



## **Florida Network of Youth and Family Services Children/Families in Need of Services Quality Improvement Standards**

### **Introduction**

The quality improvement process was developed pursuant to Florida Statute 985.632(5). The process is designed to support the Department of Juvenile Justice and the Florida Network's mission by ensuring that quality prevention, intervention, and treatment services are utilized to effectively "strengthen families and turn around the lives of troubled youth."

Florida Network subcontractors are subject to requirements included in Florida Statute, Florida Administrative Code, Department policy, and provider contracts. Quality Improvement Standards focus on policies and procedures that are identified as key to the Department and the Florida Network's mission. Due to the targeted scope of the quality improvement process, standards are not meant to be all-inclusive, and programs are encouraged to be cognizant of all requirements that apply to them.

Children/Families In Need of Services (CINS/FINS) Standards are applicable to all programs subcontracted through the Florida Network of Youth and Family Services to serve prevention youth in accordance with the standard CINS/FINS scope of services. In the event that a contract-based indicator differs from the provider's contract, the program shall be reviewed according to current contract language. It should be noted that the provider's contract incorporates the Florida Network's Policy and Procedure Manual for CINS/FINS, which is referenced herein.

### **Best Care Provider Designation**

Agencies securing a score of Satisfactory without exceptions in all indicators will be recognized by the Florida Network as a Best Care Provider. This recognition demonstrates the agency's ability to provide successful therapeutic interventions in a milieu that encourages the safety and well-being for youth and staff alike. A

Best Care Provider practices under a management structure that incorporates self-evaluation and learning into their everyday practice and designs a service continuum that is both functional and durable when the program experiences staff turnover, crisis, and other challenges to the resilience of the program. Those agencies earning the Best Care Provider distinction serve as models for their peers in the Florida Network, and within the spectrum of youth service providers throughout the state of Florida.

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# **S T A N D A R D O N E**

## Management Accountability

### **1.01 – Background Screening of Employees/Volunteers**

Background screening is conducted for all Department employees, contracted provider and grant recipient employees, volunteers, mentors, and interns with access to youth.

1. The background screening process is completed prior to hiring an employee or utilizing the services of a volunteer, mentor, or intern.
2. Employees and volunteers are re-screened every five (5) years of employment.
3. The Annual Affidavit of Compliance with Good Moral Character Standards (**Form IG/BSU-006**) is completed by the program and sent to the DJJ Background Screening Unit by January 31st of each year.

#### **Guidelines**

The program is expected to comply with requirements and procedures outlined in Department policy.

#### **References**

- FDJJ-1800, Background Screening Policy and Procedures

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

The program provides an environment in which youth, staff, and others feel safe, secure, and not threatened by any form of abuse or harassment.

1. Program staff adheres to a code of conduct that prohibits the use of physical abuse, profanity, threats, or intimidation. Youth are not deprived of basic needs, such as food, clothing, shelter, medical care, and security.
2. Any person who knows, or has reasonable cause to suspect, that a child is abused, abandoned, or neglected by a parent, legal custodian, caregiver, or other person responsible for the child's welfare, as defined by Florida Statute, or that a child is in need of supervision and care and has no parent, legal custodian, or responsible adult relative immediately known and available to provide supervision and care, reports such knowledge or suspicion to the Florida Abuse Hotline.
3. The program must have an accessible and responsive grievance process for youth to provide feedback and address complaints. The process should allow youth to grieve actions of staff and conditions or circumstances related to the violation or denial of basic rights. Direct care workers shall not handle the complaint/grievance document unless assistance requested by youth.
4. Management takes immediate action to address incidents of physical and/or psychological abuse, verbal intimidation, use of profanity, and/or excessive use of force.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in Florida Statute and Department policy.

### **References**

- F.S. 39.201, "Mandatory reports of child abuse, abandonment, or neglect; mandatory reports of death; central abuse hotline."
- FDJJ-1100, Rights of Youth in DJJ Care, Custody, or Supervision

## **1.03 – Incident Reporting**

Whenever a reportable incident occurs, the program notifies the Department's Central Communications Center (CCC) within two (2) hours of the incident, or within two (2) hours of becoming aware of the incident. The program also completes follow-up communication tasks/special instructions as required by the CCC in order to close the case and assure the incident has been fully attended to as needed.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in Department policy and Florida Administrative Code.

This indicator shall be rated "non-applicable" if the program has not had any reportable incidents during the scope of the review. Incidents discovered and reported by the review team during the review shall be considered "non-applicable," unless documentation exists that the program was aware of the incident, but failed to report it.

### **References**

- F.A.C. 63F-11, Central Communications Center

## **1.04 – Training Requirements**

Staff receives training in the necessary and essential skills required to provide CINS/FINS services and perform specific job functions. All direct care CINS/FINS staff (full-time, part-time, and on-call) shall have a minimum of 80 hours of training for the first full year of employment and 24 hours of training each year after the first year. Direct care staff in residential programs licensed by DCF is required to have 40 hours of training per year after the first year. Below is a list of the first year required training topics:

### **To be completed within 120 days of hire:**

- Local provider Orientation Training
- CINS/FINS Core Training
- Managing Aggressive Behavior (or any accredited crisis intervention training approved by the Florida Network (residential only-every two years.)
- Suicide Prevention (2 hours in addition to the SkillPro courses yearly)
- Signs and Symptoms of Mental Health and Substance Abuse
- CPR and First Aid
- Behavior Management (residential only delivered by agency)
- Understanding Youth/Adolescent Development
- Child Abuse Reporting
- Confidentiality
- Universal Precautions

### **To be completed within first year of employment:**

- Title IV-E procedures (residential only)
- An in-service component, describing the specific on-the-job training.
- Medication Distribution for Non-Licensed Staff (residential only)
- Training of Non-Licensed Mental Health Clinical Shelter Staff for Assessment of Suicide Risk.
- Fire Safety Equipment (every two years)
- Serving LGBTQ Youth
- Cultural Humility

### **Completed in DJJ-SkillPro Learning Management System**

(All staff are required to take this training, unless otherwise specified)

- Course #45 Information Security Awareness 1.0 Credit hrs.

- Course **#110** PREA - 1.0 Credit hrs. (every two years)
- Course **#111** Sexual Harassment - 1.0 Credit hrs. (every two years)
- Course **#112** Equal Employment Opportunity 1.0 Credit hrs.
- Course **#125** Trauma-Informed Care 2.0 Credit hrs. (direct contact positions)
- Course **#127** Suicide Prevention Part 1 1.0 Credit hrs.
- Course **#193** Suicide Prevention Part 2 1.0 Credit hrs.
- Course **#168** Child Abuse: Recognition, Reporting and Prevention - 2.0 Credit hrs.
- Course **#316** Human Trafficking101 for direct care staff - 2.0 Credit hrs.\* (annually)

Following the first year of employment, direct care staff training for residential staff should include refresher training on the use of available fire safety equipment, crisis intervention, training necessary to maintain current CPR and first aid certification and suicide prevention.

Training is scheduled throughout the year, and may be provided by the Florida Network, local community resources, and various local provider personnel approved or certified to deliver training.

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/or agendas for each training attended.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the Florida Network's Policy and Procedure Manual for CINS/FINS.

### **References**

- F.A.C. 63C-1.003(1)(c), Prevention, Children/Families In Need of Services, Coordinating Children-In-Need-of-Services and Families-In-Need-of-Services Programs
- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policy 6.04 (2013)



## 1.05 Analyzing and Reporting Information

The program collects and reviews several sources of information to identify patterns and trends including:

1. Quarterly case record review reports. These reviews may be completed by peers.
2. Quarterly review of incidents, accidents and grievances.
3. Annual review of customer satisfaction data.
4. Annual review of outcome data.
5. Monthly review of NetMIS data reports.

Findings are regularly reviewed by management and communicated to staff and stakeholders. Strengths and weaknesses are identified, improvements are implemented or modified and staff are informed and involved throughout the process.

### **Guidelines**

Program should have sample reports of aggregated data and committee/workgroup minutes analyzing information. There should be evidence of improvements/changes made from the analysis (revised procedures, training conducted or corrective action implemented). Review of external regulatory reports should reflect compliance and/or corrective action implemented.

### **References**

Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policy #5.00 (2013).

## 1.06- Client Transportation

The program has a transportation policy that is implemented by agency approved drivers. The basis of the policy is 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. The best practice to prevent such situations is to have a 3<sup>rd</sup> party present in the vehicle while transporting a client. The procedure of the policy addresses the following:

1. Approved agency drivers are agency staff approved by administrative personnel to drive client(s) in agency or approved private vehicle.
2. Approved agency drivers are documented as having a valid Florida driver's license and are covered under company insurance policy.
3. Third party is an approved volunteer, intern, agency staff, or other youth.
4. Documentation of use of vehicle that notes name or initials of driver, date and time, mileage, number of passengers, purpose of travel and location.

### **Guidelines**

In the event that a 3<sup>rd</sup> party cannot be obtained for transport, the clients' history, evaluation, and recent behavior is considered. The agency approved driver's work performance and history indicates no inappropriate behavior is likely to occur. If driver is transporting a single client in a vehicle, there is evidence that the program supervisor is aware (prior to the transportation) and consent is documented accordingly.

### **References**

Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policy # 5.07

## **1.07 –Outreach Services**

The program participates in local DJJ board and council meetings to ensure CINS/FINS services are represented in a coordinated approach to increasing public safety by reducing juvenile delinquency through effective prevention, intervention and treatment services. The program also maintains written agreements with other community partners that include services provided and a comprehensive referral process.

The agency contributes to the implementation of Departmental objectives through participation in local and circuit level meetings. The assigned representatives to these groups will advocate for the effective use of CINS/FINS services and update agency leadership on meeting activities.

There is a lead staff member designated to attend local and circuit level meetings convened by the Department of Juvenile Justice.

### **Guidelines**

- Agency can provide minutes to meetings
- Agency can provide verification of attendance at DJJ Board and Council meetings
- Agency provides support and accommodation for representative to participate in assigned meetings.

### **References**

#### **Florida Network Policy #1.01**

# STANDARD TWO

## Intervention and Case Management

### 2.01 – Screening and Intake

Centralized intake services are available through programs providing shelter services, and are accessible twenty-four hours, seven days a week. Centralized intake services include screening for eligibility, crisis counseling and information, and referral. The initial screening for eligibility must occur within seven (7) calendar days of referral by a trained staff member using the NetMIS screening form.

Youth and parents/guardians receive the following in writing during intake:

1. Available service options;
2. Rights and responsibilities of youth and parents/guardians; and

The following information is also available to youth and parents/guardians:

1. Possible actions occurring through involvement with CINS/FINS services (i.e. case staffing committee, CINS petition, CINS adjudication); and
2. Grievance procedures.

#### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the Florida Network's Policy and Procedure Manual for CINS/FINS.

#### **References**

- F.A.C. 63C-1.002(2)(a), Prevention, Children/Families In Need of Services, Nonjudicial Procedures for Families Needing Services
- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policies 2.00 (2010), 2.01 (2012), and 3.00 (2012)
- Chapter 984.11 F.S.

## **2.02 – Needs Assessment**

A needs assessment is completed to gather and analyze information for all youth receiving services. The assessment contains the elements required by the Florida Network's Policy and Procedure Manual for CINS/FINS, and is:

1. Initiated (or attempted) within 72 hours of admission, if the youth is in shelter care or updated if most recent needs assessment is over six months old; or
2. Completed within two to three face-to-face contacts following the initial intake if the youth is receiving non-residential services or updated if most recent needs assessment is over six months old.

Needs assessments are completed by Bachelor's or Master's level staff and signed by a supervisor. If the suicide risk component of the assessment is required (as a result of suicide risk screening), it must be reviewed (signed and dated) by a licensed clinical supervisor or written by licensed clinical staff.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the Florida Network's Policy and Procedure Manual for CINS/FINS.

### **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policy 3.03 (2012)

## 2.03 – Case/Service Plan

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

1. Identified need(s) and goal(s);
2. Type, frequency, and location of service(s);
3. Person(s) responsible;
4. Target date(s) for completion;
5. Actual completion date(s);
6. Signature of youth, parent/guardian, counselor, and supervisor; and
7. Date the plan was initiated.

The case/service plan is reviewed by the counselor and parent/guardian (if available) every 30 days for the first three months, and every six months thereafter, for progress in achieving goals, and for making any necessary revisions to the case/service plan, if indicated.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the Florida Network's Policy and Procedure Manual for CINS/FINS.

When the youth and/or parent/guardian are not available to sign the case/service plan, this shall be documented on the case/service plan and in the progress notes.

### **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policies 4.04 (2012) and 4.08 (2009)

## **2.04 – Case Management and Service Delivery**

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

1. Establishing referral needs and coordinating referrals to services based upon the ongoing assessment of the youth's/family's problems and needs;
2. Coordinating service plan implementation;
3. Monitoring youth's/family's progress in services;
4. Providing support for families;
5. Monitoring out-of-home placement, if necessary;
6. Referrals to the case staff committee, as needed to address the problems and needs of the youth/family;
7. Recommending and pursuing judicial intervention in selected cases;
8. Accompanying youth and parent/guardian to court hearings and related appointments, if applicable;
9. Referral to additional services, if needed;
10. Continued case monitoring and review of court orders; and
11. Case termination with follow-up.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the Florida Network's Policy and Procedure Manual for CINS/FINS.

### **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policy 4.05 (2012)

## 2.05 – Counseling Services

Youth and families receive counseling services, in accordance with the youth's case/service plan, to address needs identified during the assessment process. Shelter programs provide individual and family counseling, as well as group counseling sessions held a minimum of five days per week. Group counseling is not intended to be therapy.

A structured group has:

1. 1.A clear leader or facilitator
2. Relevant topic- educational/informational or developmental
3. Opportunity for youth to participate
4. 30 minutes or longer

Groups may be conducted by staff, youth, or guests. Documentation of groups must include date and time, a list of participants, length of time, and topic.

Non-residential programs provide therapeutic community-based services designed to provide the intervention necessary to stabilize the family in the event of crisis, keep families intact, minimize out-of-home placement, provide aftercare services for youth returning home from shelter services, and prevent the involvement of youth and families in the delinquency and dependency systems. Services are provided in the youth's home, a community location, or the local provider's counseling office.

Programs that offer counseling services:

1. Reflect all case files for coordination between presenting problem(s), psychosocial assessment, case/service plan, case/service plan reviews, case management, and follow-up;
2. Maintain individual case files on all youth and adhere to all laws regarding confidentiality;
3. Maintain chronological case notes on the youth's progress; and
4. Maintain an on-going internal process that ensures clinical review of case records, youth management, and staff performance regarding CINS/FINS services.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the Florida Network's Policy and Procedure Manual for CINS/FINS.

### **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policies 4.01 (2012) and 4.03 (2012)



## **2.06 – Adjudication/Petition Process**

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

1. The youth/family is not in agreement with services or treatment;
2. The youth/family will not participate in the services selected; or
3. The program receives a written request from the parent/guardian or any other member of the committee.

A case staffing committee is convened within seven (7) working days from receipt of the written request from the parent/guardian.

As a result of the case staffing committee meeting, the youth and family are provided a new or revised plan for services. Within (7) seven working days of the meeting, a written report is provided to the parent/guardian outlining the committee recommendations (e.g. the filing of a CINS petition, additional services, and/or referral to other local providers) and the reasons behind the recommendations.

The program works with the circuit court for judicial intervention for the youth or family, as recommended by the case staffing committee, in accordance with the procedures outlined in Florida Statute and the Florida Network's Policy and Procedure Manual for CINS/FINS. The case manager or designee completes a review summary prior to the reviewing hearing, informing the court of the youth's behavior and compliance with court orders and providing recommendations for further dispositions.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the Florida Network's Policy and Procedure Manual for CINS/FINS.

### **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policies 4.06 (2012) and 4.07 (2009)

## **2.07 – Youth Records**

The program maintains confidential records for each youth that contains pertinent information involving the youth and his/her treatment at the program.

1. All records are marked “confidential” and kept in a secure room or locked in a file cabinet that is marked confidential, which is accessible to program staff.
2. All records that are transported are locked in an opaque container that is marked confidential.
3. Youth records are maintained in a neat and orderly manner so that staff can quickly and easily access information.

### **Guidelines**

Youth records should be accessible only by program staff. Records should be organized for optimal information retrieval.

### **Reference**

s. 984.06, Florida Statutes

# STANDARD THREE

## Shelter Care

### 3.01 - Shelter Environment

The shelter's environment is safe, clean, neat and well maintained. The program provides structured daily programming to engage youth in activities that foster health, social, emotional, intellectual and physical development.

#### Facility and Site Inspection

1. Furnishings are in good repair.
2. The program is free of insect infestation.
3. Grounds are landscaped and well maintained.
4. Bathrooms and shower areas are clean and functional; free of foul odors, leaks, dust, and mildew and in good working order.
5. There is no graffiti on walls, doors, or windows.
6. Lighting is adequate for tasks performed there.
7. Exterior areas are free of debris, grounds are free of hazards.
8. Dumpster and garbage can(s) are covered.
9. All doors are secure, in and out access is limited to staff members and key control is in compliance.
10. Detailed map and egress plans of the facility, general client rules, grievance forms, abuse hotline information, DJJ Incident Reporting Number and other related notices are posted.
11. All agency and staff vehicles are locked. Agency vehicles are equipped with major safety equipment including first aid kit, fire extinguisher, flash light, glass breaker, seat belt cutter, air bag deflator.
12. Interior areas (bedrooms, bathrooms, common areas) do not contain contraband and are free from hazardous unauthorized metal/foreign objects.
13. All chemicals are listed, approved for use, inventoried, stored securely and Material Safety Data Sheets (MSDS) are maintained on each item (minimum 1 time per week or per agency policy).
14. Washer/dryer are operational & general area/lint collectors are clean.
15. Agency has a current DCF Child Care License which is displayed in the facility.
16. Each youth has own individual bed with clean covered mattress, pillow, sufficient linens and blanket.
17. Youth have a safe, lockable place to keep personal belongings, if requested.

#### Fire Safety and Health Hazards

1. Annual facility fire inspection was conducted and the facility is in compliance with local fire marshal and fire safety code within jurisdiction.
2. Agency completes a minimum of 1 fire drill per month within 2 minutes or less.
3. Completes 1 mock emergency drill per shift per quarter.
4. All annual fire safety equipment inspections are valid and up-to-date (extinguishers, sprinklers, alarm system and kitchen overhead hood).
5. Agency has a current Satisfactory Residential Group Care inspection report from the Department of Health.
6. Agency has a current Satisfactory Food Service inspection report from the Department of Health and food menus posted, current and signed by Licensed Dietician annually.
7. All cold food is properly stored, marked and labeled and dry storage/pantry area is clean and food is properly stored. Refrigerators/Freezers are clean and maintained at required temperatures and all small and medium sized appliances are operable and clean for use as needed.

#### Youth Engagement

1. Youth are engaged in meaningful, structured activities (e.g., education, recreation, counseling services, life and social skill training) seven days a week during awake hours. Idle time is minimal.
2. At least one hour of physical activity is provided daily.
3. Youth are provided the opportunity to participate in a variety of faith-based activities. Non-punitive structured activities are offered to youth who do not choose to participate in faith-based activities.
4. Daily programming includes opportunities for youth to complete homework and access a variety of age appropriate, program approved books for reading. Youth are allowed quiet time to read.
5. Daily programming schedule is publically posted and accessible to both staff and youth.

#### **Guidelines**

Clean, well-maintained programs are an indication that management, staff and youth are invested in and take pride in the program. It is essential that youth be offered a variety of activities during their stay that keep them active and involved. These activities should be designed to provide each youth with opportunities to mature physically, mentally and socially through exposure to positive role models, competition, peer influence and leadership. While youth do need some time to relax and be themselves, large amounts of idle time will lead to problems. The use of the TV to “baby-sit” youth should not be allowed.

#### **References**

Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policy 4.01 (2012)



### 3.02 - Program Orientation

Youth are given an opportunity to learn about the program and its expectations through a positive orientation process. Within at least 24 hours and preferably immediately upon completion of each youth's intake, staff should begin the orientation process by discussing the program's philosophy, goals, services and expectations. Youth orientation should include the following:

- A review of expectations, program rules and the behavior management strategies
  - each youth is given a list of contraband items
  - each youth shall be informed of disciplinary actions
  - explain program's dress code
  - access to medical and mental health services
  - procedures for visitation, mail and telephone
  - grievance procedure
  - disaster preparedness instructions
  - physical layout of the facility
  - sleeping room assignment and introductions
  - suicide prevention- alerting staff of feelings or awareness of others having suicidal thoughts

Documentation of each component of orientation, including orientation topics and dates of presentation, as well as signatures of the youth and staff involved is maintained in the individual youth record.

#### **Guidelines**

Staff should be trained in how to orient a youth to the program so that they are welcoming and respectful. How staff interacts with a youth during the orientation process can help the youth feel more emotionally and physically safe, thus reducing safety and security risks and increasing responsiveness to treatment. Orientation may be presented in a variety of ways. Programs may conduct orientation in a classroom setting or review information one-on-one with the youth.

#### **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policy 4.01.

### 3.03 – Youth Room Assignment

The program demonstrates the goal to protect youth through a classification system that ensures the most appropriate sleeping room assignment.

1. A process is in place that includes an initial classification of the youth for purposes of room or living area assignment with consideration given to potential safety and security concerns. This includes but is not limited to:
  - Review of available information about the youth’s history, status and exposure to trauma
  - Initial collateral contacts,
  - Initial interactions with and observations of the youth,
  - Separation of younger youth from older youth,
  - Separation of violent youth from non-violent youth,
  - Identification of youth susceptible to victimization,
  - Presence of medical, mental or physical disabilities,
  - Suicide risk,
  - Sexual aggression and predatory behavior.
  
2. An alert is immediately entered into the program’s alert system when a youth is admitted with special needs and risks such as risk of suicide, mental health, substance abuse, physical health or security risk factors.

#### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the Florida Network’s Policy and Procedure Manual for CINS/FINS.

#### **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, 4.01 (2012)

### 3.04- Log Books

Log books document routine daily activities, events and incidents in the program and are reviewed by direct care and supervisory staff at the beginning of each shift.

1. Log book entries that could impact the security and safety of the youth and/or program are highlighted.
2. All entries are brief and legibly written in ink and include:
  - Date and time of the incident, event or activity
  - Names of youth and staff involved
  - A brief statement providing pertinent information
  - The name and signature of the person making the entry.
3. All recording errors are struck through with a single line. The staff person must initial and date the correction. The use of whiteout is prohibited.
4. The program director or designee reviews the facility logbook(s) every week and makes a note chronologically in the logbook indicating the dates reviewed and if any correction, recommendations and follow-up are required and sign/date the entry.
5. The oncoming supervisor reviews the logbook of the previous two shifts (at a minimum) to become aware of any unusual occurrences, problems, etc. and makes an entry signed and dated into the logbook indicating the dates reviewed to document the review.
6. Direct care staff in the unit reviews the logbook for the previous two shifts (at a minimum) in order to be aware of any unusual occurrences, problems, etc. They make an entry in the logbook and sign/date that they have reviewed it and the dates reviewed.

#### **Guidelines**

The logbook is the permanent record of the life of the program. Very often, entries in it have been useful as documentation in legal proceedings. The permanent logs should be bound, with sequential pages. Entries must be made in ink with no erasures or white out areas.

#### **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policies 4.01 (2012).



## **Electronic Log Books**

Electronic log books document routine daily activities, events and incidents in the program and are reviewed by direct care and supervisory staff at the beginning of each shift.

1. Electronic log book entries that could impact the security and safety of the youth and/or program are highlighted.
2. All entries include:
  - Date and time of the incident, event or activity
  - Names of youth and staff involved
  - A statement providing pertinent information
  - The name and signature of the person making the entry.
3. All recording errors are struck through with a single line. The staff person must initial or sign for the deleted entry.
4. The program director or designee reviews the facility logbook(s) every week and makes a note chronologically in the logbook indicating the dates reviewed and if any correction, recommendations and follow-up are required and sign/date the entry.
5. The oncoming supervisor reviews the logbook of the previous two shifts (at a minimum) to become aware of any unusual occurrences, problems, etc. and makes an entry signed and dated into the logbook indicating the dates reviewed to document the review.
6. Direct care staff in the unit reviews the logbook for the previous two shifts (at a minimum) in order to be aware of any unusual occurrences, problems, etc. They make an entry in the logbook and sign that they have reviewed it and the dates reviewed.

### **Guidelines**

The paper and electronic logbooks are the permanent record of the life of the program. Very often, entries in it have been useful as documentation in legal proceedings. The paper logbook should be bound, with sequential pages.

### **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policies 4.01 (2017-18).

### 3.05 - Behavior Management Strategies

The program has a behavior management strategy that is designed to not only gain compliance with program rules, but to influence the youth to make positive choices and increase personal accountability and social responsibility.

1. The program has a detailed written description of the behavioral management strategies that includes;
  - A wide variety of positive incentives used by the program
  - Appropriate interventions are used by the program in order to teach youth new behaviors and help youth understand the natural consequences for their actions.
  - Behavioral interventions are applied immediately, with certainty, and reflect the severity of the behavior.
2. Consequences for violation of program rules are applied logically and consistently.
3. The program uses a variety of rewards/incentives to encourage participation and completion of the program.
4. All staff is trained in the theory and practice of facilitating successful interventions. There is a protocol for providing feedback and evaluation of staff regarding their use of positive and negative consequences.
5. Supervisors are trained to monitor the use of behavioral interventions by their staff to include the use of point-based and level-based interventions.

Behavioral interventions utilize the least amount of force necessary to address the situation and basic rights of youth are not violated.

1. Counseling, verbal intervention and de-escalation techniques are used prior to physical intervention.
2. When staff are required to physically engage youth, only nationally recognized techniques approved by the Florida Network and the DJJ are used.
3. Only staff discipline youth.
4. Group discipline is not imposed.
5. Room restriction is used only as part of a system that ensures the least restrictive means possible is utilized to maintain the safety and security of the youth and others in the program.
6. Room restriction is not used for youth who are physically and/or emotionally out of control.
7. Disciplinary measures do not deny youth any of the following:
  - Regular meals and snacks
  - Clothing

- Sleep
- Physical health services or mental health services
- Educational services
- Exercise
- Correspondence privileges
- Contact with parents or guardians, attorney of record, juvenile probation officer or clergy

### **Guidelines**

Physical intervention should be used as a last resort and only by trained staff. Basic rights should never be denied as part of behavior management practices. Program behavior management strategies should be responsive to the unique needs of the target population and input should be solicited and considered from both youth and staff. It should be designed to:

- Maintain order and security
- Promote safety, respect and fairness and protection of rights
- Provide constructive discipline and a system of positive and negative consequences to encourage youth to meet expectations for behavior
- Provide opportunities for positive reinforcement and recognition
- Promote constructive dialogue and peaceful conflict resolution
- Minimize the separation of youth from the general population
- Behavioral intervention strategies utilize the least amount of force necessary to address the situation and basic rights of youth are not violated.

### **References**

Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policy 4.01 (2012).

### 3.06- Staffing and Youth Supervision

Adequate staffing is provided to ensure the safety and security of youth and staff.

1. The program maintains minimum staffing ratios as required by Florida Administrative Code and contract.
  - 1 staff to 6 youth during awake hours and community activities
  - 1 staff to 12 youth during the sleep period
2. There is always at least one staff on duty of the same gender as the youth. If a program accepts both males and females, there should always be both a male and a female staff present, including the overnight or sleep period. Overnight shifts must always provide a minimum of two staff present.
3. The staff schedule is provided to staff or posted in a place visible to staff.
4. There is a holdover or overtime rotation roster which includes the home telephone numbers of staff who may be accessed when additional coverage is needed.
5. Staff observe youth at least every 15 minutes while they are in their sleeping room, either during the sleep period or at other times, such as during illness or room restriction. *(This does not supersede requirements for constant supervision of youth at risk of suicide or short room-check times when authorized by treatment staff or management. Times are documented in real time.)*

#### **Guidelines**

Program staff included in the staff-to-youth ratio includes youth care workers, supervision staff and treatment staff. If program does not meet male and female guideline above (#2) program must present proof of effort during the time frames where guideline is not met. Overnight shifts should always be covered with a minimum of two staff while effort is made to find staff of both genders to cover the shift.

#### **References**

Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policy 4.02 (2012).

## 3.07 – Special Populations

### **Staff Secure**

Local providers can be funded to provide staff secure supervision and assign one staff to one youth as assigned by the court at any given time. The staff secure program will:

1. Have a staff secure policy and procedure that outlines the following:
  - 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
  - Collaborative aftercare
2. Accept only youth for staff secure placement that have met the legal requirements outlined in Chapter 984 F.S for being formally court ordered into staff secure services.
3. Assign specific staff during each shift to monitor the location and movement of the staff secure youth at all times.
4. Document the assignment of specific staff to the staff secure youth for each shift through daily log book, a posted staff calendar or any other means that clearly denotes by name the staff person assigned to the staff secure youth.

### **Domestic Minor Sex Trafficking**

Domestic Minor Sex Trafficking (DMST) services are designed to serve domestic minor sex trafficking youth approved by the Florida Network who may exhibit behaviors which require additional supervision for the safety of the youth or the program. All requests may be approved for a maximum of seven (7) days. Approval for support beyond seven (7) days may be obtained on a case-by-case basis.

Staff assigned to youth under this provision are to enhance the regular services available through direct engagement with the youth in positive activities designed to encourage the youth to remain in shelter.

## **Domestic Violence Respite**

Agencies that serve domestic violence respite youth must meet the following criteria:

- Agencies that do not have assigned bed days must receive prior approval for any Domestic Violence Respite placement.
- Youth must have a pending Domestic Violence (DV) charge
- Youth has been screened by the JAC or screening unit, but does not meet criteria for secure detention.
- Youth length of stay in DV Respite placement does not exceed 21 days.
- Data entry into NetMIS and JJIS within 24 hours of admission and 72 hours of release.
- Documentation in file of transition to CINS/FINS or Probation Respite placement, if applicable.
- Case Plan reflects goals for aggression management, family coping skills, or other interventions designed to reduce propensity for violence in the home.
- Services provided to these youth should be consistent with all other CINSFINS program requirements.
- Youth with DCF involvement are eligible.

## **Probation Respite**

Agencies that serve Probation Respite youth must meet the following criteria:

- All referrals should come from DJJ Probation.
- Youth with DCF involvement are eligible.
- Youth must be on Probation with Adjudication Withheld.
- It is the local agency's responsibility to determine appropriateness for placement after the above criteria is met. Factors to consider are seriousness of past charges/history, behavior history, current population, bed availability, etc.
- All Probation respite referrals should be submitted through the Probation respite Referrolator via the member's page on the Florida Network website at time of admission.
- Data entry into NetMIS and JJIS with 24 hours of admission and 72 hours of release.

- The Florida Network must be contacted for approval before admission takes place.
- The length of stay should be determined at the time of admission.
- It is anticipated that the length of stay will be fourteen (14) to thirty (30) days. The JPO shall be contacted, as well as the Network Office in writing of any youth who is in need of an extension for receiving respite services, no later than 5 working days before the 30<sup>th</sup> day a youth is in the program.
- There is evidence that all case management and counseling needs have been considered and addressed.
- Services provided to these youth should be consistent with all other CINSFINS program requirements.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the CINS FINS Policy and Procedure Manual.

### **References**

Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services. Policy #4.08 (2009) and Policy #4.11 (2013).

### 3.08- Video Surveillance System

The program has a video surveillance system that is instituted and in operation 24 hours a day, 7 days a week. The purpose for the operation of the system is to guarantee personnel accountability while capturing the agency happenings to ensure the safety of all youth, staff, and visitors. (This applies to cameras affixed in residential shelters, and group care facilities.) The video surveillance system shall be a means to deter any misconduct and provide video evidence to any situation that involves allegations.

#### **Guidelines**

The agency, at a minimum, shall demonstrate

1. System can capture and retain video photographic images which must be stored for a minimum of 30 days.
2. System can record date, time, and location; maintain resolution that enables facial recognition.
3. Back-up capabilities consist of cameras' ability to operate during a power outage.
4. The locations of the cameras placed in interior (e.g. intake office, counseling office, cafeteria, day room) and exterior (e.g. entrance/exit, recreation area, parking lot) general locations of the shelter where youth and staff congregate and where visitors enter and exit. Cameras are never placed in bathrooms or sleeping quarters.
5. Video surveillance system is only accessible to designated personnel (a list is maintained which also includes off-site capability per personnel).
6. Supervisory review of video is conducted a minimum of once every 14 days and noted in the logbook. The reviews assess the activities of the facility and include a review of a random sample of overnight shifts. All cameras are visible to persons in the area (no covert cameras) and a written notice is conspicuously posted on the premises for the purpose of security.
7. The process of third party review of video recordings after a request from program quality improvement visits and when an investigation is pursued after an allegation of an incident.

#### **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policy #4.13



# STANDARD FOUR

## Mental Health/Health Services

### 4.01 – Healthcare Admission Screening

The program performs a preliminary physical health screening for each youth at the time of admission to the shelter. If present during the scheduled working hours, the agency nurse will conduct the health screening. If no nurse is present, Non-health care staff may perform this screening. In the event the nurse does not conduct the screening they will review all intakes within 5 business days. The preliminary health screening shall include, but not be limited to:

1. Current medications;
2. Existing (acute and chronic) medical conditions;
3. Allergies;
4. Recent injuries or illnesses;
5. Presence of pain or other physical distress;
6. Observation for evidence of illness, injury, physical distress, difficulty moving, etc.; and
7. Observation for presence of scars, tattoos, or other skin markings.

Written policy, procedures and practice ensure medical care for youth admitted with chronic medical conditions (e.g. diabetes, pregnancy, seizure disorder, cardiac disorders, asthma, tuberculosis, hemophilia, head injuries, etc.) and include a thorough referral process and mechanism for necessary follow-up medical care as required and/or needed. The parent/guardian may be actively involved in the coordination and scheduling of follow-up medical appointments. The program documents all medical referrals on a daily log.

#### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the DJJ Health Services Manual.

## **References**

- DJJ Health Services Manual, Chapter 19, Sections II and III

### **4.02 – Suicide Prevention**

There is a written plan that details the program's suicide prevention and response procedures. The plan complies with the procedures outlined in the Florida Network's Policy and Procedure Manual for CINS/FINS. The plan clearly delineates staff positions, duties, supervisory roles, involvement of licensed professionals, documentation protocols, notification procedures, and referral systems in connection with suicide prevention and response.

Each youth is screened for suicide risk in accordance with the Florida Network's Policy and Procedure Manual for CINS/FINS. Suicide risk screening is included as part of the initial intake and screening process, and the results are reviewed and signed by the supervisor and documented in the youth's case file. If suicide risk is indicated as a result of suicide risk screening, the following professionals shall assess the youth within 24 hours: a licensed mental health professional, a non-licensed mental health professional under the supervision of a licensed mental health, licensed clinical social worker, a non-licensed clinical social worker under the supervision of a licensed clinical social worker. If the screening occurs between 5:00 p.m. on Friday and 9:00 a.m. on Monday and there is no access to staff to conduct an assessment within 24 hours, the assessment must be completed the morning of the first business day.

Youth awaiting assessment by an aforementioned professional are placed on constant sight-and-sound supervision. If the youth engages in suicidal/homicidal gestures, repeatedly states he/she wishes to harm self or other, and/or states a specific plan for suicide, the youth is placed on one-to-one supervision and referred to law enforcement and/or Baker Act procedures are followed. After the assessment of suicide risk, the youth is placed on one-to-one or constant sight-and-sound supervision according to assessment results. Supervision level is not changed or reduced until an aforementioned professional completes a further assessment.

The staff person(s) assigned to monitor youth maintained on one-to-one supervision or constant supervision should document his/her observations of the youth's behavior at 30 minute or less intervals using either an Observation Log or in the shelter daily log. Documentation should include the time of day, behavioral observations, any warning signs observed and the observers' initials. Documentation must be reviewed by supervisory staff each shift. If using an Observation Log, once it is completed, it must be placed in the youth's file.

## **Guidelines**

The program is expected to comply with requirements and procedures outlined in the Florida Network's Policy and Procedure Manual for CINS/FINS.

## **References**

- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policies 3.01 (2010), 3.02 (2011) and 3.021(2011).

### 4.03 – Medications

The program follows written procedures that address the safe and secure storage, access, inventory, disposal, and administration/distribution of medications in accordance with the DJJ Health Services Manual. The program's procedures include the following mandatory components:

1. All medications are stored in a Pyxis Med-Station 4000 Medication Cabinet that is inaccessible to youth (when unaccompanied by authorized staff);
2. Agencies will maintain a minimum of 2 site-specific Super Users for the Med-Station.
3. Oral medications are not stored with injectable or topical medications;
4. Medications that require refrigeration are stored in a secured refrigerator that is used for medication only (if the refrigerator is not secure, the room is secure and inaccessible to youth.) Temperature requirements are (2 degrees- 8 degrees C or 36-46 degrees F) for storage of medications.
5. Narcotics and controlled medications are in the Pyxis Med-Station.
6. Only designated staff delineated in User Permissions have access to secured medications, with limited access to controlled substances (narcotics);
7. For controlled substances, a perpetual inventory with running balances is maintained as well as a shift-to shift count verified by a witness and documented. .  
Over the counter medications that are accessed regularly are inventoried weekly by maintaining a daily perpetual inventory; and
8. Syringes and sharps (needles, scissors, etc.) are secured, and counted and documented weekly.
9. A Medication Distribution Log shall be used for distribution of medication by non-licensed and licensed staff.

10. Monthly review of medication management practice via Knowledge Portal or Pyxis Med-Station Reports.
11. Agency verifies medication using one of four methods listed in the FNYFS 2016-17 Operations Manual.
12. When nurse is on duty, medication processes are conducted by the nurse.
13. The delivery process of medications is consistent with the FNYFS Medication Management and Distribution Policy.
14. All discrepancies must be cleared each shift.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the DJJ Health Services Manual.

### **References**

- DJJ Health Services Manual, Chapter 19, Section IV
- Policy and Procedure Manual for CINS/FINS, Florida Network of Youth and Family Services, Policies 5.06(2013).

#### **4.04 – Medical/Mental Health Alert Process**

The program follows written procedures that ensure information concerning a youth's medical condition, physical activity restrictions, allergies, common side effects of prescribed medications, food and medication contraindication, and other pertinent treatment information is effectively communicated to all staff through an alert system.

The system includes precautions concerning prescribed medication and medical and mental health conditions. Staff is provided with sufficient training, information and instructions that allow them to recognize and respond to the need for emergency care and treatment as a result of identified medical or mental health problems.

To ensure safety and security of all shelter youth, Suicide Risk Alerts and Mental Health Alerts will be utilized to inform staff of youth suicide risk or mental health related needs, which may require emergency care, assessment and treatment.

#### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the DJJ Health Services Manual.

#### **References**

- DJJ Health Services Manual, Chapter 19, Section V

## 4.05 – Episodic/Emergency Care

The program follows written procedures that ensure the provision of emergency medical and dental care. The program's procedures include the following mandatory components:

- Obtaining off-site emergency services;
- Parental notification requirements
- Incident Reporting to the CCC and Florida Network
- Development and implementation of a daily log, and
- Upon youth return to shelter, verification of receipt of medical clearance, discharge instructions and follow-up care.

### **Guidelines**

The program is expected to comply with requirements and procedures outlined in the DJJ Health Services Manual.

### **References**

- DJJ Health Services Manual, Chapter 19, Section VI