case manager/counselor coordinates service of the presenting problem by developing a psychosocial assessment, case/service plan, case/service plan reviews, the provision of case management, and follow up and monitoring of the youth and family. That all youth has an individual case file and adhere to all laws regarding confidentiality. The case has chronological case notes on the youth's progress. And there is an internal review process of the case.

Five (5) of seven (7) files reflected the youth and families received counseling services in accordance with the service plan. The files contained chronological progress notes, showing the coordination of services and referrals. All seven (7) of seven (7) cases had a confidential stamp on the outside of the file. And contained evidence of consent for services and treatment signed by the parent.

Exception:

Two (2) closed files of seven (7) files reviewed had inconsistent documentation during a certain time frame without showing follow up. In both cases the last entry, attempt to contact family, prior to discharge was made on 7/28/2017 and the discharge note was completed on 10/30/2017.

2.06 Adjudication/Petition Process

Satisfactory

Limited

Failed

Rating Narrative

The agency has a policy called Nehemiah Educational and Economic Development program for CINS/FINS 2.06 Incident Reporting/Abuse Free Environment. The policy requires that a case staffing committee meeting is scheduled to review the case of any youth or family that the program determines is in need of services or treatment. The policy was last reviewed on July 31, 2015. The policy was signed and approved the agency's Director of Youth Services.

The agency is required to ensure that the filing of CINS/FINS petitions and the process of adjudicating youth as a Child in Need of Services is active and available for all clients and families that want to use this process. The agency's case staffing policy lists what committee members must be included. The policy further states the NEED program has agreed to hold its case staffing with Orange County Youth Shelter. The program is required to hold a case staff meeting to review any case that the program determines to be in need of services of treatments. The program will also provide means to ensure that the case staffing is convened in 7 days; provide a new or revised plan for services and within 7 days of the meeting. A written report is provided to the parent/guardian outlining the committee recommendations.

A request was submitted by the reviewer to obtain any evidence of petition examples completed in the last six months by the agency. The agency's Director of Youth Services reported that the agency did not have any cases that required official filing of CINS/FINS petitions and or need for adjudication of a youth as a Child In Need of Services. The agency Director reported that the agency does advise all parents/guardians of the all available service options including filing of CINS/FINS petitions. The agency's Director also reported that the program has an agreement to conduct all case staffings with Orange County.

The agency is familiar with the current staffing process and is capable of facilitating the filing of a CINS/FINS petition. This includes the program understanding how to schedule a review of the circumstances involving a youth that may need to be determined as in Need of Services and Treatment. Further, the interview with the agency's Director of Youth Services resulted in her reporting the agency's understanding of the steps to ensure that the case staffing is convened in 7 days with the proper array of committee members and system partners. She is also aware of the need to provide a new or revised plan for services and within 7 days of the meeting, as well as a written report being provided to the parent/guardian outlining the committee recommendations.

No exceptions are noted for this indicator.

2.07 Youth Records

Satisfactory

Limited

Failed

Rating Narrative

The agency has a policy called Nehemiah Educational and Economic Development program for CINS/FINS 2.06 Youth Records. The policy requires that the agency have a process for assembling, securing, transporting and storing client files. The policy is required to be adhered to by all staff members and contract Case Managers. This is to ensure that the agency has an established practice of working with client and family information in a confidential and secure manner. The policy was last reviewed on July 31, 2015. The policy was signed and approved by the agency's Director of Youth Services.

The agency requires that client files be assembled in a standardized format for all persons that meet CINS/FINS eligibility requirements and are admitted to the program. All files are required to be stamped confidential on the outside of the file folder. Once a pre-assembled file is used for a client, all files are required to be stored in a metal multi-drawer file cabinet located in the main entrance of the program office.

The agency file cabinet was locked and marked confidential on the outside of the cabinet on the top drawer of the cabinet. The agency houses the cabinet in the main office area. All files in the cabinet were marked confidential. The agency has a mobile transport case exclusively for files. The case is to be used by Case Managers when they are transporting files offsite to service and meet with clients and families. The case is made of black plastic and has a locking key to secure confidential client and family information while providing services to clients outside of the agency office. All seven (7) files used to review Quality Improvement Standard 2 were stamped and marked confidential and organized in a standardized format.

No exceptions are noted for this indicator.

Standard 3: Shelter Care

Overview

[Rating Narrative](#)

3.01 Shelter Environment

Satisfactory

Limited

Failed

[Rating Narrative](#)

3.02 Program Orientation

Satisfactory

Limited

Failed

[Rating Narrative](#)

3.03 Youth Room Assignment

Satisfactory

Limited

Failed

[Rating Narrative](#)

3.04 Log Books

Satisfactory

Limited

Failed

[Rating Narrative](#)

3.05 Behavior Management Strategies

Satisfactory

Limited

Failed

[Rating Narrative](#)

3.06 Staffing and Youth Supervision

Satisfactory

Limited

Failed

Rating Narrative

3.07 Special Populations

Satisfactory

Limited

Failed

Rating Narrative

3.08 Video Surveillance System

Satisfactory

Limited

Failed

Rating Narrative

Standard 4: Mental Health/Health Services

Overview

[Rating Narrative](#)

4.01 Healthcare Admission Screening

Satisfactory

Limited

Failed

[Rating Narrative](#)

4.02 Suicide Prevention

Satisfactory

Limited

Failed

[Rating Narrative](#)

4.03 Medications

Satisfactory

Limited

Failed

[Rating Narrative](#)

4.04 Medical/Mental Health Alert Process

Satisfactory

Limited

Failed

[Rating Narrative](#)

4.05 Episodic/Emergency Care

Satisfactory

Limited

Failed

[Rating Narrative](#)