

STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

**BUREAU OF MONITORING AND
QUALITY IMPROVEMENT**

Annual Compliance Report

AMIkids Boys Prevention Manatee

AMIkids Inc.

(Contract Provider)

6413 9th Street East

Bradenton, Florida 34203

Review Date(s): March 10, 2020



Promoting Continuous Improvement and Accountability
in Juvenile Justice Programs and Services



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; or limited, unintentional, and/or non-systemic exceptions which do not result in reduced or substandard service delivery; or systemic exceptions with corrective action already applied and demonstrated.
Limited Compliance	Systemic exceptions to the requirements of the indicator; exceptions to the requirements of the indicator which result in the interruption of service delivery; and/or 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 which typically requires immediate follow-up and response to remediate the issue and ensure service delivery.

Review Team

The Bureau of Monitoring and Quality Improvement 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:

Marvin D. Bliss, Office of Program Accountability, Lead Reviewer (Standard 1)

Susan J. Coufman, DJJ Probation, Circuit 18, Senior Juvenile Probation Officer (Standard 1 and 2)

Paul Sheffer, Office of Program Accountability, Regional Monitor (Standard 2)

Program Name: AMIkids Boys Prevention Manatee
Provider Name: AMIkids Inc.
Location: Manatee County / Circuit 12
Review Date(s): March 10, 2020

MQI Program Code: 1416
Contract Number: 10394
Number of Beds: 44
Lead Reviewer Code: 173

This review was conducted in accordance with FDJJ-2000 (Contract Management and Program Monitoring and Quality Improvement Policy and Procedures), and focused on the areas of (1) Management Accountability, (2) Assessment Services & Intervention Services, which are included in the AMIkids Prevention Standards.

Overall Rating Summary

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All indicators have been rated Satisfactory and no corrective action is needed at this time.

Standard 1: Management Accountability
AMIkids Prevention Rating Profile

Indicator Ratings

Standard 1 - Management Accountability		
1.01	* Initial Background Screening	Satisfactory
1.02	Five-Year Rescreenings	Non-Applicable
1.03	Pre-Service/Certification Requirments	Satisfactory
1.04	In-Service Training	Satisfactory
1.05	* Incident Reporting (CCC)	Satisfactory
1.06	Administration	Satisfactory
1.07	*Provision of an Abuse-Free Enviornment	Satisfactory
1.08	Food Services	Satisfactory
1.09	Transporation Services	Satisfactory
1.10	Fire Prevention and Evacuation Procedures	Satisfactory
1.11	Cleanliness and Sanitation	Satisfactory
1.12	Youth Records	Satisfactory

* The Department has identified certain key critical indicators. These indicators represent critical areas that require immediate attention if a program operates below Department standards. A program must therefore achieve at least a Satisfactory Compliance rating in each of these indicators. Failure to do so will result in a program alert form being completed and distributed to the appropriate program area (detention, residential, probation).

Standard 2: Assessment & Intervention Services
AMIkids Prevention Rating Profile

Indicator Ratings

Standard 2 - Youth Management		
2.01	Eligibility	Satisfactory
2.02	Orientation	Satisfactory
2.03	*Gender-Specific Programming	Satisfactory
2.04	Prevention Assessment Tool (PAT)	Satisfactory
2.05	Individualized Care Plan	Satisfactory
2.06	Transition Plan	Satisfactory
2.07	*Referrals for Mental Health and Substance Abuse Assessment and Treatment Services	Satisfactory
2.08	Individualized Care Plan Re-Evaluation	Satisfactory
2.09	Educational Access	Satisfactory
2.10	Youth Development	Satisfactory
2.11	Release	Satisfactory

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Program Overview

AMIkids Boy's Prevention - Manatee is operated by AMIkids, Inc. through a contract with the Department. This gender-specific prevention program provides delinquency prevention services to male youth who are between eleven and seventeen years of age. The program is comprised of an executive director, one business manager, two case managers, two behavioral interventionists, and two family support specialists. The program operates on the Manatee County School District schedule and offers a non-traditional school setting each day, including the provision of transportation, dietary, and case management services. Delinquency prevention services provided to the youth in the program include individualized case management, family education and support, service learning, exposure to the community, healthy social and recreational activities, transition services, and, when appropriate, referrals to appropriate community-based agencies for needed services including mental health counseling. The program also provides the youth with opportunities to develop an array of gender-specific life management skills through the application of a curriculum with demonstrated effectiveness in diminishing the risk of delinquency with at-risk youth entitled, "The Council for Boys and Young Men." Once admitted to the program, the youth has access to individualized services (focused on meeting identified academic/employment readiness, behavioral, and social needs) specifically designed to decrease the risk factors while enhancing protective factors, in an effort to reduce the youth's risk for involvement in delinquent behaviors/activities. An integral component of the delinquency prevention services is the completion of an assessment of a youth's dynamic risk factors to identify the youth's core needs and enable the program to deliver youth-specific services during enrollment in the program. At the time of the annual compliance review, the program had two vacancies, one language arts teacher and one exceptional student educator (ESE) teacher.

Standard 1: Management Accountability

1.01 Initial Background Screening	Satisfactory Compliance
<i>Background screening is conducted for all Department employees, contracted provider and grant recipient employees, volunteers, mentors, and interns with access to youth and confidential youth records. A contract provider may hire an employee to a position which requires background screening before the screening process is completed, but only for training and orientation purposes. However, these employees may not have contact with youth or confidential youth records until the screening is completed, the rating is eligible, and the employee does not demonstrate he or she exhibits any behaviors which warrant the denial or termination of employment. An Annual Affidavit of Compliance with Level 2 Screening Standards is completed annually.</i>	

The program has a policy and procedures in place regarding initial background screenings. Initial background screenings are conducted for all new employees, interns, volunteers, and mentors. Six staff were hired since the last annual compliance review and each had a background screening completed prior to their start date. Additionally, five of the employees hired were direct care staff eligible for a pre-employment assessment tool. Each of the five staff completed the pre-employment assessment tool and received a passing score. There was one volunteer since the last annual compliance review and had a background screening completed prior to their start date. The program also reviews each staff's criminal history report, the Department's Central Communications Center person involvement report, the Staff Verification System, and the Florida Department of Law Enforcement background screening results. The Annual Affidavit of Compliance with Level 2 Screening Standards was completed and submitted to the Department's Background Screening Unit on January 28, 2020, meeting the annual requirement. The teachers are employed by the program provider; therefore, the clearances are provided through the program. There were no new volunteers including mentors and interns who required an initial background screening since the last annual compliance review.

1.02 Five-Year Rescreening	Non-Applicable
<i>Background screening is conducted for all Department employees, contracted provider and grant recipient employees, volunteers, mentors, and interns with access to youth and confidential youth records. Employees and volunteers are rescreened every five years from the initial date of employment. When a current provider staff member transitions into the Clearinghouse, the rescreen/resubmission date starts anew and is calculated by the Clearinghouse.</i>	

The program has a policy and procedures regarding a five-year rescreening based on the initial date of employment. There were no employees eligible for a five-year rescreening.

1.03 Pre-Service/Certification Training	Satisfactory Compliance
<p><i>Contracted non-residential staff are trained in accordance with Florida Administrative Code. Contracted non-residential staff satisfies pre-service/certification requirements specified by Florida Administrative Code within 180 days of hiring.</i></p> <p><i>Contracted non-residential staff who have not completed essential skills training, as defined by Florida Administrative Code, or completed pre-service/certification training do not have any direct contact with youth.</i></p>	

The program has a policy and procedures in place regarding pre-service training requirements for contracted non-residential staff during the initial 180 days of employment. The program submitted in writing, a list of pre-service trainings to the Department's Office of Staff Development and Training including course names, descriptions, objectives, and training hours for all instructor-led training. The training plan was approved on January 1, 2020. During the annual compliance review period, four of the five staff were applicable for pre-service training and staff training records were reviewed from documentation attained in the Department's Learning Management System (SkillPro). Each of the staff were certified within 180 days of hire and completed more than the required 120 hours of pre-service training. All records included documentation of the required trainings including understanding youth, legal, interpersonal/communication skills, supervision, changing offender behavior, mental health and substance abuse, risk and needs assessment, sexual harassment, human diversity, human trafficking, active shooter, the Department's Central Communications Center (CCC) it's all about reporting, information security awareness, trauma informed care, and civil rights. The staff completed training prior to working directly with the youth such as the Protective Action Response (PAR), cardiopulmonary resuscitation (CPR), first aid, professionalism and ethics, suicide prevention, and emergency procedures. All five staff had gender-specific training. Two staff administered the Prevention Assessment Tool (PAT) and completed the required training to administer the PAT. Seven staff interviews indicated they felt they received adequate training.

1.04 In-Service Training	Satisfactory Compliance
<p><i>Contracted non-residential staff completes in-service training in accordance with Florida Administrative Code. Contracted non-residential staff must complete twenty-four hours of annual in-service training, beginning the calendar year after the staff has completed pre-service training.</i></p> <p><i>Supervisor staff shall complete eight hours of training in the areas listed below, as part of the twenty-four hours of annual in-service training.</i></p>	

The program has a policy and procedures in place regarding in-service training requirements. The six applicable staff training records were reviewed for in-service training and found each staff exceeded the required twenty-four hours annual requirement. All reviewed training records found staff received all the mandatory required trainings and all instructors were qualified to deliver the training provided. Two applicable supervisory staff completed the management training required. All in-service training was entered in the Department's Learning Management System (SkillPro). The program submitted the pre-service and in-service training plans to the Department's Office of Staff Development and Training (SDT) on January 1, 2020. Both pre-service and in-service plans were approved by SDT on January 10, 2020. Seven staff interviews indicated they felt they received adequate training.

1.05 Incident Reporting (CCC)**Satisfactory Compliance**

Whenever a reportable incident occurs, the program notifies the Department's Central Communications Center (CCC) within two hours of the incident, or within two hours of becoming aware of the incident.

The program has a policy and procedures for reporting incidents to the Department's Central Communications Center (CCC). The program had two incidents reported to the CCC in the past six months. The program reported a medical incident on September 5, 2019 and a complaint against staff incident on February 26, 2020 in which all were reported within the required time frame. A review of the program's internal incidents and grievances determined there were no additional incidents which should have been reported to the CCC.

1.06 Administration**Satisfactory Compliance**

The program provides a safe and appropriate treatment environment including administrative and operational oversight.

The program has a policy and procedures in place to ensure a safe and appropriate treatment environment. The administration staff includes an executive director, administrative assistant/business manager, one director of education, one lead behavior interventionist, two case managers, and two behavior interventionists. All staff members requiring a bachelor's-level degree had copies of their degrees filed in their staff records. The program utilizes "The Council for Boys and Young Men", an intervention with demonstrated effectiveness. The program is open at least eight hours a day, five days a week, excluding holidays. The program accepts referrals Monday through Friday.

1.07 Provision of an Abuse-Free Environment**Satisfactory Compliance**

Any person who knows, or has reasonable cause to suspect, a youth is abused, abandoned, or neglected by a parent, legal custodian, caregiver, or other person responsible for the youth's welfare, as defined by Florida Statute, or a youth 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.

The program has a policy and procedures in place to ensure an environment in which youth, staff, and others feel safe, secure, and not threatened by any form of abuse or harassment. The program's staff must follow a code of conduct forbidding the staff from using physical abuse, profanity, threats, or intimidation which was signed and a copy placed in the staff personnel records. Eleven reviewed training records supported program staff were trained to report all allegations of child abuse or suspected child abuse to the Florida Abuse Hotline, and any allegations by youth eighteen years of age or older are reported to the Department's Central Communications Center (CCC). Youth are informed at intake they have unimpeded access to self-report allegations of abuse. According to the executive director, if a youth wants to contact the Florida Abuse Hotline or the CCC, the youth should make a request to staff to use the telephone. The staff will dial the number and give the youth the telephone. There were no incidents of abuse allegations against staff or staff reporting abuse on behalf of a youth since the last annual compliance review. All seven interviewed staff indicated they never observed a staff member being physically or verbally aggressive with a youth. None of the seven

interviewed youth felt unsafe while being in the program. All seven youth indicated they attend the program on a regular basis and have never requested to make an abuse call to the Florida Abuse Hotline or witnessed abuse in the program. None of the seven interviewed youth indicated hearing staff use profanity directed at them or other youth.

1.08 Food Services	Satisfactory Compliance
<i>The program shall serve a light meal (i.e. beverage, sandwich, and snack) to each youth each day.</i>	

Food service for the program is provided by the Manatee County school system through the local school the youth attend. The menu is approved through the Manatee County School licensed dietician and displayed in the multipurpose room. The food is served by the manatee county school food service employees to the youth for breakfast and lunch daily according to contract. Seven youth interviews indicated none of the seven youth had a meal withheld as a form of punishment. Seven staff interviews indicated staff do not assist in serving meals to the youth. None of the seven staff are required to hold a SafeServe certificate and none of the seven staff witnessed a meal being withheld from youth as a form of punishment.

1.09 Transportation Services	Satisfactory Compliance
<i>The provider shall provide or arrange for the provision of transportation for program-related purposes.</i>	

The program has a policy and procedures in place for providing transportation services for the youth. Youth are provided transportation to and from the program daily during summer months when Manatee county schools are out. The program has two twelve passenger vans. All staff who transport youth have a valid and current driver's license. Annual license verification is conducted by the administrative assistant monthly. The program does not deny youth services or penalize a youth due to the lack of transportation. A review of the vans indicated all vans are equipped with seat belts, a knife-for-life, window punch, and a first aid kit. Interviews with seven youth revealed youth are required to wear seat belts when the vehicle is in operation. Seven staff interviews confirmed this practice and staff are required to inspect the vehicles prior to use. All seven staff indicated first aid kits, fire extinguisher, and a window punch are available in the vehicle. During the Manatee county school year, youth are transported by the Manatee county school system.

1.10 Fire Prevention and Evacuation Procedures	Satisfactory Compliance
<i>The program shall have a comprehensive safety regimen including fire safety training, fire alarm and automatic detection system, fire protection equipment in strategic locations, monthly fire drills and fire safety log containing a record of annual fire safety inspections. summary of all deficiencies found by fire officials and record of corrections, and the results of periodic fire safety inspections and equipment checks.</i>	

The program has a policy and procedures in place for fire prevention and evacuation. Fire protection equipment is in the classrooms, large group room, and administration office. The fire alarm system is tested monthly and documented in the fire safety log. The fire extinguishers are inspected weekly by program staff. All seven staff training records indicated staff received training on proper operation and use of fire equipment as part of their new employee training plan. The program conducts monthly fire drills and documents the drills in the fire safety log.

The annual fire inspection completed in February 2020 by the local fire marshal for the building housing the program was completed with no corrections being required by the program. The program has an evacuation/egress plan to address routes of evacuation for emergencies. Smoking is prohibited in the facility. The program maintains cell phones for use during the emergencies. Seven interviewed youth stated they received information on fire prevention and evacuation procedures during orientation, in addition the information is in the youth's handbook. The youth also acknowledged participating in monthly fire drills. Seven staff interviews indicated they all participated in a monthly fire drill.

1.11 Cleanliness and Sanitation	Satisfactory Compliance
<i>The program provides a safe and appropriate treatment environment including maintenance and sanitation of the facility.</i>	

The program provides a safe and appropriate treatment environment. The building was found to be clean, neat, and well maintained. No graffiti was observed on the walls, doors, or windows. The furniture in the office, large group room which is also used for dining, and classrooms were in good condition. The program has designated private counseling areas. The program is for males only and has one bathroom room available to the youth. The program has a sanitation and safety inspections binder with weekly inspection documentation. The program conducts weekly sanitation and safety inspections of the facility and perimeter based on a review of weekly documentation maintained by the program. The Manatee County School Board maintains the building which the program is located in.

1.12 Youth Records	Satisfactory Compliance
<i>The program maintains an official youth record, labeled "Confidential," for each youth.</i>	

The program maintains an official youth record for each youth online using Lauris Online secure programming. A review of seven youth records confirmed they were clearly labeled "confidential." The program ensures youth records are secured by issuing staff a Lauris Online password.

Standard 2: Assessment Services

2.01 Eligibility

Satisfactory Compliance

The program shall provide services to boys ages eleven to seventeen who are at risk of delinquency for a period up to fifteen months.

The program has a policy and procedures which establish how they will screen youth to determine if they meet the eligibility requirements. A review of seven youth case management records confirmed the completion of a screening form.

2.02 Orientation

Satisfactory Compliance

The program shall provide program and facility orientation for all youth admitted to the program. The youth's parent(s)/guardian(s) shall be encouraged to attend.

The program has a policy and procedures in place outlining orientation and program rules. Six of the seven reviewed youth records indicated each had an orientation form signed by the youth and parent/guardian. Each record contained a signed form for individual orientation topics related to program rules and requirements. Youth also signed an informational and instructional form related to bullying. All individual orientation forms were signed by the youth, parent/guardian, and staff providing the orientation. The case manager maintained the documentation of the youth's parent/guardian notification of the youth's admission within twenty-four hours. Written notification included a brief overview of the program, information to the parent/guardian about scheduled recreational activities, and explanation of the requirement in which the parent/guardian inform the program of an objection to youth's participation in recreational activities due to a physical or medical problem. Objection must be accompanied by written documentation from a physician. Each youth received a student handbook which addressed all required elements and signed a corresponding receipt form. Seven youth interviews indicated the youth received a handbook when admitted to the program.

2.03 Gender-Specific Programming

Satisfactory Compliance

The program provides gender-specific delinquency intervention and treatment services.

The program has a policy and procedures which define how the program will provide services in the areas of gender-specific life management skills training and how they will address the needs of young men. The primary service offered by the program to address the gender-specific needs of their youth is "The Council for Boys and Young Men" curriculum. This practice with demonstrated effectiveness curriculum is offered to each youth during their time in the program. A review of group documentation found a full cohort for this curriculum was completed between August and October 2019. They began a new cohort of this curriculum on January 31, 2020. The review of training records confirmed the facilitator for this curriculum has the required training. This group is held once a week for ten weeks. The program provides daily recreational time, allowing the youth to go to the gym or outside to play basketball and other activities which allow them to engage in teamwork through competition. The program also teaches the youth how to tie a tie and how to represent themselves when making an effort to enter the job market. The youth are also provided with basic training on how to perform proper male grooming techniques. The program also provides opportunities to receive education on sexually transmitted diseases and other related topics.

2.04 Prevention Assessment Tool (PAT)**Satisfactory Compliance***The Prevention Assessment Tool (PAT) shall be administered to each youth in the program during the initial intake and at completion of the program.*

The program has a policy and procedures which explain how they will administer the Prevention Assessment Tool (PAT) and the time frames in which it will be completed. A review of seven youth case management records confirmed each youth had a PAT completed on the day of their intake to the program. The reviewed case management notes reflected the case manager conducted a motivational interview with each youth and parent/guardian during their admission. A review of all available information as part of the intake process was conducted. Each of these assessments which were completed by a trained staff member, were entered in the Department's Juvenile Justice Information System within one day of completion.

2.05 Individualized Care Plan**Satisfactory Compliance***The program shall develop an Individualized Care Plan for each youth.*

The program has a policy and procedures which explains how they will develop each youth's individualized care plan. The policy indicates the program will utilize the youth's Prevention Assessment Tool and any other information provided to the program, in order to develop the plan for each youth. A review of seven youth case management records confirmed each youth had an individualized care plan completed within thirty days of admission. Each plan was found to include a goal for completion of "The Council for Boys and Young Men," documentation of support and case management services which would be provided to assist with the completion of the goals and the steps which the youth would follow to problem solve and meet each goal. None of the plans included specific information regarding monthly family contacts; however, parent/guardian action steps required them to provide input to the treatment team and the records contained correspondence reflecting the parent/guardian being invited to all treatment team meetings. These were scheduled on a monthly basis. Two of the reviewed youth records did not have any initial needs which would have required any mental health or substance abuse services on the youth's initial plan. Each of these plans included a goal for each youth to participate in the needed services. Interviews were conducted with seven youth and six indicated they participated in the development of their individualized care plan and were aware of the goals they were working on. The remaining youth was not sure.

2.06 Transition Plan**Satisfactory Compliance***Each youth must have an individual transition plan and transition services for a period of six months for all youth enrolled in the program a minimum of 30 days regardless of the status of the transition.*

The program has a policy and procedures for the development of an Individual Transition Plan for each youth. This is completed as a part of the Individual Care Plan. Each of the reviewed seven youth records indicated the plans were completed within thirty days of admission. Each was found to include educational goals, in addition to a case management/aftercare plan for each youth. The reviewed documentation reflected all treatment team members participated in the development of transitional planning for each youth. The reviewed records confirmed this information is modified whenever changes are needed for individual youth.

2.07 Referrals for Mental Health and Substance Abuse Assessment and Treatment Services

Satisfactory Compliance

If mental health and/or substance abuse needs are identified by the PAT or other information obtained, staff shall ensure all referrals for appropriate services are made. Staff shall ensure all referrals for services are made within seventy-two hours of identification of the need for services.

If referred for services, staff follows up with the service provider within thirty days to ensure the youth and parent/guardian have taken the appropriate steps to initiate services. Staff receives, reviews, and documents written and verbal progress reports from the provider. Staff shall act upon negative reports, such as missed appointments or lack of participation, and document the response.

The program has a policy and procedures which sets specific time frames and actions which the case manager must complete when mental health or substance abuse needs are identified for program youth. This plan requires the applicable referrals to be completed and documented within seventy-two hours of the identification of the need. The program's case manager is then required to contact the service provider within thirty days of the referral to ensure the youth and parent/guardian have participated in the admission process and are receiving services. A review of seven youth case management records found one of the youth was identified with a mental health or substance abuse need which would have required the completion of a service referral. The program provided two additional youth who required a service referral based on their identified needs. Each record contained documentation reflecting a referral was made to a service provider the same day the need was identified and the information was shared with each youth's parent/guardian. The program has a close relationship with a community provider, Centerstone. This provider comes to the school to address any service referrals and will meet with each youth on a weekly basis if the family agrees to work with them. Each of the youth worked with the provider and documentation indicated progress for each youth was communicated with the program case managers regarding each youth's weekly participation while receiving services. The program also had an additional record for a youth who had a need for possible counseling identified the week prior to the annual compliance review. The reviewed documentation revealed a referral was made to the service provider.

2.08 Individualized Care Plan Re-Evaluation

Satisfactory Compliance

The individualized care plan shall be re-evaluated throughout the youth's enrollment period.

The program has a policy and procedures which explain how they will complete re-evaluations for each youth's Individual Care Plan (ICP) every six months while a youth is enrolled in the program. One of the youth in the sample had been in the program long enough to require the re-evaluation of a youth plan. The program was able to provide two additional applicable records for review. There is a process in place for on-going revisions to the plan as goals are accomplished and other needs are addressed. Each of the youth plans reflected completion of goals being removed and new needs being addressed when they were applicable based on each youth's positive and/or negative progress. There was documentation to reflect each youth and the parent/guardian taking part in the re-evaluation of each ICP. Reviewed documentation also confirmed monthly treatment review meetings are held for each youth to measure their progress in the program. Goals are not just modified or adjusted at the six-month evaluation. They are adjusted on an individual basis at any monthly treatment team meeting.

2.09 Educational Access**Satisfactory Compliance**

The facility shall integrate educational instruction (personal accountability and behavioral, as well as academic instruction) into their daily schedule in such a way ensuring the integrity of required instructional time.

The program has a policy and procedures which addresses integration of educational instruction into the daily schedule. A review of the program’s schedule found the program offers five fifty-five-minute periods of instruction daily and a forty-five minute period of physical education. They currently have a director of education and four full-time staff teachers. The youth are divided into four groups of students which rotate to different classes as they progress through their daily block schedule. One of the six class periods is dedicated to teaching career education. The program also have a career coordinator who assists the business teacher in this area. The program is currently using the Edmentum online education program for the youth during one of the class periods. This program allows the youth to work at their own pace to work on credit recovery. The teachers also provide lessons and assist youth as they progress in the program. The program was able to provide a yearly schedule which reflected education instruction is provided for at least 230 days a year, with an additional twenty days being set aside for educational planning. An interview with the director of education and a review of the program logbook confirmed the program is following their daily schedule and there are minimal interruptions to class time.

2.10 Vocational and Career Training**Satisfactory Compliance**

The program shall provide vocational and career training to support continuous progression towards job placement.

The program has a policy and procedures requiring the provision of pro-social development activities for the youth. Each youth has an Individualized Care Plan (ICP) which address the youth vocational and career needs. The program has a career coordinator position who works in concert with the business teacher to start youth in looking at career readiness according to the youth’s ICP. Reviewed documentation revealed youth were provided the opportunity to earn SafeServ certification while in the program. Other topics relating to career exploration were also done with the youth. While in the program’s business class, students work on résumé and look at career paths they may work towards in the future. The business teacher and career coordinator put together field trips with a local bank to learn skills related to dealing with money matters. Trips were also done in Microsoft and Apple to expose the youth to technological opportunities as a career interest. The director of education is working to develop future opportunities with Microsoft to expose the youth to further opportunities in this area.

2.11 Youth Development**Satisfactory Compliance**

The program provides development activities building positive character, instilling positive values, or enhancing educational or community engagement experiences. Activities may include outings to local attractions, the arts, historical sites, and other activities promoting healthy lifestyles.

A review of seven youth records, staff interviews, and youth interviews confirmed the program provides positive activities at the program and off-site. The program facilitates community service projects for the youth to participate in. The program has guest speakers from different areas to encourage the youth. Each week, youth with a high rank who earned a gold card for

the week can attend outings to restaurants and other activities in the community. Youth earn a SafeServ Food Handlers Certificate, learn how to write a resumé, and complete job applications. Seven youth interviews indicated they participated in outings to the movies, sporting events, museums, restaurants, and work projects.

2.12 Release	Satisfactory Compliance
<i>The provider must administer the PAT prior to the youth's release or discharge from the program.</i>	

The program has a policy and procedures in place indicating the program shall complete a Prevention Assessment Tool (PAT) prior to the youth's release from the program. A review of three youth closed case management records were reviewed to determine if each youth had a PAT assessment completed within the last fourteen days in the program. Each of the three youth had a PAT assessment completed on the day each was released from the program. Each of the assessments were entered into the Department's Juvenile Justice Information System (JJIS) on the same day as completion. Each of the youth was also released in JJIS within twenty-four hours of their discharge.