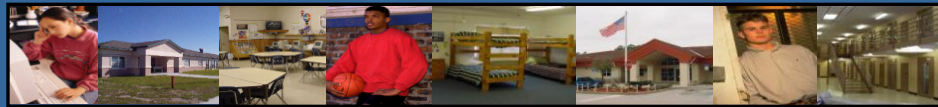


STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

BUREAU OF QUALITY ASSURANCE
PROGRAM REPORT FOR

White Foundation CBIS-Circuit 7
Henry and Rilla White Youth Foundation, Inc.
(Contract Provider)
1440 N. Nova Road, Suite 303
Holly Hill, FL 32117

Review Date(s): May 5-6, 2011



PROMOTING CONTINUOUS IMPROVEMENT AND ACCOUNTABILITY
IN JUVENILE JUSTICE PROGRAMS AND SERVICES



WANSLEY WALTERS, SECRETARY
JEFF WENHOLD, BUREAU CHIEF

Community Supervision Performance Rating Profile

Program Name: White Foundation CBIS-Circuit 7
 Provider Name: Henry and Rilla White Youth Foundation, Inc.
 County/Circuit #: Volusia / Circuit 7
 Review Date(s): May 5-6, 2011

QA Program Code: 1153
 Contract Number: P2048
 Number of Slots: 135
 Lead Reviewer Code: 84

Program Performance by Indicator/Standard

1. Management Accountability

1.01	Background Screening of Employees/Vol.	8
1.02	Provision of an Abuse Free Environment	8
1.03	Incident Reporting	8
1.04	Pre-Service/Certification Requirements	8
1.05	In-Service Training Requirements	10
1.06	Supervisory Reviews	8

Commendable 83%

2. Assessment and Intervention

2.01	Positive Achievement Change Tool	5
2.02	State Attorney Recommendation (SAR)	7
2.03	Pre-Disposition Report (PDR)	8
2.04	YES Plan Development	7
2.05	YES Plan Implementation/Supervision	7
2.06	Service Delivery/Referrals	7
2.07	PACT Reassessments/YES Plan Updates	7
2.08	Termination of Supervision	7

Minimal 69%

Standard	Program Score	Max. Score	Rating	Failed 0-59%	Minimal 60-69%	Acceptable 70-79%	Commendable 80-89%	Exceptional 90-100%
1. Management Accountability	50	60	83%				X	
2. Assessment and Intervention	55	80	69%		X			

Overall Program Performance

Acceptable 75%

Methodology

This review was conducted in accordance with Florida Administrative Code 63L-2 (Quality Assurance, 6/10/10 Hearing Draft), and focused on the areas of (1) Management Accountability and (2) Assessment and Intervention, which are included in the Community Supervision Standards (July 2010).

Persons Interviewed

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

Documents Reviewed

- | | | |
|---|---|---|
| <input type="checkbox"/> Accreditation Reports | <input type="checkbox"/> Fire Prevention Plan | <input type="checkbox"/> Vehicle Inspection Reports |
| <input checked="" type="checkbox"/> Affidavit of Good Moral Character | <input type="checkbox"/> Grievance Process/Records | <input type="checkbox"/> Visitation Logs |
| <input checked="" type="checkbox"/> CCC Reports | <input type="checkbox"/> Key Control Log | <input checked="" type="checkbox"/> Youth Handbook |
| <input type="checkbox"/> Confinement Reports | <input type="checkbox"/> Logbooks | 0 # Health Records |
| <input type="checkbox"/> Continuity of Operation Plan | <input type="checkbox"/> Medical and Mental Health Alerts | 0 # MH/SA Records |
| <input type="checkbox"/> Contract Monitoring Reports | <input type="checkbox"/> PAR Reports | 6 # Personnel Records |
| <input checked="" type="checkbox"/> Contract Scope of Services | <input type="checkbox"/> Precautionary Observation Logs | 9 # Training Records/CORE |
| <input type="checkbox"/> Egress Plans | <input type="checkbox"/> Program Schedules | 6 # Youth Records (Closed) |
| <input type="checkbox"/> Escape Notification/Logs | <input type="checkbox"/> Sick Call Logs | 14 # Youth Records (Open) |
| <input type="checkbox"/> Exposure Control Plan | <input type="checkbox"/> Supplemental Contracts | 5 5 # Other: State Attorney |
| <input type="checkbox"/> Fire Drill Log | <input checked="" type="checkbox"/> Table of Organization | Recommendations Pre- |
| <input type="checkbox"/> Fire Inspection Report | <input type="checkbox"/> Telephone Logs | Disposition Reports |

Surveys

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

Observations During Review

- | | | |
|--|--|---|
| <input type="checkbox"/> Admissions | <input checked="" type="checkbox"/> Posting of Abuse Hotline | <input type="checkbox"/> Staff Supervision of Youth |
| <input type="checkbox"/> Confinement | <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"/> Transition/Exit Conferences |
| <input type="checkbox"/> Group | <input type="checkbox"/> Security Video Tapes | <input type="checkbox"/> Treatment Team Meetings |
| <input type="checkbox"/> Meals | <input type="checkbox"/> Sick Call | <input type="checkbox"/> Use of Mechanical Restraints |
| <input type="checkbox"/> Medical Clinic | <input type="checkbox"/> Social Skill Modeling by Staff | <input type="checkbox"/> Youth Movement and Counts |
| <input type="checkbox"/> Medication Administration | <input type="checkbox"/> Staff Interactions with Youth | |

Comments

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

Performance Ratings

Performance ratings were assigned to each indicator by the review team using the following definitions and numerical values defined by F.A.C. 63L-2.002(10)(a) (6/10/10 Hearing Draft):

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

Review Team

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

Ann Little, Lead Reviewer, DJJ Bureau of Quality Assurance
Caroline Sanchez, Program Monitor, DJJ Residential Services, North Region
Chris Stronko, Sergeant, Seminole County Sheriff's Office Contracted Supervision

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

Standard 1: Management Accountability



Overview

The Department of Juvenile Justice (DJJ) contracts with the Henry and Rilla White Foundation, Inc. to operate a Community Based Intervention Services (CBIS) Program in Circuit 7. The program serves youth in Volusia, Flagler, St. Johns and Putnam Counties. The contract began April 1, 2009 and was originally for 140 slots, however due to a contract amendment, the program's available number of slots varies from 136 to 134. The program's office is located in Holly Hill, Florida. The program is comprised of a Program Director, a Clinical Coordinator, a Case Manager Supervisor, three Transition Case Managers, seven Field Case Managers and an Administrative Specialist. At the time of the quality assurance review, the program did not have any staff vacancies.

The program provides comprehensive case management services for DJJ youth residing in Circuit 7. The program serves youth on probation, conditional release, and post-commitment probation, including supervising youth transitioning from a residential commitment program to his/her home community. The program is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) International. Accreditation is active from August 2010 through August 2013. The program maintains an individual training file for each employee. Training is received in-house and through the Department of Juvenile Justice. Training is documented in the CORE Learning Management System (LMS).

1.01: Background Screening of Employees/Volunteers

Commendable (8)

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

1.02: Provision of an Abuse Free Environment

Commendable (8)

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

1.03: Incident Reporting

Commendable (8)

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

1.04: Pre-Service/Certification Requirements

Commendable (8)

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

1.05: In-Service Training Requirements

Exceptional (10)

- Six training files were reviewed for the receipt of in-service training hours. The files documented between fifty-three and one hundred and two hours of in-service training. The majority of the trainings were instructor-led.

1.06: Supervisory Reviews

Commendable (8)

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

Standard 2: Assessment and Intervention**Overview**

The Community Based Intervention Services (CBIS) program provides case management services to youth who are under court-ordered supervision by the Department of Juvenile Justice. Cases are received by the program through referrals from Probation and Community Intervention-Circuit 7. There are three case managers that provide services during the youth's transition phase from the residential commitment program, and seven additional case managers that provide full service case management services to youth on probation, conditional release, and post-commitment probation. Youth identified in need of mental health and/or substance abuse treatment are referred to an appropriate provider within the community.

The program had noted deficiencies regarding the Positive Achievement Change Tool Mental Health and Substance Abuse Screening Report and Referral Form and the State Attorney Recommendation.

2.01: Positive Achievement Change Tool (PACT)

Minimal (5)

- In all five applicable files reviewed, the Positive Achievement Change Tool (PACT) Mental Health and Substance Abuse Screening Report and Referral Form had not been completed as required.

2.02: State Attorney Recommendation (SAR)

Acceptable (7)

- In one of five applicable files, the Positive Achievement Change Tool (PACT) Pre-Screen was not completed before the State Attorney Recommendation (SAR).

- In two of five applicable files, the SAR was not submitted within the applicable timeframe.

2.03: Pre-Disposition Report (PDR)

Commendable (8)

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

2.04: Youth-Empowered Success (YES) Plan Development

Acceptable (7)

- In one of fourteen applicable files, the initial Youth-Empowered Success (YES) Plan did not address recommendations made by the residential program during the youth's transition.
- In one of fourteen applicable files, there was at least one Youth Requirement/PACT Goal in the initial YES Plan that did not contain the intervention plan elements (who, what, and how often). 76 of 77 Youth Requirements/PACT Goals in the initial YES Plan contained the intervention plan elements (who, what, and how often).
- In two of fourteen applicable files, the initial YES Plan was not signed by the youth, parent/guardian, Juvenile Probation Officer (JPO)/case manager, and/or supervisor within thirty days of placement.

2.05: YES Plan Implementation/Supervision

Acceptable (7)

- In seven of nineteen applicable ninety-day supervision periods, case notes did not reflect consistent compliance with JPO/case manager action steps contained in the Youth-Empowered Success (YES) Plan.
- In three of nine instances where noncompliance was documented, the JPO/case manager did not respond in a manner consistent with the progressive response/graduated sanctions plan.

2.06: Service Delivery/Referrals

Acceptable (7)

- In eight of thirteen applicable files, the JPO/case manager did not follow up with the service provider within thirty days to verify enrollment and/or initiation of services.
- In one of eleven applicable files, the JPO/case manager did not receive (or attempt to solicit), review, and/or document progress reports (written or verbal) from the provider.
- In one of five applicable files, the JPO/case manager did not address negative progress reports from the provider on issues such as missed appointments and non-participation.

2.07: PACT Reassessments and YES Plan Updates

Acceptable (7)

- In one of thirteen applicable ninety-day supervision periods, Youth Requirements/PACT Goals were not updated in JJIS prior to the ninety-day supervisory review.
- In two of fourteen applicable ninety-day supervision periods, a new Youth-Empowered Success (YES) Plan was not saved in JJIS prior to the ninety-day supervisory review.

2.08: Termination of Supervision

Acceptable (7)

- In one of seven files reviewed for this indicator, the Pre-Release Notification and Acknowledgement (PRN) form was not completed when termination was requested.

Overall Program Performance

Acceptable 75%

