

**STATE OF FLORIDA  
DEPARTMENT OF JUVENILE JUSTICE**

**BUREAU OF MONITORING AND  
QUALITY IMPROVEMENT**

**Annual Compliance Report**

**Seminole County Sheriff's Office Transition Services**

***Seminole County Sheriff's Office***

**(Contract Provider)**

**1151 E. 28<sup>th</sup> Street**

**Sanford, Florida 32773**

***Review Date(s): February 25, 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:

<b>Satisfactory Compliance</b>	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.
<b>Limited Compliance</b>	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.
<b>Failed Compliance</b>	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:

Bonita Williams, Office of Program Accountability, Lead Reviewer (Standard 1)  
Paul Czigan, Office of Program Accountability, Regional Monitor (Standard 2 & 3)

Program Name: Seminole County Sheriff's Office Transition ServicesMQI Program Code: 1320  
Provider Name: Seminole County Sheriff's Office Contract Number: 10473  
Location: Seminole County / Circuit 18 Number of Beds: 18  
Review Date(s): February 25, 2020 Lead Reviewer Code: 148

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, and (3) Intervention Services, which are included in the Transition Services 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 Transition Services Rating Profile

Indicator Ratings		
Standard 1 - Management Accountability		
1.01	* Initial Background Screening	Satisfactory
1.02	Five-Year Rescreening	Satisfactory
1.03	Pre-Service and/or In-Service Training	Satisfactory
1.04	Incident Reporting (CCC)*	Non-Applicable
1.05	Abuse reporting (DCF)*	Satisfactory
1.06	Administration	Satisfactory
1.07	JJIS and Data Requirements	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 Services Transition Services Rating Profile

Indicator Ratings		
Standard 2 - Assessment and Performance Plan		
2.01	Referral Process	Satisfactory
2.02	Admission and Services Provision Processes	Satisfactory
2.03	Assessments for Services	Satisfactory

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## Standard 3: Intervention Services Transition Services Rating Profile

Indicator Ratings		
Standard 3 - Mental Health and Substance Abuse Services		
3.01	Individualized Plan of Care	Satisfactory
3.02	Community Referrals	Satisfactory
3.03	Transition Services Case Management	Satisfactory
3.04	Release/Discharge	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

The Seminole County Sheriff's Office Transition Services program provides services to youth released from a residential commitment program who have been placed on post-commitment probation or conditional release supervision through a contract with the Department. The program employs one program director, one analytical specialist, one supervisor, three youth specialists, and four transition specialists. Services are provided 250 days a year, five days a week, and begin when the youth is referred to the program.

The transition specialists are housed in the Seminole Sheriff's Office Youth Enforcement Center and provide services to the youth both at the program site and in the community. Upon admission to the program, youth are administered a Service Needs Assessment which determines the services to be provided to each youth. Services provided by the program include mentoring, education through the Eugene Gregory Memorial Youth Academy, if required for the youth, vocational services, and transportation.

## **Standard 1: Management Accountability**

<b>1.01 Initial Background Screening (Critical)</b>	<b>Satisfactory Compliance</b>
<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. 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>	

Since the last annual compliance review, the program has not had any new employees. The program conducts their own Level 2 Background screening for all new employees, vendors, and volunteers in accordance with Florida Statutes. The program is exempt from submitting an Annual Affidavit of Compliance with Level 2 Screening Standards.

<b>1.02 Five-Year Rescreening</b>	<b>Satisfactory Compliance</b>
<i>Background screening/resubmission 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 employee applicable for a five-year background rescreening. A review of the employee, volunteer, mentor, and intern roster found the program had one staff applicable for a five-year rescreening during the annual compliance review period. The program contract allows the program to conduct their own Level 2 background screenings when a staff is eligible for a five-year rescreening. The program was able to provide documentation to show the background rescreening was completed within the required timeframe and prior to the staff's anniversary date of the initial hire.

<b>1.03 Pre-Service and/or In-Service Training</b>	<b>Satisfactory Compliance</b>
<i>All Transition Services staff shall successfully complete training requirements as set forth in the standards. The training shall be completed prior to the delivery of direct services to Department youth and/or as in-service training to Transition Services staff.</i>	

According to the program's contract, training is only required for new staff and there are no annual training requirements for in-service staff. The program is not required to enter training into the Department's Learning Management System (SkillPro). The program staff are not considered direct care staff; therefore, staff only need to follow the training requirements outlined in the program's contract. The program's required contract trainings include Juvenile Justice Information System (JJIS), Trauma Informed Care, Motivational Interviewing, Critical Incident Reporting Requirements, and Adolescent Brain Development and other trainings to prepare staff for their job duties. There is a process in place to provide and document training as it occurs; the program provided documentation of all in-service trainings for all staff. The program had not had any new employees since the last annual compliance review.



<b>1.04 Incident Reporting (CCC) (Critical)</b>	<b>Non-Applicable</b>
<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>	

The program did not have any incidents reported to the Central Communications Center during this annual compliance review period; therefore, this indicator rates as non-applicable.

<b>1.05 Abuse Reporting (DCF)*</b>	<b>Satisfactory Compliance</b>
<i>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.</i>	

Postings for the Central Communications Center (CCC), emergency telephone number (9-1-1), and the Florida Abuse Hotline were located throughout the facility. The program did not have any CCC or incident reports regarding allegations of abuse against program staff. The program adheres to a code of conduct which outlines the required conduct of staff. Each staff takes a sworn oath of office through the Sheriff's Office and reviews standards of conduct when hired, as well as anytime the standards are updated. Each staff's personnel record included documentation of this occurrence. During the annual compliance review, the annual compliance review team did not observe any additional incidents requiring an incident report.

<b>1.06 Administration</b>	<b>Satisfactory Compliance</b>
<i>The program shall provide a safe and appropriate treatment environment, including administrative and operational oversight.</i>	

The program submitted monthly reports to the Department during the annual compliance review period, as required. The monthly reports included youth course information report (if applicable), admissions, releases, absconders, abuse reports, youth monthly progress report, monthly service summary report, discharge summary report, staff vacancy reports, Certified Minority Business Enterprise Utilization (CMBE) report, invoices, youth services report, medical, and mental health emergencies. A review of youth on the program's roster found the roster matched the census report in the Department's Juvenile Justice Information System (JJIS). A review of three closed youth records confirmed the date of admission and the date of termination correlated with JJIS.

<b>1.07 JJIS and Data Requirements</b>	<b>Satisfactory Compliance</b>
<i>The program and subcontracted service providers shall utilize the Department's Juvenile Justice Information System (JJIS) for data entry and shall monitor accuracy at all times.</i>	

Each of the three reviewed closed youth records had documentation in the Department's Juvenile Justice Information System (JJIS) which indicated the youth were entered within seventy-two hours of admission and discharged within twenty-four hours of actual release.

The program uses the JJIS Youth Placement-Facility module to enter all referral acceptances, rejections, and placements. Each youth's date of admission for services, dates of discharges/releases, and release reasons for each youth admitted were entered into JJIS, as required.

## **Standard 2: Assessment Services**

### **2.01 Referral Process**

**Satisfactory Compliance**

*The program shall review each referred youth's referral by email and JJIS to assess the youth's service needs and shall accept or reject all Department youth referred for transition services within seventy-two (72) hours of referral from the Department (excluding weekend and holiday hours).*

Each of the five youth records reviewed had documentation in the Department's Juvenile Justice Information System (JJIS) indicating the youth referrals were accepted within seventy-two hours. The program emailed the juvenile probation officer upon acceptance into the program. The program has a process in place regarding a referral which has been rejected due to not being appropriate for services, this was confirmed through interview with program staff.

### **2.02 Admission and Services Provision Processes**

**Satisfactory Compliance**

*A referral and/or pre-service activities shall begin while the youth is in a residential commitment, however, placement does not begin until a youth physically returns back to the community.*

A review of five youth records confirmed the transition specialist contacted each of the five youth parents/guardians prior to the youth's release from the program. Three of the five youth were referred while in a commitment program and were admitted/oriented within four days of release from the commitment program. Each of the three records included documentation the transition specialist participated in Community Re-Entry Team meetings and had contact with the juvenile probation officer to discuss transitional planning. The remaining two youth were not referred while in a commitment program. The remaining two youth were referred after being released from residential commitment programs within seven days of release. Each of the youth signed a copy of the Consent and Authorization for Use and Disclosure, Inspection and Release of Information, and the Consent for Service Planning/Follow-up were located in each youth records.

### **2.03 Assessments for Services**

**Satisfactory Compliance**

*The program shall conduct a Service Needs Assessment. The purpose of the assessment is to further define each youth's specific service needs as related to the core services.*

The program has a process in place regarding completion of the Service Needs Assessment for each youth admitted into the program. Each of the five reviewed youth records included a Service Needs Assessment which was completed within forty-eight hours of initial contact with the youth.

## Standard 3: Intervention Services

<b>3.01 Individualized Plan of Care</b>	<b>Satisfactory Compliance</b>
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*The program shall provide service planning for each youth with a youth-centered approach taking into consideration all the youth's service needs. The Individualized Service Plan (ISP) shall indicate goals to facilitate successful reentry to the community.*

Each of the five reviewed youth records included an Individualized Service Plan (ISP) which included measurable goals to address the youth's service needs as according to the needs assessment results.

<b>3.02 Community Referrals</b>	<b>Satisfactory Compliance</b>
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*The program shall have established links with other local community organizations to ensure the supportive service needs of the youth can be met in accordance with their Individualized Service Plan.*

The program has a process in place to ensure youth requiring community referrals receive services. However, none of the reviewed youth records documented the need for community referrals. The program reported if a youth needs a community referral, the assigned juvenile probation officer (JPO) is contacted to confirm the JPO made the necessary referral or if the program would need to submit a referral for services.

<b>3.03 Transition Services Case Management</b>	<b>Satisfactory Compliance</b>
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*The program shall provide one or more core transition services, specifically vocational services and /or education services, including mentoring and transportation with related support services.*

There was documentation in four of the five reviewed youth records indicating the transition specialist submitted referrals within fourteen days of the identified need. The remaining one youth record was not applicable for transition services. The transition specialist documented in progress reports the follow-ups were conducted every fifteen days for each referral.

<b>3.04 Release/Discharge</b>	<b>Satisfactory Compliance</b>
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*Prior to release or discharge of a youth from services (prior to completion of the intervention) the Program/Provider must coordinate discharge planning with the youth's JPO.*

Each of the three reviewed youth closed records were successful discharges and the discharge summaries were uploaded into the Department's Juvenile Justice Information System (JJIS) and the juvenile probation officer (JPO) was emailed notifying of the upload in JJIS. A review of documentation confirmed the transition specialist began coordinating the discharge of the youth the with the JPO within thirty days of pending discharge date.