

STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

BUREAU OF QUALITY ASSURANCE
PROGRAM REPORT FOR

Family Resources - Bradenton
The Florida Network of Youth and Family Services
(Contract Provider)
361 6th Avenue West
Bradenton, Florida 34205

Review Date(s): September 20-21, 2011



PROMOTING CONTINUOUS IMPROVEMENT AND ACCOUNTABILITY
IN JUVENILE JUSTICE PROGRAMS AND SERVICES



WANSLEY WALTERS, SECRETARY
JEFF WENHOLD, BUREAU CHIEF

CINS/FINS Performance Rating Profile

Program Name: Family Resources - Bradenton

QA Program Code: 570

Provider Name: The Florida Network of Youth and Family Services

Contract Number: V2021

Location: Manatee County / Circuit 12

Number of Beds/Slots: 12

Review Date(s): September 20-21, 2011

Lead Reviewer Code: 25

Program Performance by Indicator/Standard

| 1. Management Accountability | | |
|------------------------------|--|------------|
| 1.01 | Background Screening of Employees/Vol. | 8 |
| 1.02 | Provision of an Abuse Free Environment | 8 |
| 1.03 | Incident Reporting | 7 |
| 1.04 | Training Requirements | 8 |
| 1.05 | Interagency Agreements and Outreach | 10 |
| 1.06 | Disaster Planning | 8 |
| Commendable | | 82% |

| 3. Shelter Care/Health Services | | |
|---------------------------------|-------------------------------------|------------|
| 3.01 | Shelter Care Requirements | 8 |
| 3.02 | Healthcare Admission Screening | 8 |
| 3.03 | Suicide Prevention | 8 |
| 3.04 | Medications | 5 |
| 3.05 | Medical/Mental Health Alert Process | 10 |
| 3.06 | Episodic/Emergency Care | 7 |
| Acceptable | | 77% |

| 2. Intervention and Case Management | | |
|-------------------------------------|--------------------------------------|------------|
| 2.01 | Screening and Intake | 8 |
| 2.02 | Psychosocial Assessment | 8 |
| 2.03 | Case/Service Plan | 7 |
| 2.04 | Case Management and Service Delivery | 8 |
| 2.05 | Counseling Services | 7 |
| 2.06 | Adjudication/Petition Process | 10 |
| Commendable | | 80% |

| Standard | Program Score | Max. Score | Rating | Failed 0-59% | Minimal 60-69% | Acceptable 70-79% | Commendable 80-89% | Exceptional 90-100% |
|-------------------------------------|---------------|------------|--------|--------------|----------------|-------------------|--------------------|---------------------|
| 1. Management Accountability | 49 | 60 | 82% | | | | X | |
| 2. Intervention and Case Management | 48 | 60 | 80% | | | | X | |
| 3. Shelter Care/Health Services | 46 | 60 | 77% | | | X | | |

Overall Program Performance

Acceptable 79%

Methodology

This review was conducted in accordance with FDJJ-1720 (Quality Assurance Policy and Procedures), and focused on the areas of (1) Management Accountability, (2) Intervention and Case Management, and (3) Shelter Care/Health Services, which are included in the Children/Families in Need of Services (CINS/FINS) Standards (July 2011).

Persons Interviewed

- | | | |
|---|--|---|
| <input checked="" type="checkbox"/> Program Director <input checked="" type="checkbox"/> DJJ Monitor <input type="checkbox"/> DHA or designee <input checked="" type="checkbox"/> DMHA or designee | _____ # Case Managers 2 # Clinical Staff _____ # Food Service Personnel _____ # Healthcare Staff | _____ # Maintenance Personnel 1 # Program Supervisors _____ # Other (listed by title): _____ |
|---|--|---|

Documents Reviewed

- | | | |
|--|---|---|
| <input type="checkbox"/> Accreditation Reports <input checked="" type="checkbox"/> Affidavit of Good Moral Character <input checked="" type="checkbox"/> CCC Reports <input type="checkbox"/> Confinement Reports <input checked="" type="checkbox"/> Continuity of Operation Plan <input checked="" type="checkbox"/> Contract Monitoring Reports <input checked="" type="checkbox"/> Contract Scope of Services <input checked="" type="checkbox"/> Egress Plans <input type="checkbox"/> Escape Notification/Logs <input type="checkbox"/> Exposure Control Plan <input type="checkbox"/> Fire Drill Log <input type="checkbox"/> Fire Inspection Report | <input checked="" type="checkbox"/> Fire Prevention Plan <input checked="" type="checkbox"/> Grievance Process/Records <input type="checkbox"/> Key Control Log <input checked="" type="checkbox"/> Logbooks <input checked="" type="checkbox"/> Medical and Mental Health Alerts <input type="checkbox"/> PAR Reports <input type="checkbox"/> Precautionary Observation Logs <input checked="" type="checkbox"/> Program Schedules <input type="checkbox"/> Sick Call Logs <input type="checkbox"/> Supplemental Contracts <input checked="" type="checkbox"/> Table of Organization <input type="checkbox"/> Telephone Logs | <input checked="" type="checkbox"/> Vehicle Inspection Reports <input type="checkbox"/> Visitation Logs <input checked="" type="checkbox"/> Youth Handbook 5 # Health Records 7 # MH/SA Records 6 # Personnel Records 6 # Training Records/CORE 3 # Youth Records (Closed) 5 # Youth Records (Open) _____ # Other: _____ |
|--|---|---|

Surveys

- | | | |
|-----------|-----------------------|----------------------|
| 1 # Youth | 5 # Direct Care Staff | _____ # Other: _____ |
|-----------|-----------------------|----------------------|

Observations During Review

- | | | |
|--|---|--|
| <input type="checkbox"/> Admissions <input type="checkbox"/> Confinement <input checked="" type="checkbox"/> Facility and Grounds <input checked="" type="checkbox"/> First Aid Kit(s) <input checked="" type="checkbox"/> Group <input checked="" type="checkbox"/> Meals <input type="checkbox"/> Medical Clinic <input type="checkbox"/> Medication Administration | <input checked="" type="checkbox"/> Posting of Abuse Hotline <input checked="" type="checkbox"/> Program Activities <input type="checkbox"/> Recreation <input checked="" type="checkbox"/> Searches <input type="checkbox"/> Security Video Tapes <input type="checkbox"/> Sick Call <input checked="" type="checkbox"/> Social Skill Modeling by Staff <input checked="" type="checkbox"/> Staff Interactions with Youth | <input checked="" type="checkbox"/> Staff Supervision of Youth <input type="checkbox"/> Tool Inventory and Storage <input type="checkbox"/> Toxic Item Inventory and Storage <input type="checkbox"/> Transition/Exit Conferences <input type="checkbox"/> Treatment Team Meetings <input type="checkbox"/> Use of Mechanical Restraints <input checked="" type="checkbox"/> Youth Movement and Counts |
|--|---|--|

Comments

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

Performance Ratings

Performance ratings were assigned to each indicator by the review team using the following definitions and numerical values defined by FDJJ-1720:

| | |
|-------------------------|--|
| Exceptional (10) | The program consistently meets all requirements, and a majority of the time exceeds most of the requirements, using either an innovative approach or exceptional performance that is efficient, effective, and readily apparent. |
| Commendable (8) | The program consistently meets all requirements without exception, or the program has not performed the activity being rated during the review period and exceeds procedural requirements and demonstrates the capacity to fulfill those requirements. |
| Acceptable (7) | The program consistently meets requirements, although a limited number of exceptions occur that are unrelated to the safety, security, or health of youth, or the program has not performed the activity being rated during the review period and meets all procedural requirements and demonstrates the capacity to fulfill those requirements. |
| Minimal (5) | The program does not meet requirements, including at least one of the following: an exception that jeopardizes the safety, security, or health of youth; frequent exceptions unrelated to the safety, security, or health of youth; or ineffective completion of the items, documents, or actions necessary to meet requirements. |
| Failed (0) | The items, documentation, or actions necessary to accomplish requirements are missing or are done so poorly that they do not constitute compliance with requirements, or there are frequent exceptions that jeopardize the safety, security, or health of youth. |

Review Team

The Bureau of Quality Assurance wishes to thank the following review team members for their participation in this review, and for promoting continuous improvement and accountability in juvenile justice programs and services in Florida:

Kent H. Rinehart, Lead Reviewer, DJJ Bureau of Quality Assurance
Lisa Baird, Program Director, Youth and Family Alternatives
Melissa Johnson, Delinquency Prevention Specialist, DJJ Prevention Services
Keith Carr, Principal Consultant, Forefront Consulting, LLC

Please note that this report refers to each indicator by number and title only. Please see the applicable standards for the full text of each indicator. The standards are available on the Bureau of Quality Assurance website, at <http://www.djj.state.fl.us/QA/index.html>.

Standard 1: Management Accountability



Overview

Family Resources of Manatee contracts with the Florida Network of Youth and Family Services to provide non-residential, emergency shelter and residential services to at-risk youth. The Executive Director oversees the activities of both the non-residential and the shelter facility. The shelter facility houses a Clinical Director, two master's level Counselors and a Supervisor position. There are six full-time Youth Care Worker positions and five part-time positions. The shelter is contracted for twelve beds. At the time of the review there were two youth admitted to the shelter. The shelter has been operational since June 19, 2000 and non-residential services have been provided since January 1, 1992. Family Resources of Manatee is operated by Family Resources Inc. located in St. Petersburg, Florida. Family Resources of Manatee provides non-residential services at the main counseling center and has a shelter that is located about a mile away. The shelter is a member of Safe Place, Inc. There was one staff vacancy at the time of the review.

1.01: Background Screening of Employees/Volunteers

Commendable (8)

- The program consistently met all requirements for this indicator without exception.

1.02: Provision of an Abuse Free Environment

Commendable (8)

- The program consistently met all requirements for this indicator without exception.

1.03: Incident Reporting

Acceptable (7)

- Documentation reviewed indicated three different youth missed one dose of medication on three separate occasions. The program's administration did not feel these met the definition of a reportable incident as defined in Florida Administrative Rule 63F-11. These three incidents were called into the Central Communications Center (CCC) by the review team. The program had previously reported a medication issue to the CCC.

1.04: Training Requirements

Commendable (8)

- The program consistently met all requirements for this indicator without exception.

1.05: Interagency Agreements and Outreach

Exceptional (10)

- The program had twenty-nine interagency written agreements and informal linkages to enhance the outcomes for families, children and the youth they served.
- The program participates in social networking. The program maintains a Facebook page website as an additional means of communication to the public. The web page is updated monthly and future event notices are sent to all contacts regularly.
- The program had an annual goal setting meeting, which included an Outreach Plan. Outreach Objectives were developed to ensure maximum utilization of program resources.
- The shelter was equipped with many resource brochures and pamphlets promoting services within the county that were available to all visitors.

1.06: Disaster Planning

Commendable (8)

- The program consistently met all requirements for this indicator without exception.

Standard 2: Intervention and Case Management



Overview

All referrals were screened for eligibility. The program completed psychosocial assessments and case/service plans for all youth. Each youth had a counselor that ensured the delivery of the program's services. The shelter is located about one mile from the main administrative counseling office in Bradenton. The shelter contracts with the Department of Juvenile Justice for twelve CINS/FINS beds. At the time of the review, there were two youth in the shelter. The program schedules case staffing committee meetings as needed or requested for any youth or family in need of services or treatment.

2.01: Screening and Intake

Commendable (8)

- The program consistently met all requirements for this indicator without exception.

2.02: Psychosocial Assessment

Commendable (8)

- The program consistently met all requirements for this indicator without exception.

2.03: Case/Service Plan

Acceptable (7)

- Three of the five case plans did not contain signatures of the parent. There were no documented reasons for the lack of parental signatures.

2.04: Case Management and Service Delivery

Commendable (8)

- The program consistently met all requirements for this indicator without exception.

2.05: Counseling Services

Acceptable (7)

- Documentation indicated group was not consistently offered five times a week. During the seven week period reviewed, group was held at least five times during three weeks, four times during three weeks and three times during one week.

2.06: Adjudication/Petition Process

Exceptional (10)

- The program has a set schedule of case staffing conferences set for the year. This allows all community partners to schedule the meetings and provides a positive turnout for the conferences.
- Parents were notified by telephone, e-mail and letter to ensure communication and attendance at the meeting.
- The new service plan is created during the meeting, signed by all parties and given to the youth/parent at that time.

Standard 3: Shelter Care/Health Services**Overview**

The shelter has been designated by the Florida Network to provide staff secure services, however the program reported they had not received any staff secure youth in the past year. The program is not licensed under Chapter 397. The youth admitted to the program are screened using the CINS/FINS Intake Form, the Centralized Intake Screening Form and Health Screening Form. If a youth answers “yes” to any of the six questions pertaining to suicide risk on the CINS/FINS Intake form, the program completes an Assessment of Suicide Risk. The knife-

for-life, wire cutters, and first aid kits are located in the medication room, kitchen and transport vehicle. All medications and sharps are stored in a locked box in the medication closet.

3.01: Shelter Care Requirements

Commendable (8)

- The program consistently met all requirements for this indicator without exception.

3.02: Healthcare Admission Screening

Commendable (8)

- The program consistently met all requirements for this indicator without exception.

3.03: Suicide Prevention

Commendable (8)

- The program consistently met all requirements for this indicator without exception.

3.04: Medications

Minimal (5)

- Documentation indicated three different youth missed one dose of prescribed medication (Tenex, Trileptal, Abilify). One additional youth was documented as missing one dose of her morning medication (aspirin) for two consecutive mornings. No adverse effects were documented for the youth missing the one dose of medication.
- The program is utilizing a Medication Administration Record (MAR) completed by facility staff rather than licensed medical professionals.

3.05: Medical/Mental Health Alert Process

Exceptional (10)

- The program identifies all youth with special medical and mental health issues during the admission process. All conditions are entered into the program log and identified through a color-coded dot alert system and a color-coded recording system in the daily logbooks.
- The program maintains an alert board that identifies youth issues through the color-coded system. All alerts were documented accurately.

3.06: Episodic/Emergency Care

Acceptable (7)

- The program had a written policy delineating episodic/emergency care requirements. The policy was not specific to the shelter and identified the emergency hospital locations for the Pinellas county shelters.

Overall Program Performance
Acceptable 79%

