



**Florida Network for Youth and Family Services
Compliance Monitoring Report for
Thaise Educational and Exposure Tours – St. Petersburg**

**1111 18th Avenue South
St. Petersburg, FL 34705**

Compliance Monitoring Services Provided by



EXECUTIVE SUMMARY

Forefront LLC conducted a joint Quality Improvement (QI) and Florida Network of Youth and Family Services (FNYFS) monitoring visit for Thaise Educational and Exposure Tours (TEET) – St. Petersburg for the FY 2020-2021 at its program office located at 1111 18th Avenue South, St. Petersburg, FL 34705. Forefront LLC (Forefront) is an independent compliance monitoring firm that is contracted by the FNYFS to perform onsite program reviews to assess the agency's adherence to fiscal, programmatic, and overall contract requirements. Thaise Educational and Exposure Tours (TEET) – St. Petersburg 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 are funded with General Revenue Funds effective for July 2019 through June 30, 2020.

The review was conducted by Ashley Davies, Consultant for Forefront LLC and Peer Reviewer(s). Agency representatives from Thaise Educational and Exposure Tours (TEET) – St. Petersburg present for the entrance interview were: Teresa Clove, Chief Executive Officer; and Shanna Baker, Program Manager. The last onsite QI visit was conducted on October 9, 2018.

In general, the Reviewer found that Thaise Educational and Exposure Tours (TEET) – St. Petersburg is in compliance with specific contract requirements. **Thaise Educational and Exposure Tours (TEET) – St. Petersburg received an overall compliance rating of 100% for achieving full compliance with nine indicators** of the CINS/FINS Monitoring Tool. There were no corrective actions as a result of the monitoring visit and no recommendation was made for an indicator rated as conditionally acceptable.

The following report represents the results of the in-depth evaluation of the provider's General Administrative performance, with all findings clearly documented. Copies of all completed tools utilized during the visit to determine these ratings will be maintained on file with the Reviewer. If any information or clarification is required, please contact Keith Carr by E-mail: keithcarr@forefrontllc.com

2020-2021 CINS/FINS PROGRAM COMPLIANCE MONITORING TOOL

Report Number: CM 09-23-2020

Agency Name: Thaise Educational and Exposure Tours (TEET) – St. Petersburg					Monitor Name: Ashley Davies, Lead Reviewer		
Contract Type: CINS/FINS					Region/Office: 1111 18 th Avenue South, St. Petersburg, FL 34705		
Service Description: Comprehensive Onsite Compliance Monitoring					Site Visit Date(s): September 23, 2020		
Explain Rating							
Major Programmatic Requirements	Unacceptable	Conditionally Unacceptable	Fully Met	Exceeded	Not Applicable	Ratings Based Upon: I = Interview O = Observation D = Documentation PTV = Submitted Prior To Visit (List Who and What)	Notes Explain Unacceptable or Conditionally Acceptable: (Attach Supportive Documentation)
I. Administrative and Fiscal							
DJJ Quality Improvement Peer Reviewer a. Provider shall demonstrate that a minimum of two (2) staff members have been trained to be certified as DJJ QI Peer reviewers. Provider shall participate in a minimum of one (1) on-site quality assurance review of a similar type program in another judicial circuit during each 12-month period of the contract, if requested.	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview: The TEET program currently has four staff members certified as DJJ QI Peer reviewers.	No recommendation or Corrective Action.
Additional Contracts a. Provider shall provide a listing of all current federal, state, or local government contracts, as well as other contracts entered into with for profit and not-for-profit organizations. Such listing shall identify the awarding entity and contract start & end dates. PTV	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation: At the time of this on-site program review, the agency reported two additional contracts (county and state). The list included: awarding entity, award amount, description of services, and contract start & end dates.	No recommendation or Corrective Action.
Limits of Coverage a. Provider shall provide and maintain during this contract, the following minimum kinds of insurance: Worker's Compensation and Employer's liability insurance as required by Chapter 440, F.S. with a minimum of	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation: General Liability through United States Liability Company. The limits include coverage of \$1,000,000 each occurrence; \$2,000,000 aggregate;	No recommendation or Corrective Action.

Agency Name: Thaise Educational and Exposure Tours (TEET) – St. Petersburg					Monitor Name: Ashley Davies, Lead Reviewer		
Contract Type: CINS/FINS					Region/Office: 1111 18th Avenue South, St. Petersburg, FL 34705		
Service Description: Comprehensive Onsite Compliance Monitoring					Site Visit Date(s): September 23, 2020		
	Explain Rating						
	Unacceptable	Conditionally Unacceptable	Fully Met	Exceeded	Not Applicable		
Major Programmatic Requirements							
\$100,000 per accident, \$100,000 per person and \$500,000 policy aggregate. Commercial General Liability with a limit of \$500,000 per occurrence, and \$1,000,000 policy aggregate. Automobile Liability Insurance shall be required and shall provide bodily injury and property damage liability covering the operation of all vehicles used in conjunction with performance of this contract, with a minimum limit for bodily injury of \$250,000 per person; with a minimum limit for bodily injury of \$500,000 per accident; with a minimum limit for property damage of \$100,000 per accident and with a minimum limit for medical payments or \$5,000-\$10,000 per person. Florida Network is listed as payee or co-payee. PTV						\$1,000,000 personal injury; \$100,000 Damage to Rented Property; \$5,000 medical expenses (any one person); \$100,000/200,000 Abuse Coverage Occ/Agg; effective 03/01/2020- 03/01/2021. Professional Liability through United States Liability Company. The limits include coverage of \$1,000,000/2,000,000 Occurrence/Aggregate; effective dates 03/01/2020- 03/01/2021. Auto Insurance is provided through Progressive Express Ins. Company, with combined single limit coverage for Bodily Injury \$250,00 per person; \$500,00 each accident; Property Damage \$100,000 each accident; effective 01/13/2020 -01/13/2021. The Florida Network is listed as Certificate Holder.	
External/Outside Contract Compliance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview:	No recommendation or Corrective Action.

Agency Name: Thaise Educational and Exposure Tours (TEET) – St. Petersburg					Monitor Name: Ashley Davies, Lead Reviewer		
Contract Type: CINS/FINS					Region/Office: 1111 18th Avenue South, St. Petersburg, FL 34705		
Service Description: Comprehensive Onsite Compliance Monitoring					Site Visit Date(s): September 23, 2020		
Major Programmatic Requirements	Explain Rating					Ratings Based Upon: I = Interview O = Observation D = Documentation PTV = Submitted Prior To Visit (List Who and What)	Notes Explain Unacceptable or Conditionally Acceptable: (Attach Supportive Documentation)
	Unacceptable	Conditionally Unacceptable	Fully Met	Exceeded	Not Applicable		
a. Provider has corrective action item(s) cited by an external funding source (Fiscal or Non-Fiscal). ON SITE						Per the Executive Director, who manages all sites and reports, reported that the agency does not have any corrective action items cited by an external funding source on any additional contracts operated by the agency.	
Fiscal Practice a. Agency must have employee and fiscal policy/procedures manuals that are in compliance with GAAP and provide sound internal controls. Agency maintains fiscal files that are audit ready. PTV	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation: General Program, Fiscal Policies and Procedures are maintained in the agency's Accounting Policies and Procedures Manual that are general and provide for limited internal controls. The Accounting Policies and Procedures were last reviewed during FY July 2020.	No recommendation or Corrective Action.
b. Agency maintains a general ledger and the corresponding source documents. General ledger must be set up to track the activity of the grant separately (standard account numbers / separate funds for each revenue source, etc.). PTV	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation: General ledger (GL) for Periods: July 2019 through May 31, 2020, as of September 23, 2020. The agency maintains a detailed general ledger with corresponding source documents. General ledger is structured to track all funding sources. The agency also provided statement of assets, liabilities	No recommendation or Corrective Action.

Agency Name: Thaise Educational and Exposure Tours (TEET) – St. Petersburg					Monitor Name: Ashley Davies, Lead Reviewer		
Contract Type: CINS/FINS					Region/Office: 1111 18th Avenue South, St. Petersburg, FL 34705		
Service Description: Comprehensive Onsite Compliance Monitoring					Site Visit Date(s): September 23, 2020		
	Explain Rating						
	Unacceptable	Conditionally Unacceptable	Fully Met	Exceeded	Not Applicable		
Major Programmatic Requirements							
						and statement of revenue and expenses.	
c. Petty cash ledger system is balanced and all cash disbursements are compliant with financial policies and allowable under the contract. (Disbursements/invoices are approved & monitored by management.) – ON SITE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation/Interview: The provider does not use petty cash for program related purchases. Procedures for petty cash are contained in the Fiscal Policies and Procedures Manual.	No recommendation or Corrective Action.
d. Financial records and reports are current. Includes bank statements reconciled within 6 weeks of receipt. Vendor invoices past 6 months. Invoices are submitted on a monthly basis with supporting documentation. (Disbursements/invoices are approved & monitored by management). ON SITE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation: All program invoices are processed for payment by the agency's Executive Director. Purchase Order forms are completed by the program for all purchases. The designated purchase is then processed or ordered. A basic filing system is maintained at the TEET Orlando office by vendor for each fiscal year. Current and previous years files are stored in adjacent file cabinets or a secure storage area until completion of fiscal year audit.	No recommendation or Corrective Action.

Agency Name: Thaise Educational and Exposure Tours (TEET) – St. Petersburg					Monitor Name: Ashley Davies, Lead Reviewer		
Contract Type: CINS/FINS					Region/Office: 1111 18th Avenue South, St. Petersburg, FL 34705		
Service Description: Comprehensive Onsite Compliance Monitoring					Site Visit Date(s): September 23, 2020		
Explain Rating							
Major Programmatic Requirements	Unacceptable	Conditionally Unacceptable	Fully Met	Exceeded	Not Applicable	Ratings Based Upon: I = Interview O = Observation D = Documentation PTV = Submitted Prior To Visit (List Who and What)	Notes Explain Unacceptable or Conditionally Acceptable: (Attach Supportive Documentation)
						<p>All local Program Managers in St. Petersburg, Orlando, and Jacksonville can submit request for any product or service needed. Purchases generally include acquisition of certain local supplies or services for the operation of the program.</p> <p>Bank reconciliations were provided from December 2019 through May 2020. Accounts Payable Reconciliations are signed monthly by the Accountant, within 2-4 weeks of receipt, and approved by the Executive Director.</p>	
e. Agency maintains inventory in accordance with a written policy and FNYFS contractual requirements. If over \$1,000 inventory has DJJ Property Inventory Number/Tag. In the event the provider has purchased computer equipment an Informational Resources Request (IRR) been submitted to DJJ. PTV/ON SITE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Interview: As of the date of the CM program review, no equipment purchases were made with DJJ funds in FY 2019-2020.</p>	No recommendation or Corrective Action.
f. Agency submits payroll taxes and deposits (and retirement deposits as applicable), <u>Employee</u> IRS Form W-2 and <u>Independent Contractors</u> IRS Form 1099 forms prior to federal requirements. ON SITE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>Documentation: Copies of 941s for 1st and 2nd Quarters of 2020 were provided along with a EFTPS Batch Provider Payment</p>	No recommendation or Corrective Action.

Agency Name: Thaise Educational and Exposure Tours (TEET) – St. Petersburg					Monitor Name: Ashley Davies, Lead Reviewer		
Contract Type: CINS/FINS					Region/Office: 1111 18th Avenue South, St. Petersburg, FL 34705		
Service Description: Comprehensive Onsite Compliance Monitoring					Site Visit Date(s): September 23, 2020		
	Explain Rating						
Major Programmatic Requirements	Unacceptable	Conditionally Unacceptable	Fully Met	Exceeded	Not Applicable	Ratings Based Upon: I = Interview O = Observation D = Documentation PTV = Submitted Prior To Visit (List Who and What)	Notes Explain Unacceptable or Conditionally Acceptable: (Attach Supportive Documentation)
						Inquiry Report. The agency demonstrates that it is submitting payroll taxes to the appropriate authority as required. A contracted company is directly responsible for submitting the W-3 and 1099 forms.	
g. Budget to actual reports prepared and reviewed by appropriate management. Variance from the budget are investigated and explained. PTV/ON SITE	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation: Income Statements provided by the agency for FY 2019-2020 for months July 2019-May 2020. The report shows a program budget and variances with YTD net surplus. Variances in budget are monitored on a regular basis by management.	No recommendation or Corrective Action.
h. A Single Audit is performed as part of the annual audit if expenses are greater than \$750,000. The agency must submit a Corrective Action Plan for findings cited in the management letter and single audit. An annual financial audit was completed within 120 days after the previous fiscal year/calendar year and that a copy was provided to the Network unless and extension has been requested and approved in writing. Copy of Audit is submitted to the FNYFS by December 31st. Obtain from FNYFS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Interview: The annual expenses for the agency are not greater than \$750,000. The agency is not required to submit an annual Single audit from an outside agency. No Management Letter is applicable or required.	No recommendation or Corrective Action.

Agency Name: Thaise Educational and Exposure Tours (TEET) – St. Petersburg					Monitor Name: Ashley Davies, Lead Reviewer	
Contract Type: CINS/FINS					Region/Office: 1111 18th Avenue South, St. Petersburg, FL 34705	
Service Description: Comprehensive Onsite Compliance Monitoring					Site Visit Date(s): September 23, 2020	
			Explain Rating			
Major Programmatic Requirements			Unacceptable	Conditionally Unacceptable	Fully Met	Exceeded
			Not Applicable	Ratings Based Upon: I = Interview O = Observation D = Documentation PTV = Submitted Prior To Visit (List Who and What)		Notes Explain Unacceptable or Conditionally Acceptable: (Attach Supportive Documentation)
i. Agency maintains confidentiality policy with written policies and procedures to ensure the security and privacy of all employee and client data. Personal information is not easily accessible. Agency maintains a backup system in case of accidental loss of financial information. Security procedures are in place to protect laptops. Obsolete documents are shredded and computer hard drives are wiped prior to discarding. ON SITE			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					Documentation: The agency has updated policies in Storage and Retention, Confidentiality, and Record Retention Schedule. The agency also has related policies that address Storage and Disposal. The policy was last reviewed on July 1, 2020 by the Board of Directors and Executive Director.	
					No recommendation or Corrective Action.	

CONCLUSION

Thaise Educational and Exposure Tours (TEET) – St. Petersburg has met the requirements for the CINS/FINS contract as a result of full compliance with twelve applicable indicators of the Administrative and Fiscal Contract Monitoring Tool. One of the thirteen indicators was not applicable because: 1) the provider is not required to submit a Single Audit from an outside agency. Consequently, **the overall compliance rate for this contract monitoring visit is 100%**. There are no corrective actions cited and no recommendation is made as a result of the contract monitoring visit. Overall, the provider is performing satisfactorily in meeting the fiscal and administrative terms of its contract. In addition, the majority of indicators reviewed were carried out in a manner which meets the standard as described in the report findings.

SUMMARY OF RECOMMENDATIONS

Recommendation

There were no recommendations as a result of this review.

If required, the provider must submit a corrective action plan to address corrective actions cited in the corresponding section of this report. The provider's Corrective Action Plan should address the issues, corrective actions item cited, time frames and staff responsible. Responses to items cited for corrective actions are due to the Florida Network and the Florida Network Contract Manager within fourteen (14) working days of receipt of this report (See Florida Network Site for the Service Provider Corrective Action Form). The Florida Network Contract Manager will then review the response to the corrective action(s) to determine if the response adequately addresses the problem identified in the report within three (3) days. Upon approval the provider will then implement the approved measure to address the item(s) cited in the report. If the corrective action is successful in resolving the items cited in the report the contract monitor will notify the Provider in writing that the desired resolution has been achieved. Log on to the Florida Network (www.floridanetwork.org) website forms section and download the Service Provider Corrective Action Tracking Form.



Florida Network of Youth and Family Services Quality Improvement Program Report

Thaise Educational & Exposure Tours – St. Petersburg
CINS/FINS Program

September 23, 2020

Compliance Monitoring Services Provided by

 **FOREFRONT**



Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

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	
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/ Expression	Satisfactory Satisfactory
2.09 Special Populations	Satisfactory
2.10 Stop Now and Plan (SNAP)	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%



Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

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

Ashley Davies – Consultant - Forefront LLC/Florida Network of Youth and Family Services

Brenda Comadore – Department of Juvenile Justice

Kelley Scott – Youth and Family Alternatives



Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020
Lead Reviewer: Ashley Davies

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 2019).

Persons Interviewed

- | | | |
|---|--|---|
| <input checked="" 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 | <u>1</u> # Case Managers |
| <input type="checkbox"/> Direct – Part time | <input type="checkbox"/> Direct – Care On-Call | <u>1</u> # Program Supervisors |
| <input type="checkbox"/> Volunteer | <input type="checkbox"/> Intern | NA # Food Service Personnel |
| <input type="checkbox"/> Clinical Director | <input type="checkbox"/> Counselor Licensed | NA # Healthcare Staff |
| <input type="checkbox"/> Counselor Non-Licensed | <input checked="" type="checkbox"/> Case Manager | NA # Maintenance Personnel |
| <input type="checkbox"/> Advocate | <input type="checkbox"/> Human Resources | <u>0</u> # 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"/> Visitation Logs |
| <input checked="" type="checkbox"/> Affidavit of Good Moral Character | <input checked="" type="checkbox"/> Fire Prevention Plan | <input checked="" type="checkbox"/> Youth Handbook |
| <input checked="" type="checkbox"/> CCC Reports | <input checked="" type="checkbox"/> Grievance Process/Records | <u>0</u> # Health Records |
| <input type="checkbox"/> Logbooks | <input type="checkbox"/> Key Control Log | <u>0</u> # MH/SA Records |
| <input checked="" type="checkbox"/> Continuity of Operation Plan | <input type="checkbox"/> Fire Drill Log | <u>2</u> # Personnel /Volunteer Records |
| <input checked="" type="checkbox"/> Contract Monitoring Reports | <input type="checkbox"/> Medical and Mental Health Alerts | <u>3</u> # Training Records |
| <input checked="" type="checkbox"/> Contract Scope of Services | <input type="checkbox"/> Precautionary Observation Logs | <u>4</u> # Youth Records (Closed) |
| <input type="checkbox"/> Egress Plans | <input type="checkbox"/> Program Schedules | <u>4</u> # Youth Records (Open) |
| <input checked="" type="checkbox"/> Fire Inspection Report | <input type="checkbox"/> List of Supplemental Contracts | NA # Other: _____ |
| <input checked="" type="checkbox"/> Exposure Control Plan | <input type="checkbox"/> Vehicle Inspection Reports | |

Surveys

- | | | |
|------------------|------------------------------|-------------------------|
| <u>0</u> # Youth | <u>2</u> # Direct Care Staff | <u>0</u> # Other: _____ |
|------------------|------------------------------|-------------------------|

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 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

Due to COVID-19, this QI review was completed fully remote.



Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Overview

Monitoring Purpose:

The purpose of this monitoring is to provide an annual quality improvement program review. This is to verify the agency adheres to all current CINS/FINS standards and contract compliance requirements for non-residential services.

Strengths and Innovative Approaches

Starting in March 2020, sessions with clients are being done virtually due to the COVID-19 pandemic. Staff speak with clients weekly over the phone and inform the families of any changes and provide support with appropriate resources. Staff have been having a difficult time reaching families virtually and have had to make numerous attempts before they finally make contact.

Throughout the summer, the agency continued to provide services and support to clients virtually. Staff attended community events and conducted outreach activities to discuss the program and let the community know they are still taking clients. The program staff are learning different ways that they can provide services and are learning about the different resources within the community that are available to help the clients they serve.

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020
Lead Reviewer: Ashley Davies

Narrative Summary

The Thaise Educational and Exposure Tours (TEET) St. Pete 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 in Circuit 6. The program is led by Teresa Clove, CEO/Executive Director. They target at-risk youth from ages 6-17 who may be exhibiting behavioral and academic issues and the program provides centralized screening and intake services during regular business hours. The program accepts referrals from established referral partners and local elementary, middle, and high schools. The agency also receives referrals from youth, parents/guardians, and local community-based organizations. Thaise provides college tours within Florida at least one to three times a year to expose the youth to possible college/university choices.

The overall findings for the QI review for TEET St. Pete is summarized as follows:

Standard 1: This standard has a total of seven indicators regarding management accountability. Indicator 1.06 Client Transportation is not applicable to non-residential programs. The remaining six indicators were rated satisfactory with no exceptions noted.

Standard 2: This standard has a total of ten indicators that relate to intervention and case management. Indicator 2.10 Stop Now and Plan (SNAP) was not applicable as this program does not provide SNAP services. The remaining nine indicators were rated satisfactory with no exceptions noted.



Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

CINS/FINS QUALITY IMPROVEMENT TOOL

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
Standard One – Management Accountability							
1.01: Background Screening and compliance with DJJ OIG statewide procedures regarding BS of employees, contractors and volunteers							
Provider has a written policy and procedure that meets the requirement for Indicator 1.01						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 1.01 Background Screening that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
a. Agency utilizes an employee suitability prescreening assessment with a passing rate criterion prior to an offer of hire for direct care staff working with youth.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A total of two new staff were hired since the last onsite QI review. Both staff met the criteria for pre-screening assessment. The agency uses the HR Pre-employment Test and completed the screening prior to hire for both staff.	
b. Background screening completed prior to hire/start date or exemption obtained prior to working with youth (if rated ineligible) for new hires, volunteers/interns, and contractors	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A total of two new hires were background screened prior to hire.	
c. Five-year re-screening completed every 5 years from initial date of hire	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The employee roster identified no staff applicable for a 5-year re-screen.	
d. Annual Affidavit of Compliance with Level 2 Screening Standards (Form IG/BSU-006) is completed and sent to BSU by January 31st?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The agency submitted the Annual Affidavit of Compliance with Level 2 Screening via fax to the Background Screening Unit on 1/24/2020.	
e. Proof of E-Verify for all new employees obtained from the Department of Homeland Security	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Documentation of approval of E-Verify work eligibility was provided for both new staff hired.	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
1.02: Provision of an abuse free environment to ensure safety and abuse free environment for youth in care							
Provider has a written policy and procedure that meets the requirement for Indicator 1.02					<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There are three policies in place titled HS-2.07 Abuse and Neglect Reporting, HR-4.04 Code of Conduct and Behavior, and HR-5.01 Grievances that address the requirements of this indicator. The policies were last reviewed on July 1, 2020 by the Thaise Board Members and CEO.		
Abuse Free Environment							
a. Agency has a code of conduct of policy and there is evidence that staff are aware of agency's code of conduct.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HR-4.04 Code of Conduct and Behavior last reviewed 7/1/2020. Staff sign the Code of Conduct form upon hire; the form is kept in the employee's personnel file.	
b. Child Abuse Registry telephone number is visible to youth and posted common areas of the facility	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Child Abuse telephone number was observed to be posted in the agency's office via picture submitted to the review team.	
c. Youth were informed of the Abuse and Contact Number (see youth survey results)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All eight youth files reviewed documented the youth were informed of the abuse hotline number during orientation by initialing next to the abuse hotline procedures on the Orientation Checklist and by signing the form.	
d. Management takes immediate action to address any incidents of threats or abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The CEO reported there have been no instances management has needed to take immediate action to address any incidents of threats or abuse.	
Grievance Process							
a. Agency has a formal grievance process	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HR-5.01 Grievances policy was last reviewed July 1, 2020.	
b. Locked box accessible to only management and available to youth in a common area	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A picture was submitted to the review team that shows the program has an accessible grievance box that is locked and located in the agency's	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
						office alongside grievance forms. The CEO keeps the key to the grievance box.	
c. Direct care does not handle the complaint/grievance unless assistance is asked for by the youth	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no grievances filed during this review period.	
d. 72-hour resolution requirement by management	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no grievances filed during this review period.	
e. Grievance maintained on file for a minimum of 1 year	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There have been no grievances filed during this review period.	
1.03: Incident Reporting							
Provider has a written policy and procedure that meets the requirement for Indicator 1.03						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 5.01 Incident Reporting that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
a. During the past 6 months, the program notified the Department's CCC (Central Communication Center) no later than two hours after any reportable incident occurred or within two hours of the program learning of the incident	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the Department's CCC Reports for the program revealed the program has not had any reportable incidents during this review period.	
b. The program completes follow-up communication tasks/special instructions as required by the CCC	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the Department's CCC Reports for the program revealed the program has not had any reportable incidents during this review period.	
c. Incidents are documented in the program logs and on incident reporting forms	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the Department's CCC Reports for the program revealed the program has not had any reportable incidents during this review period.	
d. All incident reports are reviewed and signed by program supervisors/directors	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A review of the Department's CCC Reports for the program revealed the program has not had any reportable incidents during this review period.	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
1.04: Training Requirements Staff receives training in the necessary and essential skills required to provide CINS/FINS services and perform specific job functions							
Provider has a written policy and procedure that meets the requirement for Indicator 1.04						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled Development and Training that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
First Year Direct Care Staff							
a. Direct care staff receives all mandatory training during the first 120 days of employment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There were two first year staff files reviewed, and both had completed the mandatory trainings required during the first 120 days.	
b. Direct care staff completes all mandatory Florida Network and SkillPro training during the first year employment.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	One staff had completed the entire first year of training and documented all required trainings and required training hours with 86 total hours. The second staff still had three months remaining in their first-year training cycle. This staff was on track to receive all required trainings and hours with most required trainings completed and 61 hours documented so far.	
Non-licensed Mental Health Clinical Shelter Staff (within first year of employment)							
a. Non-licensed mental health clinical shelter staff Assessment of Suicide Risk Training	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		The program does not employ any clinical shelter staff.
b. Documentation of non-licensed mental health clinical staff person's training in Assessment of Suicide Risk form or written confirmation by a licensed mental health professional of training (includes date, signature and license number of the licensed mental health professional supervisor).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		The program does not employ any clinical shelter staff.
In-service Direct Care Staff							
Direct care staff completes 24 hours of mandatory refresher Florida Network, SkillPro, and job-related	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	There was one in-service employee training file reviewed. The staff had completed the required	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
training annually (40 hours if the program has a DCF child caring license).						annual trainings and documented more than 40 hours with 49.5 hours for the year.	
Required Training Documentation							
The program maintains an individual training file for each staff, which includes an annual employee training hours tracking form and related documentation, such as certificates, sign-in sheets, and agendas for each training attended.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	In all training files, there was evidence of a spreadsheet with all trainings, date completed, and hours. Also, in training files included training certificates and training worksheets.	
1.05: Analyzing and Reporting Information							
The program collects and reviews several sources of information to identify patterns and trends. Program should have sample reports of aggregated data and committee/workgroup minutes analyzing information.							
Provider has a written policy and procedure that meets the requirement for Indicator 1.05						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 1.05 Analyzing and Reporting Information that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
Quarterly Reviews							
a. Case record review reports demonstrate reviews are conducted quarterly, at a minimum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The CEO reviews every case record monthly. These reviews were documented monthly in the Supervisors Notes of all eight files reviewed.	
b. The program conducts reviews of incidents, accidents, and grievances quarterly, at a minimum	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Incidents, accidents, and grievances are reviewed monthly and are included in the Monthly Report and meeting minutes. The last six months, from April – September 2020, of Monthly Reports and meeting minutes were reviewed.	
Annual Reviews							
a. The program conducts an annual review of customer satisfaction data	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monthly Report shows customer satisfaction data is reviewed monthly. The last six months, from April – September 2020, of Monthly Reports were reviewed.	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
b. The program conducts an annual review of outcome data	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monthly Report shows a review of outcome data. The last six months, from April – September 2020, of Monthly Reports were reviewed.	
Monthly Reviews							
The program conducts a monthly review of NetMIS data reports	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Netmis data reports received from the Florida Network were discussed at meetings monthly. Minutes of the meetings for the last six months, April – September 2020, support this practice.	
Quality Improvement Process							
a. The program has a process in place to review and improve accuracy of data entry & collection	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Data entry is monitored by the Program Manager to ensure it is accurate. If there is an issue a meeting is set up to identify the problem.	
b. There is documentation that findings are regularly reviewed by management and communicated to staff and stakeholders.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Findings are discussed at monthly staff meetings. This was evident in monthly meeting minutes reviewed for the last six months, from April – September 2020.	
c. There is evidence that strengths and weaknesses are identified, improvements are implemented or modified, and staff are informed and involved throughout the process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Monthly meeting minutes show evidence of strengths and weaknesses identified, and improvements implemented. Staff are informed and involved in the process. This was evident in monthly meeting minutes reviewed for the last six months, from April – September 2020.	
1.06: Client Transportation							
Policy is established to avoid situations that put youth or staff in danger of real or perceived harm, or allegations of inappropriate conduct by either staff or youth.							
Provider has a written policy and procedure that meets the requirement for Indicator 1.06					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (explain) Not Applicable		This indicator is rated Not Applicable for non-residential providers.
Approved agency drivers							
a. Approved agency drivers are agency staff approved by administrative personnel to drive client(s) in agency or approved private vehicle	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This indicator is rated Not Applicable for non-residential providers.

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
b. Approved agency drivers are documented as having a valid Florida driver's license and are covered under company insurance policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This indicator is rated Not Applicable for non-residential providers.
Third party present in the vehicle							
a. Agency's Transportation policy prohibit transporting a client without maintaining at least one other passenger in the vehicle during the trip and include exceptions in the event that a 3 rd party is NOT present in the vehicle while transporting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This indicator is rated Not Applicable for non-residential providers.
b. In the event that a 3rd party cannot be obtained for transport, the agency's supervisor or managerial personnel consider the clients' history, evaluation, and recent behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This indicator is rated Not Applicable for non-residential providers.
c. The 3 rd party an approved volunteer, intern, agency staff, or other youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This indicator is rated Not Applicable for non-residential providers.
Transportation documentation							
There is documentation of use of vehicle that notes name or initials of driver, date and time, mileage, number of passengers, purpose of travel and location	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This indicator is rated Not Applicable for non-residential providers.
1.07: Outreach Services							
The agency participates in local DJJ board and council meetings to increase public safety by reducing juvenile delinquency through effective prevention, intervention and treatment services and ensure CINS/FINS services are represented in a coordinated approach.							
Provider has a written policy and procedure that meets the requirement for Indicator 1.07						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 1.08 Outreach that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
a. The program has a lead staff member designated to participate in local DJJ board and council meetings with evidence that includes minutes of the event or other verification of staff participation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The Program Manager participates in local DJJ board and council meetings. Documentation was provided to show attendance in the last	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
						two Circuit 6 CAB meetings in January and May 2020.	
b. Outreach and prevention services are provided by designated staff and include increasing community awareness, offering informational and educational CINS/FINS services to youth and families.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Agency has evidence of outreach events by providing Netmis outreach list which includes the title of event, date of event, number of youth and adults in event, purpose of event, and what area the event took place in the community. The agency has attended 13 outreach events since January 2020. Events included local schools, churches, and community events.	
c. The program maintains written agreements with other community partners which include services provided and a comprehensive referral process.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Agency has ten interagency Agreements with Community Partners.	
Standard Two – Intervention and Case Management							
2.01: Screening and Intake							
Provider has a written policy and procedure that meets the requirement for Indicator 2.01						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled Screening that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
Eligibility screening is completed within 7- calendar days of referral	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Eight files were reviewed, four open and four closed. All eight had eligibility screening completed within seven calendar days of referral.	
Youth and parents/guardians receive the following in writing: <ul style="list-style-type: none"> • Available service options • Rights and responsibilities of youth and parents/guardians 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All eight files reviewed, four open and four closed documented the youth and parents received all required information at intake.	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
<p>The following is also available to the youth and parents/guardians:</p> <ul style="list-style-type: none"> Possible actions occurring through involvement with CINS/FINS services (case staffing committee, CINS petition, CINS adjudication) Grievance procedures 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All eight files reviewed, four open and four closed documented the youth and parents received all required information at intake.	
2.02: Needs Assessment							
Provider has a written policy and procedure that meets the requirement for Indicator 2.02						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 3.03 Needs Assessment that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
Completion of Needs Assessment							
a. Shelter Youth: Needs Assessment initiated within 72 hours of admission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This program only serves non-residential youth.
b. Non-Residential youth: Needs Assessment is done within 2 to 3 face-to-face contacts after the initial intake OR updated, if most recent assessment is over 6 months old	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Eight files were reviewed, four open and four closed. The Needs Assessment was completed within 2 to 3 face-to-face contacts in all eight files.	
c. Needs Assessment is conducted by a bachelor's or master's level staff member	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All eight Needs Assessments were conducted by a bachelor's or master's level staff member.	
d. Needs Assessment includes a supervisor's review signature upon completion	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A supervisor's signature was present on all eight Needs Assessments reviewed.	
Suicide Risk as a Result of the Needs Assessment							
a. Youth was identified with an elevated risk of suicide as a result of the Needs Assessment	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None of the files reviewed documented the youth had an elevated risk of suicide as a result of the Needs Assessment.	
b. If yes, the youth was referred for an Assessment of Suicide Risk conducted by or under the direct	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	None of the files reviewed documented the youth had an elevated risk of suicide as a result of the Needs Assessment.	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
supervision of a licensed mental health professional							
2.03 Case/Service Plan							
Provider has a written policy and procedure that meets the requirement for Indicator 2.03						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 4.04 Case/Service Plan that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
Case/Service plan is developed within 7 working days of Needs Assessment	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Service plans were completed within seven working days of Needs Assessment in all eight files reviewed.	
Case/Service Plan includes:							
<ul style="list-style-type: none"> Individualized and prioritized need(s) and goal(s) identified by the Needs Assessment Service type, frequency, location Person(s) responsible Target date(s) for completion and Actual completion date(s) Signature of youth, parent/guardian, counselor, and supervisor Date the plan was initiated 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All eight files included all elements required by the indicator.	
Case/service plans are reviewed for progress/ revised by counselor and parent (if available) every 30 days for the first three months and every 6 months after	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All eight files demonstrated Service Plan Reviews every 30 days for the first three months. None of the files were applicable for reviews beyond the first three months.	
2.04: Case Management and Service Delivery							
Provider has a written policy and procedure that meets the requirement for Indicator 2.04						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 4.05 Case Management Services that addresses the requirements of this indicator. The policy was	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
						last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
Counselor/Case Manager is assigned	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Each of the eight files reviewed showed a case manager was assigned to the youth.	
<p>The Counselor/Case Manager completes the following as applicable:</p> <ul style="list-style-type: none"> • Establishes referral needs and coordinates referrals to services based upon the on-going assessment of the youth's/family's problems and needs • Coordinates service plan implementation • Monitors youth's/family's progress in services • Provides support for families • Monitors out-of-home placement (if necessary) • Makes referrals to the case staffing to address problems and needs of the youth/family • Accompanies youth and parent/guardian to court hearings and related appointments • Refers the youth/family for additional services when appropriate • Provides case monitoring and reviews court orders • Provides case termination notes • Provides follow-up after 30 days of exit • Provides follow-up after 60 days of exit 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<p>All eight applicable files established referral needs and coordinated referrals for services.</p> <p>All eight applicable files coordinated service plan implementation.</p> <p>All eight applicable files monitored the youth's and family's progress in services.</p> <p>All eight applicable files provided support for families.</p> <p>None of the files were applicable for monitoring out-of-home placement.</p> <p>None of the files were applicable for referrals to the case staffing committee.</p> <p>None of the files were applicable for accompanying the youth or parent to court hearings or appointments.</p> <p>None of the files were applicable for referring the youth/family for additional services.</p> <p>None of the files were applicable for providing case monitoring and reviewing court orders.</p> <p>All four out of the four applicable files provided case termination notes.</p>	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
						All four out of four applicable files provided follow-up after 30 days of exit. All two out of of two applicable files provided follow-up after 60 days of exit.	
2.05: Counseling Services							
Provider has a written policy and procedure that meets the requirement for Indicator 2.05						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 4.03 Individual, Family, Group Counseling and Mentoring that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
Youth and families receive counseling services, in accordance with the youth's case/service plan, to address needs identified during the assessment process	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Service plans and case notes were maintained and demonstrated all eight youth received counseling services as identified during the assessment.	
Shelter Program							
Shelter programs provides individual and family counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This program only serves non-residential youth.
Group counseling sessions held a minimum of five days per week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This program only serves non-residential youth.
Group counseling sessions consist of: <ul style="list-style-type: none"> • Length of at least 30 minutes • Opportunity for youth engagement • Clear and relevant topic (informational/developmental/educational) • Clear leader or facilitator 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This program only serves non-residential youth.
Non-residential Program							
Non-residential programs provide therapeutic community-based services designed to provide the intervention necessary to stabilize the family. Services are provided in the youth's home, a	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All eight files documented therapeutic services were provided by agency staff and this was documented in the case notes. Referral needs were established and provided to all youth.	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
community location, or the local provider's counseling office.							
Counseling Services							
Reflect all case files for coordination between presenting problem(s), psychosocial assessment, case/service plan, case/service plan reviews, case management, and follow-up	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Coordination of services was observed in all eight files reviewed.	
Maintain individual case files on all youth and adhere to all laws regarding confidentiality	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Individual youth record was maintained for all eight youth files reviewed.	
Case notes maintained for all counseling services provided and documents youth's progress	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All eight youth files included case notes that document services provided including counseling and youth's progress.	
On-going internal process that ensures clinical reviews of case records and staff performance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	The CEO provided documentation of clinical reviews that were conducted monthly and documented in the Supervisors Notes.	
2.06: Adjudication/Petition Process							
Provider has a written policy and procedure that meets the requirement for Indicator 2.06						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 4.06 Case Staffing Committee/Adjudication Services that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
Case Staffing Initiation and Notifications							
If parent/guardian initiates, staffing is held within 7 days	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview with CEO reported no case staffing's during this review period.	
The youth, family and case staffing committee are contacted within a minimum of five working days <ul style="list-style-type: none"> Notification to youth/family no less than 5 working days prior to staffing Notification to committee no less than 5 working days prior to staffing 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview with CEO reported no case staffing's during this review period.	
Case Staffing Committee							

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
Must include: a. DJJ rep. or CINS/FINS provider b. Local school district representative	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview with CEO reported no case staffing's during this review period.	
Other members may include: <ul style="list-style-type: none"> • State Attorney's Office • Others requested by youth/family • Substance abuse representative • Law enforcement representative • DCF representative • Mental health representative 	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview with CEO reported no case staffing's during this review period.	
The program has an established case staffing committee, and has regular communication with committee members	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reviewed Policy 4.06 Case Staffing Committee/Adjudication Services, which was last reviewed by CEO and the Board on July 1, 2020. Interview with CEO on case staffing process.	
The program has an internal procedure for the case staffing process, including a schedule for committee meetings	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Reviewed Policy 4.06 Case Staffing Committee/Adjudication Services, which was last reviewed by CEO and the Board on July 1, 2020. Interview with CEO on case staffing process.	
As a result of the Case Staffing							
The youth and family are provided a new or revised plan for services	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview with CEO reported no case staffing's during this review period.	
Written report is provided to the parent/guardian within 7 days of the case staffing meeting, outlining recommendations and reasons behind the recommendations	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview with CEO reported no case staffing's during this review period.	
If applicable, the program works with the circuit court for judicial intervention for the youth/family	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview with CEO reported no case staffing's during this review period.	
Case Manager/Counselor completes a review summary prior to the court hearing	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview with CEO reported no case staffing's during this review period.	
2.07: Youth Records							

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
Provider has a written policy and procedure that meets the requirement for Indicator 2.07						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 2.07 Youth Records that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
All records are marked "confidential"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All eight youth files reviewed were stamped confidential.	
All records are kept in a secure room or locked in a file cabinet that is marked "confidential"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A picture was provided of locked file cabinets where files are stored.	
When in transport, all records are locked in an opaque container marked "confidential"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	A picture was provided of an opaque container marked confidential used to transport files.	
All records are maintained in a neat and orderly manner so that staff can quickly and easily access information	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	All eight files reviewed were observed to be organized and maintained in a neat and orderly manner.	
2.08: Sexual Orientation, Gender Identity, Gender Expression							
Provider has a written policy and procedure that meets the requirement for Indicator 2.08						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 2.08 Sexual Orientation, Gender Identity & Gender Expression that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
Use of youth's preferred name/pronoun: a. Youth are addressed according to their preferred name and gender pronouns b. Youth's preferred name and gender pronouns are used in logbook and on all outward-facing documents and census boards	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview with CEO confirmed program has not had any youth that fall under these requirements during period of review.	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
Youth in need of specialized support is referred to qualified resources (as applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Interview with CEO confirmed program has not had any youth that fall under these requirements during period of review.	
Youth preference is considered and documented for room assignment and youth is not roomed in isolation due to sexual orientation, gender identity, or gender expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This program only serves non-residential youth.
Youth is provided hygiene products, undergarments and clothing that affirms their gender identity or gender expression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		This program only serves non-residential youth.
The agency has signage and brochures/publication placed in common areas indicating that all youth are welcome regardless of sexual orientation, gender identity, and gender expression	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Pictures were provided of postings around the office indicating all youth are welcome regardless of sexual orientation, gender identity, and gender expression.	
2.09: Special Populations							
Provider has a written policy and procedure that meets the requirement for Indicator 2.09 for EACH special population served i.e. Staff Secure, DMST, DV, PR, ICM and FYRAC.						<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO (explain) There is a policy in place titled 2.09 Special Population – Domestic Violence Respite and Probation Respite that addresses the requirements of this indicator. The policy was last reviewed on July 1, 2020 by the Thaise Board Members and CEO.	
Staff Secure							
Does the agency have any cases in the last 6 months or since the last onsite QI review was conducted? (If no, select rating “No eligible items for review”)	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> N/A				This program does not provide staff secure services.
Staff Secure policy and procedure outlines the following: <ul style="list-style-type: none"> In-depth orientation on admission Assessment and service planning Enhanced supervision and security with emphasis on control and appropriate level of physical intervention Parental involvement 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
<ul style="list-style-type: none"> • Collaborative aftercare 							
Program only accept youth that meet legal requirements of F.S. 984 for being formally court ordered in to Staff Secure Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Staff Assigned: a. One staff secure bed and assigned staff supervision to one staff secure youth at any given time b. Program assign specific staff during each shift to monitor location/ movement of staff secure youth c. Agency clearly documents the specific staff person assigned to the staff secure youth in the logbook or any other means on each shift	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Agency provides a written report for any court proceedings regarding the youth's progress	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Domestic Minor Sex Trafficking (DMST)							
Does the agency have any cases in the last 6 months or since the last onsite QI review was conducted? (If no, select rating "No eligible items for review")	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> N/A				This program does not provide DMST services.
Agency has evidence that the FNYFS was contacted for approval prior to admission for all Domestic Minor Sex Trafficking (DMST) placements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Services provided to these youth specifically designated services designed to serve DMST youth	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Did the placement of DMST youth require additional supervision for the safety of the youth or the program? If so, did the agency provide the appropriate level of supervision and safety measures?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Length of Stay: a. Youth in program do not have length of stay in DMST placement that exceeds seven (7) days b. Agency has approval for stays and support beyond seven (7) days for DMST placements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
that are obtained on a case-by-case basis? (If applicable.)							
Agency has evidence that staff assigned to DMST youth under this provision are to enhance the regular services available through direct engagement in positive activities designed to encourage the youth to remain in shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
All other services provided to DMST youth are consistent with all other general CINS/FINS program requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Domestic Violence							
Does the agency have any cases in the last 6 months or since the last onsite QI review was conducted? (If no, select rating "No eligible items for review")	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input checked="" type="checkbox"/> N/A			This program does not provide domestic violence services - see FYRAC below.
Youth admitted to DV Respite placement have a pending DV charge and have evidence of being screened by JAC/Detention, but do not meet criteria for secure detention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Data entry into NetMIS and JJIS within 24 hours of admission and 72 hours of release	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Youth in program do not have length of stay in DV Respite placement that exceeds 21 days. If more than 21 days, documentation exists in youth file of transition to CINS/FINS or Probation Respite placement, if applicable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Case plan in file reflects goals focusing aggression management, family coping skills, or other intervention design to reduce reoccurrence of violence in the home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
All other services provided to Domestic Violence Respite youth are consistent with all other general CINS/FINS program requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Probation Respite							

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
Does the agency have any cases in the last 6 months or since the last onsite QI review was conducted? (If no, select rating “No eligible items for review”)	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> N/A				This program does not provide probation respite services – see FYRAC below.
Probation Respite Referral come from DJJ Probation and are all youth referred on probation regardless of adjudication status	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Data entry into NetMIS and JJIS within 24 hours of admission and 72 hours of release	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Length of stay is no more than fourteen (14) to thirty (30) days? (Placement beyond thirty (30) days requires the approval of the JPO and/or CPO)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
All case management and counseling needs have been considered and addressed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
All other services provided to Probation Respite youth are consistent with all other general CINS/FINS program requirements	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Intensive Case Management (ICM)							
Does the agency have any cases in the last 6 months or since the last onsite QI review was conducted? (If no, select rating “No eligible items for review”)	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input checked="" type="checkbox"/> N/A				This program does not provide ICM services.
Youth receiving services was court ordered or referred by case staffing committee	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Services for youth and family include: a. Six (6) direct contacts per month b. Six (6) collateral contacts per month	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Assessments include: a. A Child Behavior Checklist (CBCL) is completed within 14 days of intake and at discharge (if applicable) b. An approved self-report assessment that was completed at intake c. An approved self-report assessment that was completed every 90 days following intake and at discharge (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
Case plan demonstrates a strength-based, trauma-informed focus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Agency has evidence that ICMS has a strength-based perspective in one or more of the following areas; engaging the family, advocating on their behalf, initiating change agent activities, helping to access supports in the community, teaching problem solving skills, modeling productive behaviors, and/or successful completion of youth and family developmental milestones	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Family and Youth Respite Aftercare Services (FYRAC)– Non-residential Only							
Does the agency have any cases in the last 6 months or since the last onsite QI review was conducted? (If no, select rating "No eligible items for review")	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			<input type="checkbox"/> N/A			The provider has not served any youth meeting the criteria for FYRAC since the last QI review.
Youth is referred by DJJ for a domestic violence arrest on a household member, and/or the youth is on probation regardless of adjudication status and at risk of violating	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No applicable youth files to review.	
Agency has evidence that all FYRAC referrals have documented approval from the Florida Network office	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No applicable youth files to review.	
Intake and initial assessment sessions meets the following criteria: a. Face-to-face gathering of family history and demographic information b. Includes development of the service plan and is documented through signature of the youth and his/her parent/guardian as well as orientation to the program	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No applicable youth files to review.	
Life Management Sessions meets the following criteria: a. Sessions are face-to-face, sixty (60) minutes in length and focus on strengthening the family unit	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No applicable youth files to review.	

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
b. Individual Sessions are with the youth and family and focus to engage, identify strengths and needs of each member that help to improve family functioning							
Group Sessions: a. Focus on the same issues as individual/family sessions with the overall goal of strengthening relationships and prevention domestic violence b. Shall be no more than eight (8) youth at one (1) time and shall be for a minimum of sixty (60) minutes per session	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No applicable youth files to review.	
Youth and family participate in services for thirteen (13) sessions or ninety (90) consecutive days of services, or there is evidence in the youth's file that an extension is granted by DJJ circuit Probation staff	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No applicable youth files to review.	
2.10: STOP NOW AND PLAN (SNAP)							
Provider has a written policy and procedure that meets the requirement for Indicator 2.10						<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (explain) Not Applicable	This program does not provide SNAP services.
SNAP Clinical Groups							
Youth are screened to determine eligibility of services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Needs assessment is completed at initial intake, or within two face-to-face sessions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
SNAP Assessments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
a. Child Behavior Checklist (CBCL) is completed by the caregiver (pre & post)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
b. Teacher Report Form (TRF) completed by the teacher (pre & post)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

Quality Improvement Review

Thaise Educational & Exposure Tours – St. Petersburg – 9/23/2020

Lead Reviewer: Ashley Davies

Quality Improvement Indicators	Rating					Review Based Upon Document Source: <i>E.g. Interview/Surveys, Observation, and/or Type of Documentation</i>	Notes Explain any items that have any deficiencies, exceptions or are not applicable. For example: Items marked 'No' or 'N/A' on the worksheets need to be explained clearly below
	Explain						
	Satisfactory	Non-compliant	No Eligible Items for Review	No Practice	Not Applicable		
c. TOPSE (pre & post)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
d. Prevention Assessment Tool (PAT) (pre & post)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
SNAP® discharge report summary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
SNAP® Boys/SNAP® Girls Child Group Evaluation Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
SNAP® Boys/SNAP® Girls Parent Group Evaluation Form	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
SNAP in Schools							
Weekly attendance sheet with youth names and/or identifying number completed with signatures of teacher and facilitator(s) (For a total of 13 attendance sheets)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
"Class Shoot for Your Goal" sheet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
Pre and Post Evaluations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
One SNAP® Fidelity Adherence Checklist completed per classroom in a 13 – week SNAP in Schools group and uploaded to Dropbox	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		