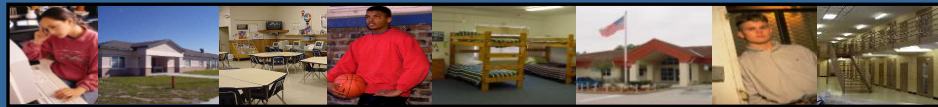


STATE OF FLORIDA
DEPARTMENT OF JUVENILE JUSTICE

**BUREAU OF MONITORING AND
QUALITY IMPROVEMENT
PROGRAM REPORT FOR**

AMikids Boy's Prevention-Pinellas Center for Personal Growth
AMikids, Inc
(Contract Provider)
6500 102nd Avenue North
Pinellas Park, Florida 33782

Review Date(s): May 21-22, 2019



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 that 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 that 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 that 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:

Felicia S. Goldstein, Office of Program Accountability, Lead Reviewer ([Standard 1, Staff and Youth Interviews)

Stephanie Lobzun, Office of Program Accountability, Regional Monitor (Standard 1 and 2)

Kara Brown, Circuit 12, Senior Juvenile Probation Officer (Standard 2)

Joey Nice, DJJ Office of Education, West Region Education Coordinator (Indicator 2.09 and 2.10)

Program Name: AMIkids Boy's Prevention-Pinellas
 Provider Name: AMIkids Inc.
 Location: Pinellas County / Circuit 6
 Review Date(s): May 21-22, 2019

MQI Program Code: 1353
 Contract Number: 10519
 Number of Beds: 44
 Lead Reviewer Code: 146

Methodology

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.

Persons Interviewed

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Program Director
<input type="checkbox"/> DJJ Monitor
<input type="checkbox"/> DHA or designee
<input type="checkbox"/> DMHCA or designee
<input checked="" type="checkbox"/> 2 # Case Managers | <input type="checkbox"/> 0 # Clinical Staff
<input type="checkbox"/> 0 # Food Service Personnel
<input type="checkbox"/> 0 # Healthcare Staff
<input type="checkbox"/> 0 # Maintenance Personnel
<input type="checkbox"/> 0 # Program Supervisors | <input checked="" type="checkbox"/> 7 # Staff
<input checked="" type="checkbox"/> 7 # Youth
<input checked="" type="checkbox"/> 1 # Other (listed by title): Treatment Director |
|---|---|--|

Documents Reviewed

- | | | |
|--|---|---|
| <input type="checkbox"/> Accreditation Reports
<input checked="" type="checkbox"/> Affidavit of Good Moral Character
<input checked="" type="checkbox"/> CCC Reports
<input type="checkbox"/> Confinement Reports
<input type="checkbox"/> Continuity of Operation Plan
<input checked="" type="checkbox"/> Contract Monitoring Reports
<input checked="" type="checkbox"/> Contract Scope of Services
<input checked="" type="checkbox"/> Egress Plans
<input type="checkbox"/> Escape Notification/Logs
<input type="checkbox"/> Exposure Control Plan
<input checked="" type="checkbox"/> Fire Drill Log
<input type="checkbox"/> Fire Inspection Report | <input type="checkbox"/> Fire Prevention Plan
<input type="checkbox"/> Grievance Process/Records
<input type="checkbox"/> Key Control Log
<input checked="" type="checkbox"/> Logbooks
<input checked="" type="checkbox"/> Medical and Mental Health Alerts
<input type="checkbox"/> PAR Reports
<input type="checkbox"/> Precautionary Observation Logs
<input checked="" type="checkbox"/> Program Schedules
<input type="checkbox"/> Sick Call Logs
<input type="checkbox"/> Supplemental Contracts
<input checked="" type="checkbox"/> Table of Organization
<input type="checkbox"/> Telephone Logs | <input checked="" type="checkbox"/> Vehicle Inspection Reports
<input type="checkbox"/> Visitation Logs
<input checked="" type="checkbox"/> Youth Handbook
<input type="checkbox"/> 0 # Health Records
<input type="checkbox"/> 0 # MH/SA Records
<input checked="" type="checkbox"/> 12 # Personnel Records
<input checked="" type="checkbox"/> 6 # Training Records/CORE
<input checked="" type="checkbox"/> 3 # Youth Records (Closed)
<input checked="" type="checkbox"/> 7 # Youth Records (Open)
<input type="checkbox"/> 0 # Other: 0 |
|--|---|---|

Observations During Review

- | | | |
|--|--|---|
| <input type="checkbox"/> Admissions
<input type="checkbox"/> Confinement
<input checked="" type="checkbox"/> Facility and Grounds
<input checked="" type="checkbox"/> First Aid Kit(s)
<input checked="" type="checkbox"/> Group
<input checked="" type="checkbox"/> Meals
<input type="checkbox"/> Medical Clinic
<input type="checkbox"/> Medication Administration | <input checked="" type="checkbox"/> Posting of Abuse Hotline
<input checked="" type="checkbox"/> Program Activities
<input type="checkbox"/> Recreation
<input type="checkbox"/> Searches
<input type="checkbox"/> Security Video Tapes
<input type="checkbox"/> Sick Call
<input checked="" type="checkbox"/> Social Skill Modeling by Staff
<input checked="" type="checkbox"/> Staff Interactions with Youth | <input checked="" type="checkbox"/> Staff Supervision of Youth
<input type="checkbox"/> Tool Inventory and Storage
<input type="checkbox"/> Toxic Item Inventory and Storage
<input type="checkbox"/> Transition/Exit Conferences
<input type="checkbox"/> Treatment Team Meetings
<input type="checkbox"/> Use of Mechanical Restraints
<input type="checkbox"/> Youth Movement and Counts |
|--|--|---|

Comments

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

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	Satisfactory
1.03	Pre-Service/Certification Requirements	Satisfactory
1.04	In-Service Training	Satisfactory
1.05	* Incident Reporting (CCC)	Satisfactory
1.06	Administration	Satisfactory
1.07	*Provision of an Abuse-Free Environment	Satisfactory
1.08	Food Services	Satisfactory
1.09	Transportation 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	Non-Applicable
2.11	Release	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).

Program Overview

AMIkids Boy's Prevention - Pinellas is operated by AMIkids, Inc. through a contract with the Department. This gender-specific prevention program provides delinquency prevention services to male youth between the ages of eleven and seventeen. The program is comprised of an executive director, business manager, two case managers, two behavior interventionists and two drivers. The program operates on the Pinellas 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 (which are focused on meeting identified academic/employment readiness, behavioral, and social needs) specifically designed to attenuate 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 zero staff vacancies.

Strengths and Innovative Approaches

- The program has a flag football team which competes in an all-boys flag football league. The team encourages male bonding and appropriate sportsmanship. The program's team won the regional championship and was recognized nationally. The team will be competing in Texas for a national championship in the summer of 2019.
- The program partners with AmeriCorps to provide interns from the community who mentor youth, help facilitate groups, and provide support.
- The program partners with Fresh Start (a local mentoring group) to provide mentors who volunteer weekly to work with youth.
- Career exploration, presentation, and educational and business tours are provided to youth through an Apprenticeship Job Placement (AJP) grant.
- Youth can participate in experiential challenge trips which provide life-changing learning experiences such as rappelling, whitewater rafting, and SCUBA diving. Six youth participated in a learn-to-dive experience culminating in a SCUBA diving trip to the Florida Keys, July 16-21, 2018.
- Eight youth participated in the annual AMIkids Inc. Winter Challenge event, which was held January 15-18, 2019 in Hudson, Florida. The program selects different groups of youth to participate each year.
- Six to eight youth are chosen each month to participate in the floating classroom, in cooperation with Mote Marine Laboratory at the AMIkids Boat Program. Youth are selected on a rotational basis so as many youth as possible get to participate.
- Six to eight youth each month are selected to participate in community service at the St. Vincent de Paul soup kitchen.
- Four youth participated in the AMIkids Legislative day trip to Tallahassee March 26-27, 2019. During this trip youth met with their elected representatives and learned about the legislative process, in addition to receiving a tour of Florida State and Florida Agricultural & Mechanical Universities.
- The program hosted a 'Bridging the Gap' event attended by the Pinellas County Sheriff's Office which deputies met with all youth to communicate and share their perspectives about interactions with law enforcement.
- The program hosted a Path to Success Career Day for the youth in cooperation with Pinellas County Schools and volunteers from Johnson Controls. Youth dressed for interviews and participated in a round-robin mock interview process. This effort included class work on career exploration, development of resumes, and practicing interview skills in the weeks leading up to the event.

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. The background screening process is completed prior to hiring an employee or utilizing the services of a volunteer, mentor, or intern. An Annual Affidavit of Compliance with Level 2 Screening Standards is completed annually.</i>	

The program complies with the Department's Level 2 Screening Standards as required in s.435.05, F.S. and policy 1800. Since the last annual compliance review, two employees, five volunteers, and three interns were hired. A background screening was completed for all ten prior to their hire date. The program utilizes the Diana Screen as their pre-assessment tool. This tool was completed on the two new staff who have direct care with youth. The program submitted their Annual Affidavit of Compliance with Level 2 Screening to the Department's Background Screening Unit (BSU) on January 10, 2019. The Pinellas County school board submitted their Annual Affidavit of Compliance with Level 2 Screening on January 28, 2019.

1.02 Five-Year Rescreening	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. Employees and volunteers are rescreened every five years from the initial date of employment.</i>	

Since the last annual compliance review, the program had one staff and no volunteers/interns eligible for a five-year re-screening. A review of documentation revealed a re-screening was completed six months prior to the staff member's five-year anniversary date.

1.03 Pre-Service/Certification Training	Satisfactory Compliance
<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>	
<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>	

The program has a pre-service training plan which was submitted to the Department's Office of Staff Development and Training (SD&T) on January 2, 2019 and signed by SD&T on February 19, 2019. The program hired two new staff since the last annual compliance review. A review of staff training records revealed both staff are still within their first 180 days of employment and have exceeded the 120 hour training requirement. Both staff received training in all required training topics. Prior to contact with youth, the staff completed training in Protective Action Response, ethics, and suicide prevention. Both staff received cardiopulmonary resuscitation and first aid training certification. One of the two staff are required to have training in motivational interviewing and the Department's Prevention Assessment Tool. The staff member completed the training within the first two months of employment. Neither staff required food

safety training or food handler certification. All training was documented in the Department's Learning Management System (SkillPro).

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 an in-service training plan which was submitted to the Department's Office of Staff Development and Training (SD&T) on January 2, 2019 and signed by SD&T on February 19, 2019. The program has an in-service training calendar which list when each training topic is scheduled for the calendar year. The program had four staff eligible for in-service training in 2018. A review of all four staff training records verified each staff received more than fifty-nine hours of training. All staff completed the required training in accordance with Florida Administrative Code and the program's contract with the Department. The executive director (ED) was the only staff person who was applicable for supervisory training. The ED completed over twenty hours of training in the management, leadership, personal accountability, employee relations, communication skills and fiscal topics in 2018. All in-service training is documented in the Department's Learning Management System (SkillPro). Seven staff were interviewed and all reported they felt adequately trained for their jobs.

1.05 Incident Reporting (CCC)	Satisfactory Compliance
<p><i>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.</i></p>	

The program has a policy and procedures for reporting incidents to the Department's Central Communications Center (CCC). The program had one CCC incident since the last annual compliance review. The program reported a youth injury. The report was called into the CCC within two hours of the caller gaining knowledge of the incident. The call was documented in the program's logbook. A review of the program's internal incidents determined there were no additional incidents which should have been reported to the CCC.

1.06 Administration	Satisfactory Compliance
<p><i>The program provides a safe and appropriate treatment environment including administrative and operational oversight.</i></p>	

The program staffing includes an executive director (ED), business manager/administrative assistant, two behavior interventionists (BI), two case managers (CM), and two drivers. Both drivers had either a high school diploma or a general education development (GED) certificate. The ED, both CMs, and one BI had a bachelor's-level degree or higher. One BI did not have a college degree as required by contract but the staff had a high school diploma. The BI had

another position at the program and moved into the BI position in February 2019. This exception is not a systemic issue nor does it impact the delivery of services. The program indicated this was an oversight and they will decide how to rectify it. The program utilizes "The Council for Boys and Young Men" curriculum which is an intervention with demonstrated effectiveness. Four staff are trained to facilitate the groups in which one is a male CM; however, currently three staff are actively facilitating groups. The program is open at least eight hours a day, five days a week, excluding holidays. The youth's handbook lists the BI's telephone number as the person to contact twenty-four hours a day, seven day a week. The program accepts referrals Monday through Friday and provides services during non-traditional hours.

1.07 Provision of an Abuse-Free Environment	Satisfactory Compliance
<p><i>Any person who knows, or has reasonable cause to suspect, 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 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.</i></p>	

The program provided an operating policy and procedure for an abuse-free environment which was updated on June 27, 2018. The policy indicates it is part of the facility operating procedures for the company's day treatment programs; however, all program staff are given this procedure and trained when completing the annual training in the AMI E-University Online training. The procedure indicates AMIkids provides an abuse-free environment and all staff are required to adhere to a code of conduct which forbids physical abuse, profanity, threats, or intimidation. The procedure further indicates the program will ensure all allegations of child abuse or suspected child abuse are immediately reported to the Florida Abuse Hotline. The program had zero reported abuse allegations/incidents since the last annual compliance review.

The program's provider has developed a sixty-nine page Team Member Reference Guide, which is provided to each new employee at the time of hire. The guide was last updated in January 2018. The guide includes a standards of conduct section which includes thirty-eight misconduct items for which discipline will be given. This list includes staff using threats, intimidation, or violence towards youth. Additionally, the list indicates the program has a zero tolerance policy on the abuse of youth emotional, physical, or sexual and any youth or staff shall have permission to contact the Florida Abuse Hotline at any time abuse is alleged or suspected. All staff are to report acts of abuse or suspected abuse as outlined by State requirements. Each new staff signs a document indicating they read and understand the behavioral expectations, the consequences of failing to adhere to the expectations, and all other information in the Team Member Reference Guide. Two staff were hired since the last annual compliance review. The personnel records of both staff contained the signed acknowledgement. During the facility tour, there were several postings of the Florida Abuse Hotline telephone number noted within the common areas of the facility. A review of seven youth records revealed each youth received a youth student handbook upon their admission to the program. A review of the youth student handbook reflected it contained the Florida Abuse Hotline number in bold print for a youth's easy reference. Staff training in child abuse recognition, reporting, and prevention is a requirement in the pre-service curriculum. The program demonstrated compliance with this requirement by a review of two pre-service training records which documented this training was completed soon after each staff's date of hire.

According to the seven staff interviews, staff are aware youth can request an abuse call at any time. Additionally, staff reported they notify a supervisor and the executive director (ED) when a

call is being made and an available staff member will escort the youth to a telephone. Two staff are drivers and they were unsure if they should call in an abuse allegation if the youth refuse to call the Florida Abuse Hotline. The ED indicated the abuse reporting procedures will be discussed at the next all staff meeting. None of the interviewed staff reported ever witnessing another program staff being verbally or physically aggressive towards a youth or witnessed a staff refuse a youth's request to call the Florida Abuse Hotline. Seven youth were interviewed and all seven youth stated they have not been denied an abuse call nor have they seen other youth being denied a call. Each of the interviewed youth indicated they felt safe in the program and feel cared about by staff. None of the youth reported ever feeling threatened by staff and never requested to call the Florida Abuse Hotline.

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>	

The program has a policy and procedures in place requiring the provision of a safe and appropriate environment, which includes food services. The program provides breakfast and lunch each day to the youth. All meals are provided by the Pinellas County School Board and are transported by the school board staff from Pinellas High School to the program. In the event a youth requires a special diet because of medical issues, dental issues, or religious beliefs; the program makes the appropriate food substitutions to accommodate the youth. The program has a warming tower where all meals are maintained until they are served to the youth. The program schedule indicates breakfast is served from 8:00 a.m. to 8:30 a.m. and lunch is served daily from 12:34 p.m. to 1:04 p.m. An interview with the program's lead teacher indicated lunch is served on time and in accordance with the program's schedule. The program has two staff who are ServSafe trained and provide meals to the youth. The program maintains an alert system to notify staff of any youth food allergies, restrictions, and/or special diets. During the annual compliance review, the alert system was reviewed and the program had one youth on the list with a food allergy. The alerts were posted in the program's kitchenette area and in the program's staff lunch area. A copy of the school menu was posted in the program's kitchenette area. The program's kitchenette area was observed to be organized, neat, and clean. The youth eat all meals in the program's multipurpose room which has tables and chairs for the youth to eat on. The multipurpose room was found to be neat and clean. The program received an annual health inspection on January 23, 2019 from the Florida Department of Health County Health Department. There were no violations observed at the time of the inspection.

Seven youth were interviewed during the annual review and all seven youth indicated meals are never taken away from a youth as a disciplinary measure. Seven staff were interviewed and four staff indicated they assist with meal delivery to the youth. The remaining three staff indicated they do not assist with meal delivery. All seven staff indicated during their interview they never withhold food from a youth as a consequence for negative behaviors. Two of the interviewed staff indicated they are certified in ServSafe.

1.09 Transportation Services**Satisfactory Compliance**

The provider shall provide or arrange for the provision of transportation for program-related purposes.

The program has a policy and procedures in place outlining their process for transporting youth to and from the program. The policy indicates the program will provide daily transportation to and from the program or shall arrange for such transportation. The policy further indicates all facility vehicles which transport youth shall be kept in safe and sound condition and have current automobile insurance and registration. The policy also states all facility staff who transport youth shall have a current and valid driver's license.

The program has six vehicles: however, only five were being used to transport youth. The sixth vehicle is currently out of service. The program advised they are planning on selling the vehicle. All six vehicles had current automobile insurance and registration. All six vehicles had an annual vehicle inspection completed within the last year. During the annual compliance review, five vehicles were on-site and able to be observed. All five vehicles appeared to be in safe and sound condition. Three vehicles had seat cushions which were ripped with padding coming out of some of the seats. The program has a first aid kit for each vehicle. The kits are maintained in the program's administrative area to ensure the Florida heat does not compromise the integrity of the materials. Prior to youth transportation, the driver retrieves a first aid kit from the administrative area to take on the transport. The program has eight staff who are eligible to transport youth. All eight staff have a current and valid Florida driver's license. The program uses a motor vehicle report provider named SambaSafety which is constantly running a check on all eight staff's driver's licenses, to ensure they are current and valid. If there are any violations or an individual's license became invalid, the provider notifies the program immediately by email of the issue.

Seven youth were interviewed about the program transportation. Six of the youth indicated the program provides youth with transportation to and from the program. One youth is transported by their parent/guardian each day. All seven youth also indicated they are required to wear a seatbelt when they are being transported by program staff. Seven staff were interviewed and all seven staff indicated they are authorized drivers for the program. All staff further indicated they wear seatbelts when transporting youth. All interviewed staff indicated they inspect the vehicle prior to transport and each vehicle contains a fire extinguisher and first aid kit.

1.10 Fire Prevention and Evacuation Procedures**Satisfactory Compliance**

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.

The program has a comprehensive first safety regimen which includes fire safety training, a fire alarm and automatic detection system, fire protection equipment in strategic locations, and monthly fire drills. The program maintains a fire safety log containing a record of annual fire safety inspections, a summary of all deficiencies found by fire officials, a record of corrections, and the results of periodic fire safety inspections and equipment.

The program maintains a fire safety log binder which includes the monthly fire drills, quarterly fire extinguisher checks, the annual fire inspection, and the annual inspection of the fire sprinkler system. The program documentation supported the annual fire inspection occurred on February 11, 2019. There were no violations noted. The documentation further supported the program had their fire sprinkler system test and maintenance on January 7, 2019. The program documentation also indicated the fire extinguishers were inspected and recharged on February 27, 2019. The program conducts weekly inspections of all fire extinguishers and ensures they are intact, tagged, and charged. The weekly inspections are documented during the weekly facility sanitation and maintenance review. The program's facility sanitation and maintenance binder contained weekly inspection logs for the last six months indicated all fire extinguishers were checked weekly. The program also provided the review team with documentation to support they were conducting the required monthly fire alarm tests. During the tour of the program, egress plans and fire extinguishers were observed throughout the facility. The program provided the review team with documentation to support they conducted unannounced fire drills monthly for the last six months. The fire drill documentation included the date of the drill, drill leader, number of staff on-site, number of youth on-site, drill plan, drill results, and a narrative of what transpired during the drill. All drills had a manager's critique, signed by the drill leader and were all reviewed by program management. A review of two pre-service and four in-service staff training records revealed all staff received training in the proper use and operation of fire equipment.

Seven interviewed youth indicated they were advised of what to do in the event of a fire and participated in fire drills. Seven interviewed staff indicated they have participated in fire drills in the last six months.

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 has a maintenance and housekeeping plan which was updated on January 16, 2019. The building was clean, neat, and well maintained. There were no safety issues noted nor any graffiti observed. The furniture was in good condition. A weekly facility sanitation and maintenance inspection is completed weekly and documented on a checklist. An inspection checklist was completed once a week for the last six months. The building have one bathroom for males and one bathroom for females. Each bathroom has two toilets and two sinks.

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

Seven youth records were reviewed. All seven records included the required youth information and were marked confidential. All records were secured in a locked file cabinet in the case manager's office. Observations validated each file cabinet was marked confidential and locked when not in use.

Standard 2: Assessment Services

2.01 Eligibility	Satisfactory Compliance
<i>The program shall provide services to boys ages eleven to seventeen who are at risk of delinquency for a period up to fifteen months.</i>	

The program has a policy and procedures in place to determine the eligibility of youth to be admitted into the program. Youth must be between the ages of eleven and seventeen, and must exhibit three of the following characteristics of family instability and conflict, school instability or failure, health and mental health, attitudes/behaviors, or victimization. A referral screening form is completed on each youth to determine their eligibility. A review of seven youth case management records revealed all seven youth met the eligibility requirements to be admitted. All seven youth were between the ages of eleven and seventeen and all records contained documentation showing all youth exhibited at least three of the required characteristics.

2.02 Orientation	Satisfactory Compliance
<i>The program shall provide Program and Facility orientation for all youth admitted to the facility. The youth's parent(s)/guardian(s) shall be encouraged to attend.</i>	

A review of seven youth case management records revealed all seven youth and their parent/guardian were provided with an orientation by the case manager or program staff. Staff explained the process and reviewed the policies, rules, and expectations during the admission process. All seven records noted the youth was provided with an orientation handbook written in language which was age appropriate and understandable to the youth. The youth handbook contained the program goals and available services, review of the case planning process, telephone guidelines, youth rights and grievances, Florida Abuse Hotline telephone number, Advocacy Center for Persons with Disabilities telephone number, and rules governing youth conduct and consequences for major rule violations. The program's handbook also included the search policy, a facility organization chart, a summary of expectations, rules, and the behavior management system, a daily activity schedule governing day-to-day operations, a summary of emergency medical and mental health services, emergency safety, and the evacuation procedures for the facility, a list of contraband items and materials and the consequences for introducing contraband into the facility, a review of the performance planning process, and an explanation of the average length of stay to successfully complete the program. The orientation also included introduction to facility staff and a tour of the facility grounds, a review of expectations, rules, and the behavior management system, a review of the daily activity schedule governing day-to-day operations, a review of emergency medical and mental health services, emergency safety, and the evacuation procedures for the facility, a list of contraband items and materials, and the consequences for introducing contraband into the facility, a review of the performance planning process, the average anticipated length of stay to successfully complete the program, and the facility dress code, which shall prohibit pictures, logos, emblems, and writing depicting illegal activity, violence, profanity, gang logos, or nudity. All seven youth case management records contained a form signed by the youth and their parent/guardian acknowledging they received a copy of the handbook. The youth and parent/guardian each acknowledged receipt of an orientation containing the above listed items. All seven youth case management records included a Facility Entry Health Screening Form and an Authority for Evaluation and Treatment. Seven youth were interviewed and all seven youth indicated they received a copy of the handbook when they were admitted into 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 in place outlining the services provided to the youth. The policy indicates the program will provide gender-specific life management skills instruction to the youth. The policy further states gender-specific programming shall address the needs of adolescent boys, address trauma, and foster positive gender identity development. The policy also indicates the program will provide gender-specific programming through the program's behavior management system, community activities, as well as through "The Council for Boys and Young Men" curriculum.

A review of the program schedule documented "The Council for Boys and Young Men" group is provided every Monday, Tuesday, Wednesday and Thursday from 1:15 p.m. to 2:45 p.m. A review of the program's group sign-in sheets revealed the program continuously facilitated the groups for the last six months. A review of seven youth case management records sign-in sheets confirmed six youth were currently participating or participated in at least one or more groups. The program uses the facilitator manual for "The Council for Boys and Young Men" which was published in 2012. The program has four staff trained to facilitate the groups; however, currently three staff are facilitating the groups.

An interview with the executive director (ED) confirmed the program is using the council groups as their main gender-specific curriculum. The ED further indicated the program instructs the youth on how to tie a dress tie, as well as other gender related hygiene issues for youth. The ED indicated the program invited guest speakers to discuss male youth issues such as dating, cyber/internet safety, sexting, and the dangers of on-line predators. The program has taken the youth to a group by the name of Legacy 56, which is a group of men who were born in 1956 who discuss literacy issues in young men and male behavioral issues with the youth. The group's focus is to discuss the pipeline from schools to prison for male youth. The ED also indicated the program has a flag football team which is enrolled in an all-boys flag football league. The team encourages male bonding and appropriate sportsmanship. The program's team won the regional championship and was recognized nationally and will be competing in Texas for a national championship in the summer of 2019.

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.*

A review of seven youth case management records indicated program staff completed the Prevention Assessment Tool (PAT) on each youth. This was completed using the interview with the youth, staff observations, and collateral sources having knowledge of the youth's behavior and background. All seven records indicated the PAT was completed during the youth's initial intake to the program and within seven calendar days of the youth's admission to the program. The PAT was also to be conducted upon the youth's completion of the program. Each PAT was documented and entered into the Department's Juvenile Justice Information System (JJIS) within twenty-four hours of completion.

2.05 Individualized Care Plan	Satisfactory Compliance
<p><i>Within 30 calendar days of admission, Provider shall develop an individualized care plan for each youth. The care plan shall include the following:</i></p> <ul style="list-style-type: none"> • <i>Counseling and case management services</i> • <i>Monthly family contacts</i> • <i>Goal setting and problem solving to attain goals</i> • <i>Individual, group and/or family crisis counseling in accordance with needs. Mental Health services or substance abuse treatment may be provided through referrals to appropriate community providers.</i> • <i>Psycho-educational groups to increase protective factors and mitigate risk factors in accordance with needs.</i> <p><i>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.</i></p>	

Seven reviewed youth case management records indicated the provider developed an individualized care plan (ICP) for the youth within thirty days of the youth’s admission. All seven plans provided input from all members of the care review team and were signed by the members of the care review team. Each reviewed ICP included gender specific life management skills which specified “The Council for Boys and Young Men,” support services and case management services, and goal setting and problem solving to attain goals. Two plans included mental health services through a referral to appropriate community providers. Referrals were not applicable in the remaining five records. None of the plans included psycho-educational groups as the program does not offer psycho-educational groups. Four of the ICPs did not include monthly family contacts; however, these contacts were added to two of the four plans during monthly reviews. One plan had monthly family contacts added on a monthly review; however, the following month the contacts were not included on the youth’s ICP or ICP review. An interview with seven youth indicated each youth participated in the development of their ICP.

2.06 Transition Plan	Satisfactory Compliance
<p><i>Each youth must have a 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.</i></p>	

A review of seven youth case management records indicated each youth had a transition plan which was developed within thirty days of their admission to the program. All seven transition plans were developed on the day of the youth’s admission. There was documentation to support each transition plan indicated was reviewed every 180 days. The transition plans were finalized once the youth was thirty to sixty days from completing the program. Each youth’s transition plan included goals of obeying the law, refraining from illegal activity, and enrolling in their district assigned school upon completion of the program. All seven plans included input from and were signed by all members of the youth’s care review team.

2.07 Referrals for Mental Health and Substance Abuse Assessment and Treatment Services	Satisfactory Compliance
<p><i>Staff shall ensure all referrals for services are made within seventy-two hours of identification of the need for services.</i></p> <p><i>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.</i></p>	

Two youth case management records containing referrals for mental health and substance abuse assessment and treatment services were reviewed. The program reported there were only two youth with referrals. Both youth case management records included documentation reflecting the program referred the youth and the youth's parent/guardian to the appropriate mental health services based upon the youth's Prevention Assessment Tool (PAT) needs and provided support and follow-up necessary to ensure the completion of the goals. The referral for one youth was provided to the youth and parent/guardian the same day the need was identified which is within the required time frame. The referral for the second youth was provided to the family five calendar days after the need was identified; however, it was within seventy-two business hours. The program followed up with the parent/guardian of both youth within thirty days to follow up on the status of the referral. The program did not contact either provider within thirty calendar days of the referral to ensure the youth and the youth's parent/guardian participated in the admission process and were receiving services; however, documentation revealed the youth's parent/guardian informed the case manager an appointment was not made. Since neither youth started services, there were no progress reports for the program to receive and no compliance issues were communicated by the service providers. Both youth case management records reflected documentation of the referrals for service, as well as follow-up with the youth and parent/guardian.

2.08 Individualized Care Plan Re-Evaluation	Satisfactory Compliance
<p><i>The individualized care plan shall be re-evaluated, at a minimum, every six (6) months throughout the youth's enrollment period.</i></p>	

Four applicable youth case management records were reviewed and all four records included an individual care plan (ICP) which was re-evaluated every six months. The program conducted monthly reviews of the youth's ICP at monthly treatment review meetings. An in-depth re-evaluation was completed at six months. All four ICP's addressed newly identified needs and the youth's progress was reflected for all goals. All four youth records contained documentation to support a discussion regarding the new ICP took place with the program and the youth. There is a process in place for on-going revisions to the plan as goals are accomplished and other needs are addressed. Monthly treatment review meetings are held.

2.09 Educational Access	Satisfactory Compliance
<i>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.</i>	

The program integrates educational instruction into the daily schedule for each youth. As verified with the Pinellas School District calendar and the program's daily schedule, the program operates on a year-round basis. Youth participate in educational programs for 230 days and 1,175 hours, which exceeds the prescribed hours of 1,150. Career training and post-secondary skill development are supported by the academic courses. Youth receive course credit for completion of academic courses approved through Pinellas County Schools. An interview with the lead teacher verified compliance for this indicator. The lead educator reports an increase in student achievement and student attendance, due in part to monthly recognition ceremonies and school district supported child study teams which promote more family engagement in problem solving attendance issues.

2.10 Vocational and Career Training	Non-Applicable
<i>The program shall provide vocational and career training to support continuous progression towards job placement.</i>	

The provider's contract does not require vocational and career training; therefore, this indicator rates as non-applicable.

2.11 Youth Development	Satisfactory Compliance
<i>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.</i>	

The program has a policy and procedures in place indicating they will provide the youth with career exploration, career planning, and development of school-to-work employability skills. The policy also indicates the program will provide opportunities for the youth to participate in community and service activities, youth development activities which build positive character, instill positive values, and enhance educational or community engagement experiences. The program has two staff trained to certify the youth in ServSafe which prepares the youth to work in the food industry. The program is currently certifying five youth in ServSafe and have identified four additional youth for the next certification group. The program works with AmeriCorps corporation, who provides staff to mentor the youth one-on-one and in groups, host monthly job clubs, tutoring, and recruit volunteers to speak to youth about various topics related to career exploration, career planning, and skill development.

Interviews with seven youth indicated they all participated in youth development activities. The youth indicated they have volunteered at the local thrift shop, homeless shelter, and 5K run event. The youth also indicated they have participated in trips to local parks, local parades, a clay factory, local restaurants, bowling activities, museums, movies, and sporting events. The youth also indicated they participated in the AMIkids winter challenge event which was held in January or February 2019 and includes academic, life skills, and athletic competitions to promote the development of pro-social skills and goal attainment. The youth also indicated they

participated in the AMIkids dive challenge event where the program selects qualified youth from various program and certifies them in scuba diving. The training culminates in a dive trip to the Florida Keys. The youth also participate in the floating class room at Mote Marine Laboratory and Aquarium which provides educational and career development for the youth.

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. The policy further indicates the PAT shall be re-administered in the thirty days prior to the youth's release. In the event the youth is released from the program unexpectedly, the PAT re-assessment will be completed at the time the youth's record is closed. Three youth closed case management records were reviewed to determine if the program was following their release process. Two of the three records reflected the provider administered a PAT at least fourteen days prior to the youth's release from the program. The third record reflected the PAT was completed three days after the youth's release from the program. During the debriefing process the program advised the staff completed the PAT interview with the youth on a Friday and entered the PAT on the Monday when the program released the youth in the computer system. All three closed records reflected the PAT was entered into the Juvenile Justice Information System (JJIS) within twenty-four hours of completion. All three youth closed records reflected the youth was released from the program in JJIS within twenty-four hours of their release from the program. None of the reviewed youth closed records were applicable for an extension as none of the three youth were in the program over fifteen months. The program provided three additional youth records for review in which the youth were in the program over fifteen months. There was documentation in two applicable records the program requested an extension from the Circuit Six chief probation officer (CPO) prior to the youth's fifteenth month in the program. The third record indicated the request for an extension was made six days late. There was documentation in each record to support the CPO approved the youth's extension in the program.

Program Name: AMIkids Boy's Prevention-Pinellas
Provider Name: AMIkids Inc.
Location: Pinellas County / Circuit 6
Review Date(s): May 21-22, 2019

MQI Program Code: 1353
Contract Number: 7381
Number of Beds: 44
Lead Reviewer Code: 146

Overall Rating Summary

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