



# **Florida Network of Youth and Family Services Quality Improvement Program Report**

Review of Urban League of Palm Beach County

on 04/18/2018

## 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

Marcia Tavares, Lead Reviewer, Consultant-Forefront LLC

Andrea Dean Haugabook, Director of Program Operations, Mount Bethel Human Services

Gabriel Medina, Regional Monitor, Department of Juvenile Justice

**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 checked="" 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 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                              |  |   |
| 1 Case Managers   | 0 Maintenance Personnel                              | 0 Clinical Staff                                    |
| 0 Program Supervisors                                       | 0 Food Service Personnel                             | 0 Other   |
| 0 Health Care Staff   |  |   |

**Documents Reviewed**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Accreditation Reports                        | <input checked="" type="checkbox"/> Fire Prevention Plan      | <input type="checkbox"/> Vehicle Inspection Reports |
| <input checked="" type="checkbox"/> Affidavit of Good Moral Character | <input checked="" type="checkbox"/> Grievance Process/Records | <input type="checkbox"/> Visitation Logs            |
| <input type="checkbox"/> CCC Reports                                  | <input type="checkbox"/> Key Control Log                      | <input type="checkbox"/> Youth Handbook             |
| <input type="checkbox"/> Logbooks                                     | <input checked="" type="checkbox"/> Fire Drill Log            | 0 # Health Records                                  |
| <input checked="" type="checkbox"/> Continuity of Operation Plan      | <input type="checkbox"/> Medical and Mental Health Alerts     | 0 # MH/SA Records                                   |
| <input type="checkbox"/> Contract Monitoring Reports                  | <input checked="" type="checkbox"/> Table of Organization     | 1 # Personnel Records                               |
| <input type="checkbox"/> Contract Scope of Services                   | <input type="checkbox"/> Precautionary Observation Logs       | 3 # Training Records                                |
| <input checked="" type="checkbox"/> Egress Plans                      | <input type="checkbox"/> Program Schedules                    | 4 # Youth Records (Closed)                          |
| <input checked="" type="checkbox"/> Fire Inspection Report            | <input type="checkbox"/> Telephone Logs                       | 4 # Youth Records (Open)                            |
| <input type="checkbox"/> Exposure Control Plan                        | <input checked="" type="checkbox"/> Supplemental Contracts    | 0 # Other   |

**Surveys**

0 Youth                      0 Direct Care Staff

**Observations During Review**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Intake                         | <input checked="" type="checkbox"/> Posting of Abuse Hotline | <input type="checkbox"/> Staff Supervision of Youth      |
| <input type="checkbox"/> Program Activities             | <input type="checkbox"/> Tool Inventory and Storage          | <input checked="" type="checkbox"/> Facility and Grounds |
| <input type="checkbox"/> Recreation                     | <input type="checkbox"/> Toxic Item Inventory and Storage    | <input 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

## **Strengths and Innovative Approaches**

### Rating Narrative

The Urban League of Palm Beach County (UL) is contracted with the Florida Network of Youth and Family Services (FNYFS), to provide direct services to Children/Families in Need of Services (CINS/FINS). The services to be provided are identified in Contract Section A, Descriptions and Specifications and Section B, Delivery and Performance and is funded with General Revenue Funds effective for July 2015 through June 30, 2019.

UL, located in West Palm Beach, Florida at 1700 North Australian Avenue, houses the offices for the CINS/FINS, Teen Outreach Program (TOP), and Youth and Educations programs. The agency has an annex building located at 2715 N Australian Avenue, Suite 1, for its Fiscal, Development, and Vice President's office. The offices are fully furnished and the building consists of a lobby, conference room, bathrooms, staff offices, cubicles, and kitchenette. Adequate spacing allows for family visitation, group session, or intake in a private office.

The agency offers multiple programs and services to youth and families. These services include: Crime Prevention/Intervention; School Drop-out Prevention; N.U.L.I.T.E.S. (Leadership training, academic support, life skills, and community service for youth ages 10-18); Youth Development; Support Coordination; and Comprehensive Housing Counseling, Home Buyer Education and Assistance, and Homeless Prevention Services. The agency is also funded to operate a Senior Community Service Employment Program (SCSEP) which is the only federal program targeted to help older workers. Each year, SCSEP enables thousands of low-income seniors to earn and learn while working in local programs serving their community. UL operates the SCSEP program in Broward and Miami Dade counties with a goal to serve 200 seniors.

UL partners with Palm Beach State College to run a workforce development project that serves un/under-employed individuals through its Urban Tech Program. Cohorts of 15 participants receive a stipend and paid tuition to earn an A+/Windows Certification.

The agency also operates a Clean Team program that is funded by the City of West Palm Beach (WPB) to provide a salary, uniforms, equipment, and supplies to 5 unemployed individuals to clean up the neighborhood 20 hours/week. The program allows its participants to transition into fulltime work with the City of WPB.

The CINS/FINS program provides a variety of services to at-risk youth residing in Palm Beach County and provides home and community based services that emphasize the importance of education, family unity, and access to community resources that aid the child/family in their effort to become self-productive. The program offers substance abuse and life skills groups, using the school model utilized by Safety Officers, once per month.

The Teen Outreach Program (TOP) is a free program for youth, grades 6-12, to participate in weekly education and recreation groups that also allow youth to earn community service hours. Some of the topics discussed in prior groups include: relationships, communication, goal setting, values, decisions making, and peer pressure.

## **Standard 1: Management Accountability**

### **Overview**

#### Narrative

UL provides non-residential community-based services for youth and their families in Palm Beach County, Florida. The CINS/FINS program is staffed by a Program Manager and 2 full time case management staff.

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 Sections 435.04 F.S. Personnel files and background screening for two new hires since the last onsite visit were reviewed.

The primary goal of 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. Upon hire by UL, staff are trained to conduct screening and assessment services to eligible youth and families. Training record for each staff is maintained in a training file. The training completed is documented on a training log that includes the name of the training, date, trainer's name, and hours. Supporting documentation is maintained in the training file. Staff are regularly scheduled by the Program Director to attend upcoming trainings as well as utilize the Florida Networks's training resources and SkillPro.

In addition to attending the local DJJ Circuit Meetings, the provider's case management staff conducts outreach activities.

### **1.01 Background Screening**

Satisfactory                       Limited                       Failed

#### Rating Narrative

The program has written policy and procedures in place regarding Background screening of employees/volunteers. The policy was updated on July 1, 2017.

The program's procedure indicated the program director is responsible for screening all employees and volunteers. The program director is also responsible for re-screening employees and volunteers every five years, and for the completion of an Annual Affidavit of Compliance and Good Moral Character Standards by the 31st of January of each year.

There was one new case manager staff member hired since the last quality improvement review. The review of the case manager file found that she received an eligible background screening prior to hire. There was no exception applicable or five-year re-screening applicable to any of the program's staff in this period. Documentation reviewed revealed the program completed and submitted the Annual Affidavit of Compliance and Good Moral Character Standards to the Department's Background Screening Unit (BSU) on January 8, 2018, prior to the January 31st deadline.

No exceptions noted for this indicator as of the QI review.

### **1.02 Provision of an Abuse Free Environment**

Satisfactory                       Limited                       Failed

#### Rating Narrative

The program has written policy and procedures in place regarding the provision of an abuse free environment. The policy was updated on July 1, 2017 and has been reviewed by staff. The program also has a code of conduct that prohibits the use of physical abuse, profanity, threats or intimidation.

The program procedure found staff has been trained to identify child abuse. Training documentation reviewed found the program staff

completed the Child Abuse Recognition, reporting, and prevention training in SkillProTeam. Abuse that occurs at the program is first immediately reported to the Florida Abuse Hotline, and the DJJ Central Communication Center (CCC). Abuse that occurs at youth's home is only reported to the Florida Abuse Hotline. Youth and program staff have unimpeded access to place a call to the Florida Abuse Hotline and Urban League staff without obtaining permission. If the youth goes through staff to obtain the use of the telephone, this is not considered impeding access unless staff refuses to allow the call to be made within a reasonable time frame. For program staff, failure to report abuse constitutes a second-degree misdemeanor.

The program had posted the Florida Abuse Hotline, the Central Communication Center (CCC) telephone number, and the grievance/compliance coordinator number. Observation indicated the program has CINS/FINS grievance forms, available for youth in the CINS/FINS room; however, the program doesn't need to have a grievance box as their procedures indicate grievances will be submitted to the program director. The program has a child abuse hotline log that was reviewed. The review of the log confirmed there were no reports of abuse in the program since the last review.

No exceptions noted for this indicator as of the QI review.

### 1.03 Incident Reporting

Satisfactory

Limited

Failed

#### Rating Narrative

The program has written policy and procedures in place regarding incident reporting. The policy was updated on July 1, 2017.

The program's procedures indicated staff have been trained in incident reporting. Incidents are reported to the Central Communications Center (CCC) as soon as possible, but no later than two hours after any reportable incident occurs, or within two hours of the program learning of the incident. When applicable the program documented all incidents in program logs and incident reporting forms. The program has a reportable incident types list for CINS/FINS programs that includes program disruption incidents, medical incidents, mental health and substance abused incidents, complaints against staff incidents, and youth behavior incidents.

In practice, the program has the CCC telephone number posted in different areas of the program. The program has an incident reports log that was reviewed. The review of the log found the program does not have any incidents reportable to the CCC since the last QI review.

No exceptions noted for this indicator as of the QI review.

### 1.04 Training Requirements

Satisfactory

Limited

Failed

#### Rating Narrative

The program has policy and procedures in place regarding training requirements, to ensure the program staff received training in the necessary and essential skills required to provide CINS/FINS services and perform specific job functions.

Training documentation reviewed found the program access training services through the Florida Network, local community resources, local providers, various local provider personnel approved or certified to deliver training, and the Department of Juvenile Justice SkillProTeam Learning Management System. The program maintained a training plan in place which includes list of required training topics for full-time, part-time, and on-call staff. The plan indicated direct care staff must complete a minimum of 80 hours of training for the first full year of employment, and 24 hours of training each year after the first year. The program maintains individual training files for each staff who includes related documentation for each training attended.

A total of three applicable staff training files were reviewed, one for first year of employment, and two for staff following the first year of employment. The review of the first year of employment training found the staff completed eighty-nine hours of training that includes all the mandatory topics, exceeding the required 80 hours of training, and the review of the two-staff following the first year of employment revealed that one staff completed 51 hours, and the other has completed 46 hours, both exceeding the required 24 hours of annual training. Both completed the training requirements for suicide prevention, CPR, First Aid, Fire Safety equipment, Bloodborne training, and PREA.

No exceptions noted for this indicator as of the QI review.

## 1.05 Analyzing and Reporting Information

Satisfactory

Limited

Failed

### Rating Narrative

The program has policy 1.05 in place for analyzing and reporting information. The policy was last reviewed on July 1, 2017. The policy addresses the requirement of the indicator.

Program procedures briefly address the program's review of case records monthly; quarterly review of incidents, accidents and grievances; review of monthly NetMIS data reports; and review of the six month report cards issued by the Florida Network to analyze program outcomes. The current procedures do not address the review of customer satisfaction data which is required at a minimum annually.

Per the current procedures, the Program Director (PD) along with staff and the contracted License Mental Health Counselor conduct case reviews on a monthly basis. The PD stated that the licensed professional conducts a review of the screening, intake, assessments, and service plans and signs off on the assessments. A separate case record review is conducted by the CINS/FINS staff and is documented on a 4 page case file review checklist.

The Florida Network distributes monthly NetMIS data reports which are reviewed by the PD and discussed with staff during staff meetings; corrective actions are implemented if needed. The PD reviews incidents, accidents, and grievances quarterly and discusses the trends at staff meetings. Upon receipt of the six-month report card from the Florida Network, the PD reviews the program outcomes with staff and makes improvements as needed.

A total of 46 cases were reviewed during the review period. Peer reviews were conducted monthly between the months of October 2017 and January 2018 but were not conducted between February and March 2018. Each case reviewed is documented by staff on a four-page checklist entitled Non-Residential CINS/FINS Case File Checklist. Areas of deficiency are noted in the comments section of the form for the appropriate area of the case reviewed. The checklist has a supervisor's signature line to be signed (at discharge) but it was not observed to be signed or dated for the majority of case reviews reviewed by the Reviewer. It was difficult to ascertain which staff completed the case review as that information was not clearly identified and the only identification of a staff's name on the checklist appeared under "Counselor Name". Peer reviews are discussed at the monthly staff meetings. A copy of the peer reviews completed is maintained in a binder by the PD.

The program has not had any reportable incidents, accidents, or grievances during the past year. Consequently, no reviews were necessary; however, there were no discussions of incidents, accidents, or grievances on the staff meeting agendas indicating a review/discussion with staff should they occur.

The CINS/FINS Program staff obtains client satisfaction surveys at case closure and enters them in NetMIS. As of the date of the visit, the program maintained a record of the satisfaction surveys entered into NetMIS but does not aggregate the survey results or conduct an annual review.

The program obtains a report card every six months from the Florida Network. Per the PD, the report card data on program performance is reviewed at staff meetings upon receipt. There was evidence of discussion at the February 2018 staff meeting of the July- December 2017 FN report card reporting program outcomes. Monthly NetMIS data reports are submitted by the FN to the program. Evidence of monthly reviews of the NetMIS data reports was observed during monthly staff meetings for the review period and a copy of report is maintained monthly along with staff meetings agendas.

Monthly staff meetings are held by the PD with program staff and were observed to be held each month during the period October 2017 – March 2018. Agendas for the staff meetings include a review of the monthly FN NetMIS data as well as issues related to NetMIS, peer record reviews, and programmatic deficiencies identified.

Exceptions:

The program's current policy and procedures 1.05 do not include procedures for the annual collection, review, and reporting of customer satisfaction data. The program collects and inputs consumer satisfaction surveys into NetMIS; however, as of the date of the visit, the program maintained a record of the satisfaction surveys entered into NetMIS but does not aggregate the survey results or conduct an annual review.

The program's procedures state peer record reviews will be conducted monthly by program staff; however, none was conducted for the months of February and March 2018. Peer record review documentation did not clearly identify peer conducting review versus case Counselor.

Monthly staff meetings are held to review program information and findings related to data the program collects and reviews. Although there were no incidents, accidents, or grievances during the review period, there was no evidence of any relevant discussion at the staff meetings held.

## 1.06 Client Transportation

Satisfactory

Limited

Failed

Rating Narrative

**This indicator is rated N/A for Non-residential programs**

**1.07 Outreach Services**

Satisfactory

Limited

Failed

Rating Narrative

The agency has a written policy and procedure #1.07 that addresses the requirement of the Florida Network QI Indicator 1.07. The policy was last updated on July 1, 2017. The policy requires the program to participate in local DJ Board and Council meetings as well as maintain written agreements with community partners that include services provided and ensure a comprehensive referral process.

The Program Director is the lead staff designated to attend the Circuit 15 DJJ Advisory Board meetings. All case managers are required to maintain a log of their outreach activities and efforts. In order to provide a wide range of services and referral sources the agency has established memorandums of understanding with a number of community partners including schools.

A review of Circuit 15 DJJ Advisory Board meeting attendance was conducted. The provider maintains copies of meeting minutes and agendas for the meetings in a red binder. It is evident the PD is an active participant at the Circuit 15 Board meetings and was in attendance at all of the meetings that were held monthly between October 2017 and March 2018. The meeting minutes include a list of attendees and are maintained on file. The PD or designee also attends the Circuit 15 Division meetings when they are held.

The Urban League has established MOUs with a variety of community partners including schools, housing authorities, after school program, crime/anger management prevention, IT services, religious, and alternative education. The MOUs are maintained in a binder and also include referral sources for mental health counseling, health services, grief and loss, therapeutic, and residential services.

Staff documents outreach activities in NetMIS and the PD retrieves and maintains records of the the NetMIS Outreach logs that captures these activities. A total of 8 outreach activities were documented for the QI review period including a job fair, community forum, and community events.

No exceptions noted for this indicator as of the QI review.



## Standard 2: Intervention and Case Management

### Overview

#### Rating Narrative

The UL is contracted with the Florida Network of Youth and Families to provide non-residential CINS/FINS services for youth and their families in Palm Beach County. The program provides centralized intake and screening during office hours Monday – Friday and accepts referrals from Palm Beach County Schools, parents/guardians, and local community organizations. Trained staff are available to determine the needs of the family and youth. In addition to screening and assessment, case management, group education, and substance abuse prevention education is also offered. Aftercare planning includes referring youth to community resources.

The CINS/FINS program consists of a Program Manager and two full time Case Managers. The Case Managers are responsible for completing assessments, developing case plans, providing case management services, and linking youth and families to community services.

As needed, UL coordinates 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. No case staffing requests were made in the past year by staff or parent/guardian.

During the QI review, 8 client files were reviewed for 4 open and 4 closed youth records.

### 2.01 Screening and Intake

Satisfactory
                         
  Limited
                         
  Failed

#### Rating Narrative

The agency has a written policy and procedure that addresses all of the key elements of the CQI indicator. The Urban League of Palm Beach County's policy number 2.01 regarding Screening and Intake does state that the last review date was July 1, 2017; however, the policy does not indicate who it was reviewed by.

The provider's procedure are clearly outlined and indicates that the CINS/FINS case manager shall screen each child and family. It details the services that shall be provided by referral and lists components of Centralized Intake consisting of: Screening for eligibility, Crisis Counseling and Information and Referral.

A total of 8 youth records were reviewed: 4 closed files and 4 open files. All files reviewed clearly indicated a referral date and a screening date within 7 calendar days of the referral. Screenings were present and complete in all files. Signed intake documentation in the client files showed: available service options, rights and responsibilities of the youth and guardians as well as a receipt of a parent/guardian brochure. The youth records contained indications that the parents were given information pertaining to possible CINS/FINS services (case staffing committee, CINS petition, CINS adjudication) and grievance procedures.

Additionally, a blank parent intake packet was reviewed and required intake documentation was contained within.

No exceptions noted for this indicator as of the QI review.

### 2.02 Needs Assessment

Satisfactory
                         
  Limited
                         
  Failed

#### Rating Narrative

The agency has a written policy and procedure that addresses all of the key elements of the CQI indicator. The Urban League of Palm Beach County's policy number 2.02 regarding Needs Assessment does state that the last review date was on July 1, 2017; however, the policy does not indicate who it was reviewed by.

The provider's procedure are clearly outlined and indicates that the needs assessment shall be initiated within 72 hours of admission, if the youth is in shelter care or within 2 to 3 face-to-face contacts following the initial intake if the youth is receiving non-residential services or updated if the most recent assessment is more than six months old.

This provider is completing a full psychosocial assessment on all youth. The assessment is completed by a Bachelor's or Master's level staff member and is signed by a supervisor who is licensed in Mental Health Care.

A total of 8 youth records were reviewed: 4 closed files and 4 open files. All files reviewed all contained a summary of the needs assessment

completed within the required time frame and signed by the staff member completing it and reviewed and signed by the supervisor. None of the youth records reviewed indicated an elevated risk of suicide.

No exceptions noted for this indicator as of the QI review.

### 2.03 Case/Service Plan

Satisfactory

Limited

Failed

#### Rating Narrative

The agency has a written policy and procedure that addresses all of the key elements of the CQI indicator. The Urban League of Palm Beach County's policy number 2.03 regarding Case/ Service Plan does state that the last review date was July 1, 2017; however, the policy does not indicate who it was reviewed by.

The provider's procedure are clearly outlined and indicates that the case/service plan is developed with the youth and family within 7 working days following the completion of the assessment. The plan is developed based on the information gathered during the initial screening, intake, and assessment. The case/service plan is also reviewed by the counselor and parent/guardian (if available) every 30 days for the first three months, and every six months thereafter, for progress in achieving goals, and for making necessary revisions to the case/ service plan, if indicated.

A total of 8 youth records were reviewed: 4 closed files and 4 open files. All files contained case/service plans which were completed within the required time frame. All service plans reviewed included identified needs, goals, type(s) of service, frequency, location, person(s) responsible, target date(s) for completion, actual date(s) of completion, signatures of client, parent/ guardian, counselor and supervisor, as well as the date the plan was initiated. The plans have signatures indicating dates of reviews at 26, 56, 84, and 98 days.

Exception:

Some case/service plans have signatures (youth, parent, and counselor) for review with no dates prior to the occurrence of that review taking place.

### 2.04 Case Management and Service Delivery

Satisfactory

Limited

Failed

#### Rating Narrative

The agency has a written policy and procedure that addresses all of the key elements of the CQI indicator. The Urban League of Palm Beach County's policy number 2.04 regarding Case Management and Service Delivery does state that the last review date was July 1, 2017; however, the policy does not indicate who it was reviewed by.

The provider's procedure states that each youth is assigned a case manager who will follow the youth's case and ensure delivery of services through direct provision or referral. The process of case management includes:

1. 1. Establishing referral needs and coordinating referrals to services based upon the on-going assessment of the child's/ family's problems and needs;
2. 2. Coordinating service plan implementation;
3. 3. Monitoring child's/ family's progress in services;
4. 4. Providing support for families;
5. 5. Monitoring out of home placement, if necessary
6. 6. Referrals to the case staffing committee, as needed to address the problems and needs of the child/family;
7. 7. Recommending and pursuing judicial intervention in selected cases;
8. 8. Accompanying child and parent(s) to court and related appointments, if applicable;

- 9. Referral to additional services, if needed;
- 10. Continued case monitoring and review including court orders;
- 11. Case termination with follow-up

A total of 8 youth records were reviewed: 4 closed files and 4 open files. All files contained provision and documentation of case management. There were no out-of-home placements in the files reviewed and no case staffing or court orders. Files are being reviewed as indicated in case notes. All case notes also have supervisory review.

There are no 30 or 60 day follow-ups available for review. Program Director and case manager indicate that the follow-ups are completed in NetMIS and not printed out. Current data reports to indicate that the 30 and 60 day follow-ups are 100% completed for this provider.

No exceptions noted for this indicator as of the QI review.

## 2.05 Counseling Services

Satisfactory
  Limited
 Failed

### Rating Narrative

The agency has a written policy and procedure that addresses all of the key elements of the CQI indicator. The Urban League of Palm Beach County's policy number 2.05 regarding Counseling Services does state that the last review date was July 1, 2017; however, the policy does not indicate who it was reviewed by.

The provider's procedure describes how youth access services, targeting at-risk youth, who provides the service and it also goes on to describe the provider's suicide risk screening and needs assessment.

A total of 8 youth records were reviewed 4: closed files and 4 open files. All files contained case/service plans that outlined counseling services, frequencies, targeted completion dates, etc. Each file contained a needs assessment which addresses presenting problems. All case notes document progress or lack of. Counseling services are referred out. Life skills and substance abuse education are conducted by the agency staff.

No exceptions noted for this indicator as of the QI review.

## 2.06 Adjudication/Petition Process

Satisfactory
  Limited
 Failed

### Rating Narrative

The provider has a policy and procedure 2.06 for Adjudication/Petition Process that was last reviewed July 1, 2017. Program staff initiates case staffing as needed and/or requested.

The adjudication process is requested if: family/child not participating in services, or family/youth not in agreement with the services or treatment offered, or the CINS/FINS program receives a written request from a parent/guardian or any other member of the committee. The Committee, which must convene within seven (7) work days after receipt of a written request from a parent or guardian, must include a representative from the youth's school district and a representative from the contracted CINS/FINS provider and may include others as deemed necessary (such as representatives from the areas of health, mental health, social services and substance abuse, Department of Juvenile Justice, a representative from the State Attorney's Office, an alternative sanctions coordinator, the youth, the parent/guardian, and any person recommended by the youth, family or department.

The youth and family are notified of the scheduled Case Staffing at least (5) working days prior and the result of a Case Staffing Committee is to be a written report to the youth's parent/guardian within seven (7) days afterward outlining the committee's recommendations and reasoning. The committee is to provide a new or revised plan for services addressing the problems and needs of the child, needs of the parent/guardian, measurable objectives that address the identified problems and needs and services and treatments to be provided including: types of services or treatment, frequency of services or treatment, location, accountable service providers or staff, and time frames for achieving objectives.

Urban League has not had any case staffing since June 2015. Consequently, there is no practice to evaluate this indicator.

No exceptions noted for this indicator as of the QI review.

## 2.07 Youth Records

Satisfactory

Limited

Failed

### Rating Narrative

The agency has a written policy and procedure that addresses all of the key elements of the CQI indicator. The Urban League of Palm Beach County's policy number 2.07 regarding Youth Records does state that the last review date was July 1, 2017; however, the policy does not indicate who it was reviewed by.

The provider's procedure indicates that all records are marked "Confidential" and kept in a secure room or locked in a file cabinet that is marked confidential, which is accessible to the program staff. All records are transported in locked opaque containers marked confidential, and all records are maintained in a neat and orderly manner so that staff can quickly and easily access information.

A total of 8 youth records were reviewed: 4 closed files and 4 open files. All files reviewed clearly marked confidential on the outside of the file and several places within the file. The reviewer did observe locked file cabinets in the office where the CINS/FINS files are stored and the file cabinets are marked confidential as well as the locked box for transporting files. The Program Director serves as the primary key holder for the file cabinets and in his absence the key is given to the receptionist who maintains a sign-out log for the key.

No exceptions noted for this indicator as of the QI review.

## **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

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#### **3.07 Special Populations**

Satisfactory                       Limited                       Failed

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#### **3.08 Video Surveillance System**

Satisfactory                       Limited                       Failed

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## Standard 4: Mental Health/Health Services

### Overview

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#### 4.01 Healthcare Admission Screening

Satisfactory                       Limited                       Failed

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#### 4.02 Suicide Prevention

Satisfactory                       Limited                       Failed

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#### 4.03 Medications

Satisfactory                       Limited                       Failed

Rating Narrative

#### 4.04 Medical/Mental Health Alert Process

Satisfactory                       Limited                       Failed

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#### 4.05 Episodic/Emergency Care

Satisfactory                       Limited                       Failed

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