



Florida Network of Youth and Family Services Quality Improvement Program Report

Review of Thaise Educational & Exposure Tours - Jacksonville
Non-Residential Program

May 8, 2019

Compliance Monitoring Services Provided by

 **FOREFRONT**



Quality Improvement Review

Thaise Educational & Exposure Tours - Jacksonville – 5/8/2019

Lead Reviewer: Keith Carr

CINS/FINS Rating Profile

Standard 1: Management Accountability

1.01 Background Screening	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 & Service Delivery	Satisfactory
2.05 Counseling Services	Satisfactory
2.06 Adjudication/Petition Process	Satisfactory
2.07 Youth Records	Satisfactory
2.08 Sexual Orientation, Gender Identity, Gender Expression	Satisfactory

Percent of indicators rated Satisfactory: 100.00%

Percent of indicators rated Limited: 0.00%

Percent of indicators rated Failed: 0.00%

Standard 3: Shelter Care & Special Populations

3.01 Shelter Environment	Not Applicable
3.02 Program Orientation	Not Applicable
3.03 Room Assignment	Not Applicable
3.04 Log Books	Not Applicable
3.05 Behavior Management Strategies	Not Applicable
3.06 Staffing and Youth Supervision	Not Applicable
3.07 Special Populations	Satisfactory
3.08 Video Surveillance	Not Applicable

Percent of indicators rated Satisfactory: 100.00%

Percent of indicators rated Limited: 0.00%

Percent of indicators rated Failed: 0.00%

Overall Rating Summary

Percent of indicators rated Satisfactory: 100.00%

Percent of indicators rated Limited: 0.00%

Percent of indicators rated Failed: 0.00%



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Rating Definitions

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

Satisfactory Compliance	No exceptions to the requirements of the indicator; limited, unintentional, and/or 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.

Reviewer

Members

Keith Carr - Lead Reviewer Consultant-Forefront LLC/Florida Network of Youth and Family Services

Mike Marino - Regional Monitor, FL Department of Juvenile Justice

Javis Mays - Sr. Case Manager, Nehemiah Educational and Economic Development (NEED)



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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 2018).

Persons Interviewed

- | | | |
|--|--|---|
| <input type="checkbox"/> Chief Executive Officer | <input checked="" type="checkbox"/> Executive Director | <input type="checkbox"/> Chief Operating Officer |
| <input type="checkbox"/> Chief Financial Officer | <input type="checkbox"/> Program Director | <input checked="" type="checkbox"/> Program Manager |
| <input type="checkbox"/> Program Coordinator | <input type="checkbox"/> Direct – Care Full time | 1 # Case Managers |
| <input type="checkbox"/> Direct – Part time | <input type="checkbox"/> Direct – Care On-Call | 1 # Program Supervisors |
| <input type="checkbox"/> Volunteer | <input type="checkbox"/> Intern | _____ # Food Service Personnel |
| <input type="checkbox"/> Clinical Director | <input type="checkbox"/> Counselor Licensed | _____ # Healthcare Staff |
| <input checked="" type="checkbox"/> Counselor Non-Licensed | <input checked="" type="checkbox"/> Case Manager | _____ # Maintenance Personnel |
| <input type="checkbox"/> Advocate | <input type="checkbox"/> Human Resources | 2 # Other (listed by title): _____ |
| <input type="checkbox"/> Nurse – Full time | <input type="checkbox"/> Nurse – Part time | |

Documents Reviewed

- | | | |
|---|---|---|
| <input type="checkbox"/> Accreditation Reports | <input checked="" type="checkbox"/> Table of Organization | <input type="checkbox"/> Vehicle Inspection Reports |
| <input checked="" type="checkbox"/> Affidavit of Good Moral Character | <input checked="" type="checkbox"/> Fire Prevention Plan | <input type="checkbox"/> Visitation Logs |
| <input type="checkbox"/> CCC Reports | <input checked="" type="checkbox"/> Grievance Process/Records | <input checked="" type="checkbox"/> Youth Handbook |
| <input type="checkbox"/> Logbooks | <input type="checkbox"/> Key Control Log | 0 # Health Records |
| <input checked="" type="checkbox"/> Continuity of Operation Plan | <input checked="" type="checkbox"/> Fire Drill Log | 0 # MH/SA Records |
| <input type="checkbox"/> Contract Monitoring Reports | <input type="checkbox"/> Medical and Mental Health Alerts | 0 # Personnel /Volunteer Records |
| <input type="checkbox"/> Contract Scope of Services | <input type="checkbox"/> Precautionary Observation Logs | 5 # Training Records |
| <input checked="" type="checkbox"/> Egress Plans | <input type="checkbox"/> Program Schedules | 6 # Youth Records (Closed) |
| <input type="checkbox"/> Fire Inspection Report | <input type="checkbox"/> Supplemental Contracts | 2 # Youth Records (Open) |
| <input type="checkbox"/> Exposure Control Plan | <input type="checkbox"/> Telephone Logs | _____ # Other: _____ |

Surveys

0 # Youth **0** # Direct Care Staff **0** # Other: _____

Observations During Review

- | | | |
|---|--|--|
| <input checked="" 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 checked="" type="checkbox"/> Signage that all youth welcome |
| <input type="checkbox"/> Medication Administration | <input type="checkbox"/> Staff Interactions with Youth | |
| <input type="checkbox"/> Census Board | | |

Comments

Additional Comments regarding observations, other important findings of interest, etc.

Strengths and Innovative Approaches

Rating Narrative

The TEET Jacksonville program is moving towards accepting court-ordered referrals. Additionally, the agency has also been working to increase the numbers of capital FYRAC eligible youth within the program.

The agency has been attending local DJJ District 4 meetings. The TEET agency has been working to establish additional partnerships in its metropolitan service area. The agency participated in a local career fair that occurred in February 2019. The agency has also participated in meetings with the local Children's Services Council called Kids Hope Alliance. Furthermore, the agency has been working with children in the program on an event called Vision Board Day.

The agency collaborated with the University of Florida Health and the agency's partnership with UF Health involves them providing education, awareness, information, and events around the topics of healthy living essentials, life skills, and anger management.

The agency provided youth in the program with opportunities to visit local colleges and universities in the region that are located both in and out of state. The agency participated in a college fair at Prime Osborne, Florida Agricultural and Mechanical University (local college recruiting event in Jacksonville), Savannah College of Art and Design, and Military Day.

The TEET Jacksonville agency reports that it has one current vacant position. The position that is vacant is the case managers position. The agency's program manager stated that they have been advertising to fill this position and expect it to be filled within 30 days.

The agency has an in-house quality assurance staff person. This person conducts an internal program service audit. This person primarily reviews the accuracy and completeness of case managers' paperwork that is used to provide services to eligible children and their families.



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Standard 1: Management Accountability

Overview

Narrative

The Thaise Educational and Exposure Tours (TEET) Jacksonville is located at 728 Blanche St, Suite 115b, Jacksonville, Florida. The TEET Jacksonville program is currently staffed by Teresa Clove, Executive Director at the time of this onsite program review.

The TEET staff are trained to conduct screenings and assessment services to youth and families that meet the CINS/FINS criteria.

The agency's Executive Director oversees the operations at a total of three (3) TEET locations. The TEET-Jacksonville program ensures that Level 2 background screening is a mandatory requirement for all 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. The agency ensures that all staff members meet minimum professional credentials and are provided the necessary training to perform their job responsibilities. 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. The agency also attends DJJ Juvenile Advisory Board Meetings.

1.01 Background Screening of Employees/Volunteers

Satisfactory

Limited

Failed

Rating Narrative

The agency has a background screening policy named Thaise Educational and Exposure Tours (TEET) Background Screening Policy. The policy was last reviewed by the Board of Directors and meets the requirements for this indicator in July 2018

The program has a policy in place regarding initial background screening. The program completes a Level 2 employment screening prior to being hired or utilized as a volunteer. No applicant may be hired nor may the services of any volunteer or intern be utilized, until the background screening has been completed and the applicant determined eligible. Applicant will successfully pass a preemployment assessment for direct care positions.



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The program has a policy in place regarding initial background screening. Since the last annual compliance review the program hired five new employees. All of the new employees were background screened and received clearance prior to being hired. The Affidavit of Compliance with Level 2 Screening Standards was completed on January 14, 2019, prior to the January 31st deadline. The program had one applicable staff for five-year rescreening to which the rescreening was completed. Each of the four new hires had a pre-assessment tool completed either before hire date or date of hire. The program uses the Avatar Employment Tests as their pre-assessment tool. However, the program has not set a passing score as of the review.

The agency has a pre-employment assessment, called Human Resources Avatar, which measures the applicant's cognitive abilities, knowledge and skills, personality characteristics, behavioral history, and emotional intelligence.

The two (2) out of 2 new hires were determined to have passed the pre-employment screening successfully prior to their date of hire. All eligible new hires have evidence of a background screening completed in their employee record prior to hire.

The (2) out of 2 files reviewed for 5 year rescreens were documented to have the completed background screens completed prior to the 5-year anniversary hire date.

The Annual Affidavit of Compliance with Good Moral Character Standards form was submitted to the BSU on January 15, 2019, which is in compliance with submission prior to the required timeframe January 31st 2019.

Exceptions:

No Exceptions noted in the indicator.

1.02 Provision of an Abuse Free Environment

Satisfactory

Limited

Failed

Rating Narrative

The agency has a policy on Provision of an Abuse Free Environment. The policy was last reviewed on June 9, 2018 by the Board of Directors.

The program procedures indicate all clients have the right to call in an abuse report at any time. The procedures require them to post informational signs which advise and inform clients of their unhindered right to call the Abuse Registry. The procedures give instructions for incidents which occur while youth are in the program, and for those



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which occur in the home or community. When an incident of abuse, or allegation of suspected abuse is made, this must be reported first to the Florida Abuse Hotline, and then to the Department of Juvenile Justice Central Communications Center. In situations when abuse occurs in the home, only the Florida Abuse Hotline will be called.

The procedures indicate that when a youth asks for help making a call, the staff will dial the number and allow the child to make their report. The procedures allow for the youth to make the call on their own or with staff. This decision is made at the client's discretion. Once a call has been made, staff will notify the supervisor, who will log the call. The procedures also allow for reporting to be made to the Florida Abuse Hotline by way of fax. When this route of reporting is used, the report should include the following: Name and address of parent(s) or guardian(s) or other person's responsible for the child's welfare Child's age, race, sex, and sibling(s) name(s) Nature and extent of abuse or neglect Identity of abuser, if known Reporters name address and telephone number, if desired Other information the reporter believes would be helpful in establishing the cause of injury or neglect Directions to the child's location at the time of the report Lastly the policy requires the completion of an incident report whenever a client makes a call to the Abuse Registry.

The TEET Jacksonville program has a code of conduct that prohibits the use of physical abuse, profanity, threats and intimidation. There are visible signs of the Florida Abuse Hotline poster posted throughout the office. All applicable staff receive Child Abuse Reporting training, with the only exception being 1 contracted employee that conducts audits.

The program has a grievance box located at the office that is available to both staff and youth. The program has not had any grievances or hotline calls since the last onsite review.

Exceptions:

No Exceptions noted in the indicator.

1.03 Incident Reporting - DJJ

Satisfactory Limited Failed Not Applicable

Rating Narrative

The program has a policy for incident reporting stating incidents must be reported consistent with DJJ requirements and that reportable incidents will be reported to the



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DJJ Central Communications Center within two hours of the program becoming aware of an incident. The policy was reviewed on June 2018.

The program has a policy and procedure in place to address the DJJ incident reporting requirements.

The program has a form for staff to complete and document any reported incidents. The form specifically captures incidents and lists the incidents in their respective categories based on incident type.

Each monthly forum reviewed documented no incidents. The program has not reported any incidents to the CCC since their last review in February 2018.

Exceptions:

No exceptions are noted for this indicator.

1.04 Training Requirements

Satisfactory

Limited

Failed

Rating Narrative

The agency has a training policy named Thaise Educational and Exposure Tours (TEET) Training Policy. The policy was last reviewed by the Executive Director and the Board of Directors on June 9, 2018 and meets the requirements for this indicator.

The program indicates they will develop and monitor a Training Plan which is reviewed annually and revised in accordance with the assessment of training needs. All Thaise staff shall have 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.

Required training for the first year must include the following topics and must be completed within 120 days of hire: Local provider Orientation Training, CINS/FINS CORE Training, Suicide Prevention, Signs and Symptoms of Mental Health and Substance Abuse, CPR and First Aid, Understanding Youth/Adolescent Development, Child Abuse Reporting, Confidentiality, and Universal Precautions.

The following additional training must be completed within the first year of employment:

An in-service component, which addresses specific on-the job training for the following areas; Fire Safety Equipment Training, Serving LGBTQ Youth, and Cultural Humility.

The following DJJ SkillPro Learning Management System Training Courses are also required:



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Course #45 Information Security Awareness
Course #110 PREA
Course #111 Sexual Harassment
Course #112 EEO
Course #125 Trauma Informed Care
Course #127 Suicide Prevention Training Part 1
Course #193 Suicide Recognition: Prevention Training Part 2
Course #168 Child Abuse: Recognition, Reporting and Prevention
Course #316 Human Trafficking 101

The TEET Jacksonville program maintains an individual training file for each staff person, which includes an Annual Training Hours tracking form and related documentation. There were a total of five (5) staff members training files reviewed onsite. Of these 5 files, four (4) were existing staff members and one (1) was a recently hired Case Manager. The new hire had evidence of completing a total of fifty-one (51) training hours since her 03/21/2019 hire date. At the time of this onsite program review, the new hire had completed 2 of the 9 SkillPro training topics required to be completed within the first 120 days of hire. This recent is still within the 120 days from the date of hire timeframe to have all SkillPro training topics completed. Of the four (4) on-going staff members, 3 of the of these staff persons work directly with youth and families admitted to the program. The remaining staff person is a Data Entry Clerk with primary job duties that do not entail her providing direct services to children. All on-going staff persons have evidence of 24 hours of training. Additionally, the staff persons have documentation of completing CPR/First Aid, suicide prevention, signs and symptoms of mental health, universal precautions, fire safety and trauma informed care.

Exceptions:

There were no exceptions noted for this indicator.

1.05 Analyzing and Reporting Information

Satisfactory

Limited

Failed

Rating Narrative

Thaise has a policy for analyzing and reporting information, stating the program collects and reviews several sources of information to identify patterns and trends. The policy was reviewed on June 2018.



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The procedure reflects the requirement of the indicator, stating the program will complete monthly or quarterly reports of records, incidents, NETMIS, and other requirements. The findings are to be reviewed by management and communicated to staff and the Board of Directors. As strengths and weaknesses are identified in the reports or reviews, improvements or modifications are to be implemented and staff are to be informed and involved in the process.

Staff meeting minutes reflected monthly staff meetings with the exception of October 2018. The minutes documented review of client information and staff practices for the multiple Thaise sites. The minutes documented agency progress on deliverables and outcomes as well as other information, such as program outreach, workshops, and tours completed. All of the updates and information was shared with staff and minutes identified if improvement was needed. Thirty-day and sixty-day NETMIS reviews were documented.

The program has youth and parents/guardians complete satisfaction surveys upon discharge. The program director reported the information from the surveys is not compiled, though they are reviewed at staff meetings if any issues are identified in the surveys. Three youth surveys and three parent/guardian surveys were reviewed and all gave positive evaluations of the program.

The program has a contracted in-house auditor, who is contracted to complete monthly reviews of case files. The in-house auditor is to review files and make notes if corrections are needed, sharing the information with the program director and meeting with staff if there are questions in reference to her review.

Exception

No exceptions were noted for this indicator.

1.06 Client Transportation

Satisfactory Limited Failed Not Applicable

Rating Narrative

This rating does not apply to Non-Residential Providers.

Exception

No exceptions noted.



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1.07 Outreach Services

Satisfactory

Limited

Failed

Not Rated

Rating Narrative

The agency has a policy that addresses Outreach Activities. The policy was last reviewed on June 9, 2018 by the Board of Directors.

The agency's Executive Director has procedures in place to execute the procedures required to implementing the agency's outreach initiatives. The agency requires all staff that carry a caseload to market and promote the agency's services when working in the general community. The agency requires all staff to create new relationships with other community-based programs and organizations that include local Duval County elementary, middle and high schools. Other local organizations and events that staff are required to partner with include local community health and mental organizations, boys and girls club and general community-wide health and wellness awareness events that are conducted throughout the calendar year. An additional procedure unique to the agency is that the agency maintains relationships with colleges and universities and offers and arranges on campus tours to expose high achieving clients the opportunity to see and experience a post-secondary institution while in the program.

The program has a policy for linkage to local community services/outreach services. The policy states the program offers prevention and outreach services to the communities they serve, which include increasing community awareness and offering informational and educational CINS/FINS services to youth and families.

The procedure states program staff are to promote awareness about the program and services provided through outreach events and activities that include entities involved in the services to youth, such as schools, law enforcement, churches, the Department of Juvenile Justice and other youth service entities, and the general public.

The program director reported the program has engaged in extensive community outreach efforts since the last review in February 2018. The community outreach has addressed identification of services available, to include communicating services provided by the program to the community, and coordination of services by the various service providers in the Jacksonville area. Documentation reviewed found the program has entered twenty partnership agreements with various community and services agencies since the last review in February 2018. Additionally, the program had approximately twenty partnership agreements in place prior to 2018. Community and service agencies entering the partnership agreements with the program include law



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enforcement, mental health and substance abuse treatment service providers, healthcare provides, city entities, education and vocational services, volunteer agencies, other DJJ contracted services providers, and other agencies who serve the population the program serves.

The program taken youth on tours of colleges and universities, to include the Florida State College Jacksonville, Bethune Cookman University, the University of North Florida, and the University of Florida. The program participated in a national college fair and college signing day, where youth were given the opportunity to meet with representatives from various colleges and universities and apply for and/or receive scholarships. The program also participated in a career fair, which included law enforcement, fire and rescue, two electric companies, Amazon, and other local employers.

The TEET Jacksonville program provided documented evidence that the agency has attended bi-monthly Juvenile Justice Advisory Board meetings, which include several agencies involved in serving juveniles. The program also participated on the City of Jacksonville's Task Force on Safety and Crime Reduction.

Exceptions:

None are documented for this indicator.

Standard 2: Intervention and Case Management

Overview

Rating Narrative

The Thaise Educational and Exposure Tours (TEET) Jacksonville location is contracted with the Florida Network of Youth and Families to provide non-residential CINS/FINS services for youth and their families in Pinellas County. They target at-risk youth from ages 6-17 who may be exhibiting behavioral and academic issues and 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 all 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 Program Manager and Therapist are responsible for completing assessments, developing case plans, providing case management services, and linking youth and



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families to community services. Thaise provides college tours within Florida at least one-three times a year to expose the youth to possible college/university choices. Once a month, they provide an enrichment opportunity where a professional guest speaker will share their story or focus on a specific topic i.e. life skills, anger management, or substance use prevention.

2.01 Screening and Intake

Satisfactory

Limited

Failed

Rating Narrative

The agency has a written policy in place titled Screening and an additional policy titled Intake. These policies were last reviewed on June 9, 2018 by the Board of Directors.

The providers procedures require that the initial screening for eligibility will occur within (7) calendar days of a referral by a trained staff using the NETMIS screening form. It also requires that families receive the following during the intake process: Available service options; Rights and responsibilities of youth and parents/guardians; Possible actions occurring through involvement with CINS/FINS, Domestic Violence and probation respite cases; and Grievance procedures.

Centralized services include screening for eligibility, crisis counseling and information, and referral. The initial screening for eligibility must occur within seven (7) calendar days of a referral by a trained staff member using the NetMis Screening form.

Youth and parents receive the following in writing during intake: Available service options and Rights and Responsibilities of youth and parent/guardians and the following information is also available to youth and parents/guardians: Possible Actions occurring through involvement with CINS/FINS services and Grievance Procedures.

Six out of six case files met policy expectations. The initial screenings for eligibility for all six folders occurred within the seven days of a referral by a trained staff member. All youth and parents/guardians received available service options and rights and responsibilities of youth and parents/guardians. All youth and parents/guardians also received information regarding possible actions occurring through involvement with CINS/FINS services and grievance procedures.

Exceptions:

No exceptions are documented for this indicator.

2.02 Needs Assessment

Satisfactory

Limited

Failed

Rating Narrative

The agency has a written policy in place titled Needs Assessment. The policy was last reviewed on June 9, 2018 by the Board of Directors.

The providers procedures require for youth receiving non-residential services that a Needs Assessment should be completed within two to three face to face contacts following the initial intake or updated if the most recent Needs Assessment is over six months old. Any exceptions are to be documented. It further requires that the Needs Assessments be completed by a bachelor's or master's level staff and include a supervisor review signature upon completion. When a youth is identified as having a suicide risk factors during the Needs Assessment, the youth shall be referred for an Assessment of Suicide Risk conducted by or under the direct supervision of a licensed mental health professional.

The Needs Assessment is initiated to gather and analyze information for all youth receiving services. The assessment contains the elements required by the Florida Network's Policy and Procedure Manual for CINS/FINS.

A needs assessment is initiated within 72 hours of admission, if the youth is in shelter care or updated if most recent needs assessment is over six months old, and it is completed within 2-3 face to face contacts following the initial intake if the youth is receiving non-residential services or updated if most recent needs assessment is over six months old.

Out of 6 of 6 case files, the needs assessments were initiated within 72 hours of admission, usually the day the case was opened. The needs assessment was conducted by a bachelor's or master's level staff member. The needs assessment included a supervisor review signature upon completion and no youth were identified with an elevated risk of suicide as a result of the Needs Assessment.

Exceptions:

No exceptions are documented for this indicator.

2.03 Case/Service Plan



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Satisfactory

Limited

Failed

Rating Narrative

The agency has a written policy in place titled Case/Service Plan. The policy was last reviewed on June 9, 2018 by the Board of Directors.

The providers procedures require that a Service Plan shall be developed with the youth and the family within seven working days following completion of the Assessment. The Service Plan will be signed by the youth, parent/guardian, Thaise staff, and supervisor. The Plan shall be reviewed by the counselor and family, if available, at minimum during 30,60, and 90-day review for progress towards stated goals. Service plans should

include:

1. Identified need(s)
2. Goal(s)
3. Type of service(s)
4. Frequency of service(s)
5. Location of service(s)
6. Person(s) responsible
7. Target date(s) for completion
8. Actual completion date(s)
9. Signature of client's parent/guardian, counselor, and supervisor
10. Date the plan was initiated

A Case Plan is developed with the youth and family within seven (7) working days following completion of the assessment. The plan is developed based on information gathered during initial screening, intake, and assessment.

The plan includes identified needs and goals, the type, frequency, and location of services, persons responsible, target dates for completion, actual completion dates, signatures of the youth, parent/guardian, counselor, and supervisor, and the date the plan was initiated. The case plan is reviewed by the counselor and parent/guardian if available every 30 days for the first three months for progress in achieving goals and for making any necessary revisions to the case/service plan.



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Seven out of seven files had case plans developed within the seven working days following completion of the assessment. Each plan included needs, goals, the type, frequency, and location of services, person(s) responsible, target dates for completion and closed cases included the actual completion dates, signatures of the youth, parent/guardian, counselor, and supervisor. All of the cases included the dates that the plans were initiated. The case plans, whether closed or opened, have been reviewed every 30 days the first three months for progress in achieving goals and for making necessary revisions to the case or service plan. There were two cases out of four that do not have actual completion dates, signatures of the youth and parent/guardian and that is because the cases are still open and in progress.

Exception:

No exceptions are documented for this indicator.

2.04 Case Management and Service Delivery

Satisfactory

Limited

Failed

Rating Narrative

The agency has a written policy in place titled Case Management and Service Delivery. The policy was last reviewed on June 9, 2018 by the Board of Directors.

The agency's procedure requires each youth to be assigned a counselor/case manager who follows up with the youth's case and ensure delivery of services through direct provision or referral. The agency's process of case management includes: Establishing referral needs and coordinating referrals to services based upon the ongoing assessment of the youth's/family's problems and needs; Coordinating service plan implementation; Monitoring youth's/family's progress in services; Providing support for families; Monitoring out of home placement, if necessary; Referrals to the case staffing committee, as needed, to address the problems and needs of the youth/family; Recommending and pursuing judicial intervention in selected cases; Accompanying youth and parent/guardian to court hearings and related appointments, if applicable; Referral to additional services, if needed; Continued case monitoring and review of court orders; and Case termination with follow-up.

Each youth is assigned a counselor/case manager who will follow the youth's case and ensure delivery of services through direct provision or referral.



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The process of case management includes establishing the referral needs and coordinating referrals to services based upon the ongoing assessments of the youth and needs, coordinating service plan implementation, monitoring youth/family progress, providing support, referrals to the case staff committee, referral to additional services, continued case monitoring, and case termination follow-up.

Six out of Six clients were assigned a case manager. The case manager established the referral needs and coordinated referrals to services based upon the on-going assessment of the youth's/family's problems and needs, coordinated service plan implementation and monitored the youth's/family's progress in services. The case manager provided support for families and provided case termination notes for the closed cases. There are two cases out of six that are still open so there are no termination notes as of yet. Two of the four closed case files are provided with follow-up after 30 days of exit and one of the two closed case files are provided with follow up after 60 days of exit.

Exception:

There are deficiencies in the case management and service delivery section. Two of the four closed cases have not been provided with a 30 day of exit follow up. One of the two closed cases have not been provided with a 60 day of exit follow up.

2.05 Counseling Services

Satisfactory

Limited

Failed

Rating Narrative

This agency has a policy titled Counseling Services. The policy was last reviewed on June 9, 2018 by the Board of Directors.

The agency's procedure requires eligible youth staff initiate a Needs Assessment and requires the Needs Assessment to be completed within the first two to three face-to-face sessions with the family and/or youth.

Youth and families receive counseling services, in accordance with the youth case/service plan to address needed identified during the assessment process.

A structured group has a clear leader, relevant topics, opportunity for youth to participate, and must be 30 minutes or longer. Groups may be conducted by staff, youth, or guests, and documentation of groups must include date, time, list of participants, length of time, and topic. The program may provide therapeutic community-based services designed



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to provide the intervention necessary to stabilize the family in the event of crisis, keep families intact, minimize out of home placement, provide aftercare services for youth returning home from shelter services, and prevent the involvement of youth and families in the delinquency and dependency systems. Services may be provided in the youth's home, community location, or local providers counseling office.

Six (6) out of Six (6) clients were provided with mentoring services and one on one groups. The Youth's presenting problems were addressed in the Needs Assessments, initial case/service plan, and case/service plan reviews. In all case files, case notes were maintained for all mentoring services, there was an on-going internal process to ensure reviews of the case records and staff performance, youth and families received mentoring services and one on one groups according to their case/service plan, and the program actually provided the one on one groups and mentoring services. Each group session consisted of a clear leader, clear relevant topic, opportunity for youth engagement, and was at least 30 minutes in length.

Exception:

No exceptions are documented for this indicator.

2.06 Adjudication / Petition Process

Satisfactory

Limited

Failed

Not Applicable

Rating Narrative

A case staffing meeting is scheduled to review the case of any youth or family that the program determines is in need of services or treatment.

It the program determines that the youth/family is not in agreement with services or treatment, the youth/family will not participate in the services selected, or the program receives written request from the parents/guardian or any other member of the committee, a case staffing committee is convened within seven (7) working days from receipt of the written request from the parent/guardian. Within the seven working days of the meeting, a written report is provided to the parent/guardian outlining the committee recommendations and the reason behind the recommendations in a new or revised plan for services. The program works with the circuit court for judicial intervention for the youth or family. The case manager or designee completes a review summary prior to the reviewing hearing, informing the court of the youth's behavior and compliance with court orders and providing recommendations for further dispositions.



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The program will participate in Case Staffings where necessary and refer adjudication processes to the local CINS/FINS full service provider Youth Crisis Center (YCC).

Exception:

No exceptions are documented for this indicator.

2.07 Youth Records

Satisfactory

Limited

Failed

Rating Narrative

The agency has a policy has a youth records policy. The policy encompasses the agency's approach to establishing confidentiality of client and staff information and maintaining this information onsite and offsite in a safe and secure manner. The policy was last reviewed on June 9, 2018 by the Board of Directors and the Executive Director and includes all necessary approved changes to the policy and procedure.

The agencies procedures outlined in the guidelines the stats for the program to maintain confidence of youth workers. The agencies guidelines for procedures related to maintaining Confidential youth records include that all records being used in the process of providing services are maintain securely in a locked cabinet that is marked confidential and that is accessible only to authorized agency staff members.

The TEET agency's procedures require that all records that are utilized and transported outside of the office must be transported in a large non-see through container that is marked confidential. In addition, it is agency protocol that all client files must be organized in a format that is neat and orderly so that staff can access necessary client information and an efficient and expedited manner.

All youth records were marked 'confidential' and kept in a secure and locked cabinets for security. The program maintains locked mobile non-see through containers when transporting client records that are locked and marked 'confidential'.

All youth records are kept in a uniform and well-organized manner allowing for easy access to locate and review the necessary documents pertaining to the youth.

Exception:

No exceptions are documented for this indicator.

2.08 Sexual Orientation, Gender Identity, Gender Expression



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Satisfactory

Limited

Failed

Rating Narrative

The agency has a policy 5.08 called Sexual Orientation, Gender Identity, Gender Expression. The policy encompasses the agency's approach to establishing practices to support the SOGIE requirement. This policy requires that the agency ensures that all clients which it serves are required to be treated with respect and with her to qualify professionals for Porter service was regardless of the youth actual or perceived sexual orientation, gender identity, or gender expression. The policy was last reviewed on June 9, 2018 by the Board of Directors and the Executive Director and includes all necessary approved changes to the policy and procedure.

The agency procedures outlined in the guidelines related to SOGE include a process that utilizes the exact language and information contained in the Florida Network of Youth and Family Services policy. Specifically, the TEET agency's procedures require the following:

1. It will be addressed by their preferred name and gender pronouns;
2. Staff are prohibited from discussing you with sexual orientation, gender identity or gender expression with other youth and services without the document a concert from the youth;
3. All staff, service providers, and volunteers are prohibited from engaging in any form of discrimination or harassment of youth based upon their actual or perceived sexual orientation, gender identity, or gender expression;
4. Harassment, verbal abuse, or intimidation that stuff towards based on the youth's sexual orientation, gender identity, or gender expression must be reported to the DCF abuse hotline. 1-800-96 ABUSE (1-800-962-2873);
5. All staff, service providers and volunteers are prohibited from attempting to change a youth's sexual orientation, gender identity, or gender expression including, but not limited to referrals for conversation, therapy, or other similar interventions;
6. All staff, service of others, and volunteers who have contact with youth will have knowledge of this policy and the terms and the terms referred to within this policy;
7. If youth are in need of specialized support or services relative to the sexual our intention, gender identity, or gender expression, TEET agency staff will be required to refer these youth to services, or request assistance from the Florida network in identify qualified resources and providers; and
8. TEET agency program has signage in areas of their facility indicating the program is a safe space for all youth regardless of actual or perceived sexual orientation, gender identity, and or gender expression.



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There were no applicable Sexual Orientation, Gender Identity, Gender Expression (SOGE) clients meeting the criteria in the last six (6) months of CINS/FINS service delivery per the TEET Jacksonville Program Manager.

Exception:

No exceptions are documented for this indicator.

Standard 3: Special Populations

3.07 Special Populations

Satisfactory

Limited

Failed

Not Applicable

Rating Narrative

The agency has a policy on Special Populations. The TEET Jacksonville site primarily serves special populations that includes Domestic Violence (DV) Respite and Probation Respite (PR) youth. The policy was last reviewed on June 9, 2018 by the Board of Directors. This policy meets the general requirements to be in compliance with the Special Populations indicator.

Procedures are in place for Domestic Violence (DV) Respite. All DV clients must have a pending DV charge in order to be eligible for the program. Eligible youth that are admitted to the program have screened initially by the Juvenile Assessment Center (JAC) screening and are deemed eligible for DV due to not meeting all eligibility requirements for secure detention. These criteria include not exceeding a stay of twenty-one days; data entry into NetMis and JJIS is completed within 24 hours of admission and 72 hours of release. Each youth must have evidence of a Case Plan with goals that include goals for aggression management, family coping skills, or other interventions designed to reduce propensity for violence in the home. The TEET agency also has services that are provided to these youth should be consistent with all other CINS/FINS program requirements.

The TEET agency also has procedures that address the agency's ability to deliver Probation Respite services to eligible clients. All prospective clients are required to be referred from DJJ probation. Eligible youth must be on probation with a status of adjudication withheld. All probation respite referrals must be issue through the Florida Network of Youth and Family Services (FNYFS) Probation Respite Referralator via the member's page on the Florida Network website at time of admission. Data on all accepted clients must be entered into NetMis and JJIS within 24 hours of admission and 72 hours of release. The TEET agency must also determine the length of stay at the time of admission. Further, the agency must also have evidence that all case



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management and counseling needs has been completed. All remaining services provided to these DV and PR client must be consistent with all other CINS/FINS program requirements.

Per an interview with the TEET Jacksonville Program Manager, the agency served two (2) Family/Youth Respite Aftercare Services (FYRAC) clients cases to review in order to determine the agency's adherence to the requirements of this indicator.

The agency has procedures for their family unit respite after care services (FYRAC) policy. The agency practice includes procedures for staff and programming that are in place regarding this specific special population.

The agency has applicable FYRAC policies and procedures in place in order to provide these specialized services. The agency has evidence that these two youth cases that were referred by DJJ for a domestic violence arrest on a household member and the youth was on probation regardless of education status and at risk of violating the probation status. The agency has evidence that these referrals have documented approval from the Florida network office. These cases have evidence of face-to-face meeting Sessions and include the collection of family history and other demographic related information. There is evidence that they initiate contact to meet with youth and the family within 72 hours. The TEET staff members go directly to the home or the cones to the office to conduct this face-to-face session. One of the two cases has evidence of a documented service plan that includes all required information, as well as parental involvement and documentation of orientation to the program. One of the two cases has evidence that the service plan is in process. The agency has evidence that the life management sessions are face-to-face and are a little room of 60 minutes and duration and focus on family unit strengthening activities. The agency did not have evidence of any completed group sessions at this time. This is due to the fact that there are only two clients. The agency's FYRAC program is designed for its participants to receive services for 12 or more sessions or 90 days.

Exception:

No exceptions are documented for this indicator.