



Board of Directors Meeting

February 10, 2011

Initiative Updates, Site Visit Schedule and Summaries

Item V.E.

CORRECTIVE/DEVELOPMENT ACTION PLANS STATUS REPORT & RELATED ISSUES

	<u>Beginning Date</u>	<u>Status</u>
City of St. Petersburg Police Department – South County Truancy	9/20/10	The 1 st phase of the CAP has been completed.
Sanderlin Neighborhood Family Center	10/15/10	Fiscal and Program corrective action is in process.
Suncoast Center, Inc.	9/30/10	In process.

REPORTS ON NEW INITIATIVES

None

CONTRACTS NOT EXECUTED

1 PCSB – Children’s Initiative

TIME LIMITED CONTRACTS

None

SITE VISIT SCHEDULE

February – July 2011

Big Brothers/Big Sisters – Comprehensive Mentoring	March 22, 2011
CASA – Domestic Violence/Substance Abuse Peacemakers	February 22, 2011 February 21, 2011
Children’s Home – Kinship Services Network of Pinellas	March 1-4, 2011
Family Resources – SafePlace 2B	May 9-10, 2011
Greater Ridgecrest Area Youth Development Initiative – Neighborhood Family Center	April 21, 2011
InterCultural Advocacy Institute – Hispanic Outreach Center	March 25, 2011
Martin Luther King Jr. – Neighborhood Family Center	May 24, 2011
Pinellas Assoc. for Retarded Children – Discovery Learning Respite & Family Support Services	June 27-29, 2011 June 30- July 1, 2011
Operation PAR – Adolescent Residential Center Alpha COSA	February 18, 2011 February 21-22, 2011 February 14-15, 2011
Pinellas County Health Department – Healthy Families Licensing Board	April 18-22, 2011 April 25-29, 2011
Sixth Judicial – Behavioral Evaluation	April 5-6, 2011

Board Members are invited to participate in site visits. For information, please contact Lisa Sahulka, 547-5643.

AGENCY SITE VISIT SUMMARIES

Site visits are conducted annually, and are a means to evaluate performance, monitor program delivery and recommend improvements as necessary. Serious program deficiencies result in a Corrective Action Plan being issued, with a deadline of up to 10 months for resolution and implementation. These actions are included in the quarterly Compliance Report. An agency's failure to respond to the Corrective Action Plan, continued under-performance may lead to a recommendation for further action, such as probation and/or termination of the contract.

Greater Ridgecrest Area Youth Development Initiative – Neighborhood Family Center

High Point Community Pride – Neighborhood Family Center

Lealman and Asian Neighborhood Family Center

Martin Luther King Jr. – Neighborhood Family Center

Safety Harbor – Neighborhood Family Center

Suncoast Center Inc. – Family Services

**JWB CHILDREN'S SERVICES COUNCIL OF PINELLAS COUNTY
COMPLIANCE & QUALITY REVIEW REPORT**

AGENCY NAME:	Greater Ridgecrest Area Youth Development Initiative
PROGRAM NAME	Greater Ridgecrest Area Youth Development Initiative
REVIEW DATES:	April 20, 2010
REVIEW TEAM MEMBERS:	Delphinia Davis, Yaridis Garcia and Karen Sierra
REPORT SUBMITTED BY:	Delphinia Davis
DATE OF REPORT:	11/29/10

Program Description

The Greater Ridgecrest Area Youth Development Initiative (GRAYDI) provides comprehensive services to youth and families in the Ridgecrest community that support and strengthen families, promote school readiness, provides family literacy, tutoring, homework help, technology training, job readiness and life skills. The initiative promotes community change through direct services and collaborative efforts that focus on family support and youth development. The service area targets families in the 1.5 square mile area known as the Greater Ridgecrest area. Services include social and educational activities, tutoring, Florida Comprehensive Assessment Test (FCAT) and Scholastic Achievement Test (SAT) test preparation, family support services, community and participant workshops, leadership training and development. GRAYDI increased its programs and services by collaborating with other organizations to provide adult and family literacy, job readiness, utility assistance, a food pantry, clothing program, and shelter referrals. GRAYDI employs the Community Change for Youth Development (CCYD) model, which is built on the premise of influencing the neighborhoods, institutions and human interactions that surround young people so that communities in which they mature are rich with developmental opportunities and healthy pathways to adulthood. The comprehensive services offered are based on the premise that by addressing the needs of the entire family, strong families are built and neighborhoods and communities thrive.

Summary of Overall Impressions:

In addition to the typical services at a NFC, youth programs and family support, the agency offers a unique approach to prevention services for families in the community. The agency recognized that some families needed more intensive services that could not be met by GRAYDI staff alone. Total Family Strategy Program through Suncoast Center Inc., has a Licensed Clinical Social Worker as part of the staff team at GRAYDI. This component offers intensive family support. The services help build a family's skills and resources to prevent the need for future involvement with social services. Some of the services include: budgeting; housing, child development, parenting; basic needs, and overcoming family hardships. The agency recognized the need to focus on FCAT preparation, tutoring and homework help in Math, Reading, Science, English and other subjects and provides these services during the afterschool programming hours.

Last year GRAYDI afterschool programming was part of the Out-of-School Time Initiative. All NFC afterschool programming was removed from that initiative for FY 09-10.

The agency is still working on the process of providing family support on site and how that works in conjunction with the other services. This service and staff position will continue to evolve in the coming year and the agency will gain better understanding of the community's needs in this area.

Significant Accomplishments

Some of the accomplishments from this agency in this fiscal year were:

- Expanded the Job Readiness program for adults which includes a dedicated space with new computers for job search and resume writing.
- GRAYDI held another successful "End of Summer Dayze" back to school event. The agency served over 200 kids, provided hair cuts, hair do's and back packs.
- Provided free tax prep services – which brought in a total of \$213,902 dollars of which \$94,169 were for Earned Income Credit. Tax prep for individuals increased by 41% from previous year.
- Established a new partnership with the Largo Library for monthly reading groups for the kids and this will continue for the 2011 school year.
- GRAYDI has a total of 25 youth waiting list for the after-school and tutoring program due outreach efforts.
- GRAYDI held an Open House breakfast for the adults in the community. 32 adults attended and discussed needs for different types of adult services in the community.
- GRAYDI has secured a new contract with the Urban League to provide energy assistance services in the Ridgecrest and Largo community.
- Established "Parenting for Change" Groups and Book Clubs.
- Higher level of involvement with community crisis issues (received referrals from Pinellas County Sherriff's Office PAL).
- Assisted 10 individuals with enrolling in college.
- Participated in: "Back to School", "Halloween with GRAYDI and YMCA".
- Increased participation in community meetings and family literacy.
- Participated in Hogs for Hope.
- Monthly Art time offered to participants in the community.
- Strong partnerships with Pinellas County Sherriff's Police Athletic League (PAL), YMCA of the Suncoast, Young Life and Bridging the Academic Gap (BTAG).

Summary of Compliance & Quality Findings

In FY 09-10, the program served 210 primary youth and 26 primary adults. The contracted service level for the program is 180 primary youth and 25 primary adults. The program exceeded its contracted service levels, however, there is an issue with the youth component numbers and capacity which will be addressed later in this report. The agency and program are adhering to all general conditions of the contract. The programmatic site review was conducted on April 20th, 2010. The programmatic site review consisted of interviews with management, program staff, participant file review, and participants.

The Executive Director supervises the agency, programs, and staff. The staff includes: an Executive Assistant, Program Manager, and a Program Assistant. The Executive Director and staff meet every Tuesday to discuss the program. The Program Manager and Executive Director meet one-on-one after the regular staff meeting to discuss the program and services within the community. The program also has paid tutors. Staff completed 2 CPR and first aid trainings.

The children and youth program is open to children and youth ages 3 to 17 years of age. Per the Program Manager, the program is now concentrating on youth between the ages of 9 and 14. The program is also

working on retaining the youth in this age range for greater impact on their resiliency and academic success. The number of youth in the after school program exceeds the center's capacity. The agency has tried to find ways to serve the demand in the community. The Site Review Team is recommending the number of primary youth will be lowered in the FY 10-11 contract. The family support component and TFS program is open to all families who may need this service in the surrounding community.

A total of thirty (30) participant files were reviewed during the visit. Fifteen (15) youth case files were reviewed to ensure that necessary paperwork backed up SAMIS data collection entries. Pre tests were documented in the case files. The case files also contained worksheets on the participants involved in the tutoring component. It was recommended last site visit for the program to keep progress notes on each participant in their file to document their individual progress. The files contained the recommended notes which included worksheets, progress notes and documentation in the participant files to determine whether the participant skills were improving. Group activities were reflected in the individual case files as stated in the program methodology and also in a 3-ring binder listing all the activities and events for the program. Fifteen (15) family support case files were reviewed to ensure that necessary paperwork backed up SAMIS data collection entries. The files were not properly organized and contained incomplete Goal Attainment Scale (GAS) forms. This is reflected in the data reported in SAMIS. This was a baseline year for the GAS measure. It was recommended to the Executive Director to review files more often and provide staff ongoing supervision and needed training to address this. It is important to note that during the staff's and parent's interview it was very obvious that the program is delivering needed services in the community. Two (2) parents and four (4) youth were interviewed during the site visit. All individuals interviewed indicated they were satisfied with the services provided at GRAYDI. In addition, the two parents interviewed elaborated on how the services have helped improved their kids' grades in school and self esteem. One parent indicated that she was also receiving assistance from GRAYDI with going back to school to obtain her GED. A reading group was observed during the afterschool programming as well. The agency has collaborations with: Pinellas County Sherriff's Police Athletic League, YMCA of Suncoast, and Pinellas County Housing Authority.

The agency uses SAMIS data to monitor progress on measurable objectives and contracted service levels. The Program Assistant inputs all data into SAMIS on Fridays. The agency is required to have a Continuous Quality Improvement (CQI) process in place that includes file reviews to ensure all required documentation is present. The Healthy Kids measurable objectives were not met for FY 09-10. JWB Researchers have addressed issues with this measurement tool for FY 10-11.

Due to the increasing community needs, the Executive Director is actively looking for a bigger building in order to serve the increasing number of families and children in need of services. Currently, the space is limited and the Executive Director does not have an office onsite. The co-location of staff and Executive Director will be beneficial for the continuation of quality programming.

GRAYDI has established a strong collaboration with Pinellas County Sherriff's Office PAL, Young Life, YMCA of Suncoast, and Pinellas County Housing Authority (PCHS) and BTAG (Bridging the Achievement Gap). This collaboration has increased the number of additional services and activities to benefit the community. There are various upcoming projects, such as the Youth Café where young people will obtain culinary skills, as well as Restaurant Management skills. There is also interest in a Community Garden and more exposure to the Arts and Photography.

The agency fiscal and personnel documents are maintained through an ASO. All fiscal documents were reviewed in house at CNS by JWB.

Requirements

1. The participant files for the family support component of programming are required to have progress note documentation and Goal Attainment Scales in each file.
2. Goal Attainment Scale training is required for the Family Support staff position.
3. The agency is required to have a Continuous Quality Improvement process that includes file review to ensure all required documentation is present.

Standard	Fully Meets	Partially Meets	Needs Improvement	Comment
Contract General Conditions & Special Conditions (5 indicators)	x			
Program Methodology (12 indicators)		x		Family Support files were lacking progress notes to determine if client needs are being met.
Contract Service Levels, Measurable objectives, & Other Deliverables (7 indicators)	x			
Program Staff and/or Volunteer Management (12 indicators)	x			
Data Collection & Reporting (11 indicators)		x		Family support files and GAS forms were incomplete
Program Management (11 indicators)	x			
Administrative Standards (6 indicators)	x			

Fully Meets = Program met every indicator

Partially Meets = Program received a partial rating in one or more of the indicators

Needs Improvement = Program received a needs improvement in one or more of the indicators

Issues and Procedures

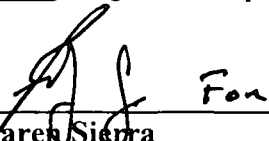
- Previous A.S.S.E.T. and Compliance Reviews were discussed with agency/program staff.
- Previous review requirements were successfully implemented.
- An exit conference was conducted with agency and program staff.
- Performance information as reported in SAMIS and/or manually by the Service Provider verified.
- Fiscal and personnel file review report and supporting documents completed.
- Record review form completed (Participant files, group activity, volunteer files).
- Interview forms completed.
- Report cover letter is attached.
- Prescriptive training needs, if any, discussed with program and JWB Training Department staff.
- Program continues to be in alignment with JWB strategic plan.
- No changes in program methodology are recommended at this time.
- No changes in contracted services levels are recommended at this time.
- No changes in measurable objectives are recommended at this time.

Please explain any issue/procedure not checked above:

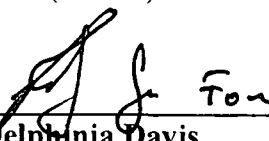
The contracted service for primary youth is recommended to be lowered in FY 10-11 to address capacity and quality of service. In addition, the Healthy Kids measurable objective has changed for FY 1011.

Overall Rating

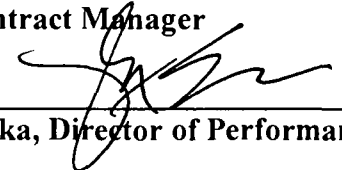
- Program is in full compliance.
- Program is in partial compliance (level 1) and is able to complete correction without further assistance or requires prescriptive training and technical assistance.
- Program is experiencing compliance infractions of a more severe nature (level 2). Provider must demonstrate compliance within six months. Prescriptive training, technical assistance, and more frequent monitoring will be conducted.
- Program is required to implement a corrective action plan (level 3).



Karen Sierra
Senior Contract Manager



Delphinia Davis
Senior Contract Manager



Lisa Sahulka, Director of Performance Management

**JWB CHILDREN'S SERVICES COUNCIL OF PINELLAS COUNTY
COMPLIANCE & QUALITY REVIEW REPORT**

AGENCY NAME:	High Point Community Pride, Inc.
PROGRAM NAME	High Point Neighborhood Family Center
REVIEW DATES:	July 21st and 26th, 2010
REVIEW TEAM MEMBERS:	Karen Sierra, Delphinia Davis and Wilnise Horsey
REPORT SUBMITTED BY:	Karen Sierra
DATE OF REPORT:	12/10/10

Program Description

High Point Community Pride's mission statement is to improve the quality of life and unite the diverse voices of the community of High Point and the surrounding area. The center creates, supports and encourages economic, social, recreational and educational opportunities through reduction of social, economic and cultural barriers.

The High Point Neighborhood Family Center (HPNFC) offers families a location to meet each other, enjoy companionship, participate in services or activities to learn together and support each other. The HPNFC is governed by a Board of local residents who make decisions based upon community needs, surveys, focus groups, resident meetings and community input. It's a youth and family friendly place where neighbors are helping neighbors to create a better life for High Point families. The center provides needed services in the areas of: family support, youth projects, and programs, community building events, outreach, intergenerational activities and much more.

Summary of Overall Impressions and Accomplishments:

The neighborhood family center offers program services, community events and support for the predominantly low income and a transient High Point community. The center offers bilingual services in Spanish to the Latino/Hispanic community. The center provides the following services:

Youth Services include afterschool and summer programming, tutoring, homework assistance, literacy services, recreational activities and youth leadership.

Parent Services include family support services, life coach services, linkages to social services, employment services, basic needs and community resources, seminars, educational sessions, Parenting for Change classes, financial literacy, and home visitation when necessary.

The center has a food pantry, a Back to School event, Child Abuse and Prevention Programs, holiday food and a gift program. A clothing closet, provides space for community events and activities, health seminars, trainings, conflict resolution, community mobilization and consensus building, art programs and activities, and is a host to collaborations that provide enhances social services and programming to the participants at the center. The following is a list of collaborations and/or additional funding sources for HPNFC:

- Pinellas County Sheriff's Office - Police Athletic League & Community Police Substation
- Winn Dixie -Summer Camp, Education Consultant & three tutors
- Department of Children and Families–ACCESS Florida Food, Medical Assistance and Cash site
- Tampa Bay Harvest & Care Plus -food pantry
- Pinch-A-Penny Pool-Patio- provides building maintenance
- Department. of Health- Women Infants Children (WIC)
- Family Center on Deafness- Deaf Services
- Adoption Support
- Suncoast Reconnect
- Alcoholics Anonymous
- Girl Scouts
- Work Net
- Volunteer Income Tax Assistance site
- High Point Elementary School

HPNFC has made a tremendous effort to engage the business community for sustainability and growth. The following companies donate to the center for its programs and events:

- Pinellas Feather Sound Rotary Club
- The Hospice of the Florida Suncoast
- POD's Enterprises, Inc.
- Auto Trader
- Pepper Contracting Services, Inc.
- Leland Management, Inc.
- CVB Convention and Visitor's Bureau
- Key Frame, Division of Daktronics Inc.
- New Advantage
- Publix Super Market, Inc.
- St. John's Episcopal Church
- Nueve Vida and the Vineyard Church
- Ranch Mobile Home Park
- Westminster Palms Retirement Community

The center will have its Agency Self-Study Efficacy Tool (hereinafter referred to as A.S.S.E.T.) Review January 2011. The agency receives services from JWB's Administrative Services Organization (ASO) for fiscal and Human Resources.

Summary of Compliance & Quality Findings

The HPNFC site visit was conducted on July 21st and July 26th. The site review consisted of interviews with Board members, the Executive Director, program staff, observation of program services, a tour of the facility and participant file review.

The agency and program are in compliance with the general conditions and special conditions of the contract. In FY 09-10, the agency served 119 youth and was contracted to serve 120 youth, and they served 47 adults when contracted to serve 30. The agency met its measurable objectives with the Healthy Kids Survey being a baseline year. The agency provided 17 activities throughout the year serving 4,121 youth and adults. The agency is serving its targeted population and is adhering to its program methodology.

Board member interviews conducted discussed the importance of the leadership of the Executive Director and that the Board strongly supports and has a good working relationship with the agency's Executive Director. The interview with the Executive Director discussed the new efforts the agency is taking toward fundraising and outreach starting with their new FaceBook page. Staff interviews demonstrated teamwork and dedication to the participants they serve and the agency. Required staff is in compliance with BEST training and staff attends training opportunities in the community. In addition, staff receives supervision but the team notes this process could be more structured.

A total of twenty (20) participant files were reviewed. The files consisted of youth participant files and family life coach/family support files. The files were not all complete and organized. A number of files were missing correct signatures and dates. Healthy Kids Surveys and Goal Attainment Scale forms were present. The organization would benefit from a Continuous Quality Improvement (CQI) process to ensure participant files are complete and the data entered into SAMIS is accurate.

Observation of youth services included watching the children and youth during summer programming activities. The children and youth were receiving a safety lesson from the local fire department and also were able to check out a fire truck. Children and youth appeared engaged in the activity. The staff showed photo albums of the group activities that took place during the year. The pictures show tremendous community and family presence at all events. The agency also provides a volunteer appreciation dinner that is well attended.

The leadership and staff at the agency and volunteers in the community show the dedication and involvement that the entire community has in this center and its survival and growth.

Requirements

- Staff that implement the Goal Attainment Scale (GAS) tool are required to attend GAS training.

Recommendations

- The agency would benefit from developing a Continuous Quality Improvement (CQI) process to ensure the participant files are organized and complete and data is accurate in SAMIS.
- The agency would benefit from providing a structure around supervision of program staff.

Standard	Fully Meets	Partially Meets	Needs Improvement	Comment
Contract General Conditions & Special Conditions (5 indicators)	X			
Program Methodology (12 indicators)	X			
Contract Service Levels, Measurable objectives, & Other Deliverables (7 indicators)		X		Youth CSL missed by one participant
Program Staff and/or Volunteer Management (12 indicators)	X			
Data Collection & Reporting (11 indicators)		X		Files were not well organized and complete
Program Management (11 indicators)	X			
Administrative Standards (6 indicators)	X			

Fully Meets = Program met every indicator

Partially Meets = Program received a partial rating in one or more of the indicators

Needs Improvement = Program received a needs improvement in one or more of the indicators

Issues and Procedures

Previous A.S.S.E.T. and Compliance Reviews were discussed with agency/program staff.

Previous review requirements were successfully implemented.

An exit conference was conducted with agency and program staff.

Performance information as reported in SAMIS and/or manually by the Service Provider verified.

Fiscal and personnel file review report and supporting documents completed.

Record review form completed (Participant files, group activity, volunteer files).

Interview forms completed.

Report cover letter is attached.

Prescriptive training needs, if any, discussed with program and JWB Training Department staff.

Program continues to be in alignment with JWB strategic plan.

No changes in program methodology are recommended at this time.

No changes in contracted services levels are recommended at this time.

No changes in measurable objectives are recommended at this time.

Please explain any issue/procedure not checked above:

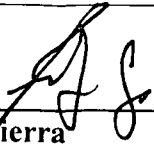
Overall Rating

Program is in full compliance.

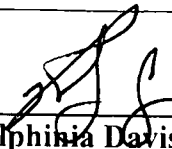
Program is in partial compliance (level 1) and is able to complete correction without further assistance or requires prescriptive training and technical assistance.

Program is experiencing compliance infractions of a more severe nature (level 2). Provider must demonstrate compliance within six months. Prescriptive training, technical assistance, and more frequent monitoring will be conducted.

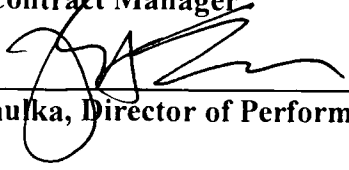
Program is required to implement a corrective action plan (level 3).

 Fou

Karen Sierra
Senior Contract Manager

 Fou

Delphinia Davis
Senior Contract Manager



Lisa Sahlka, Director of Performance Management

**JWB CHILDREN'S SERVICES COUNCIL OF PINELLAS COUNTY
COMPLIANCE & QUALITY REVIEW REPORT**

AGENCY NAME:	Lealman and Asian Neighborhood Family Center
PROGRAM NAME	Neighborhood Family Center
REVIEW DATES:	July 1, 2010
REVIEW TEAM MEMBERS:	Karen Sierra, Delphinia Davis, Wilnise Horsey
REPORT SUBMITTED BY:	Karen Sierra
DATE OF REPORT:	December 5, 2010

Program Description

The Lealman and Asian Neighborhood Family Center (LANFC) provides information and referral assistance to meet the many needs of children and families who come to the Center for service. The center offers English for Speakers of Other Languages (ESOL), adult computer classes, parenting classes, money management classes, an after school program for students in grades K - 8, youth literacy program, Friday Night Jam for teens to have a safe place to have fun, and a summer program for youth grades 1 - 8. LANFC maintains a food pantry for those in need and is an ACCESS Florida Food, Medical Assistance and Cash center supported by the Department of Children and Families. The Center is also a Volunteer Income Tax Assistance (VITA) site during tax season offering free income tax return service to the community. The Center has a family support worker to assist with referrals and develop support plans for each family desiring help. The Center also has a Life Coach to work with families, setting goals referring to education, employment, immigration and other family needs. LANFC is the sole site in Pinellas County where the Asian community can receive assistance with language interpretation in Vietnamese, Chinese, Thai, Laotian and Hmong. The program also offers help with immigration and citizenship. The Center offers a literacy program made possible with a literacy specialist on staff. LANFC offers many special events to the community during the year i.e.; Halloween Safe Night, Thanksgiving Dinner, monthly Saturday breakfast, holiday gift, and food support.

The program also partners with other organizations i.e.; Cooperative Extension Program, Eckerd Community Alternatives, and the Sheriff's PAL Program. These partnerships offer additional opportunities to adults and youth in the community.

Space at LANFC is used by partner agencies to offer programs and/or workshops in addition to those already offered by LANFC.

The Lealman and Asian Neighborhood Family Center is located in a low-income area. Residents have diversified social needs. Some of these issues are high unemployment, home foreclosure, alcohol dependency, and family abuse. The Center partners with other programs such as Eckerd Community Alternatives to offer workshops such as Front Porch to the community. The Center also participates in community events such as Back to School Event sponsored by the Lealman Community.

Summary of Overall Impressions and Accomplishments:

LANFC has gone through significant changes over the last two years. Two years ago Lealman Neighborhood Family Center and Asian Neighborhood Family Center merged as one agency. This merger brought two Boards together resulting in a change in leadership. The center has increased the number of clients served as well as the services it offers to the community. The agency has a website that the community may access as well as a

quarterly newsletter that is distributed to 3,000 residents. Both the summer and after school programs have enrollment waiting lists.

The following programs/services are offered to the community:

Referral Service- Participants receive information and referrals from the Family Support Specialist regarding education, employment opportunities, child care, housing, and other family needs.

Family Support- Family Support Specialist works with families on a family support plan and sets goals with strategies and timelines to improve their life situation in areas such as parenting life skills, education, employment, family violence, mental health, financial, legal and other family support issues.

Life Coach- provides assistance to families needing more intensive family support services.

Family Classes- Various classes are offered during the year to families i.e. Baby T. L. C. (Trust-Love-Communication) for parents with children 0-3 years of age.

After school and Summer program- offered to children and youth, kindergarten through 8th grade, in the community to provide structured educational and recreational activities.

LANFC has received recognition from the State of Florida Vietnamese Organization for outstanding services. LANFC also received an award from the United States Department of Treasury for servicing the community during tax season with the VITA Program.

The agency receives finance and human resources services through the JWB administrative services organization.

LANFC will be participating in an Agency Self-Study Efficacy Tool (A.S.S.E.T.) review in the 2010-2011 program year.

Summary of Compliance & Quality Findings

The LANFC site visit was conducted on July 1, 2010. The site visit included a tour of the facility, interviews with the Executive Director, Office Manager, Literacy Specialist, Family Life Coach, Program Coordinators, Youth Workers, observation of summer programming, and participant file review.

The agency is adhering to the general conditions of the contract. The population served and all services provided match the program methodology. In FY 09-10 the program exceeded its contracted services levels for both primary adults and youth serving 189 youth and 153 adults. In addition, the agency provided 204 activities throughout the year for both adults and children in the community. These activities ranged from educational trainings and informational seminars to holiday parties and community celebrations. The program met all of its measurable objectives. In previous years the agency had struggled in meeting its contracted service levels and measurable objectives. The agency has made progress in not only meeting but exceeding these outcomes

The Executive Director provides supervision to all of the staff. It is important to note that the staff work very closely as a team, and the Executive Director has provided strong leadership and guidance in this effort after the merger of staff between two agencies. Staff receives ongoing training in various topics and areas that pertain to the work they do at the center. All required staff are trained in Building Exemplary Systems for Training Youth Workers (BEST). The staff are dedicated and committed to providing quality services to the community as demonstrated in both the interviews and observation of activities.

Twenty (20) participant files from FY 09-10 were reviewed during the visit. The files contained all required documentation and were well organized. The information in the files matches data reported in SAMIS. The Goal Attainment Scales (GAS) and Healthy Kids Surveys were also completed appropriately. Additional GAS training is required for all staff who implement and review the tool. A review of GAS documentation will be conducted by JWB research staff to assist program staff with participant goal setting.

During the visit the Review Team observed the summer program activities. All staff have input into the summer program schedule. The children were excited about the summer's theme of traveling around the world to different countries. Guest speakers from different countries were invited to come each week and present information related to their country's culture. The children participated in cooking food from that country and made arts and craft that hang on the center's walls. The children also participated in computer literacy, dance, recreational sports, cooking, reading, writing, swimming, and other activities. This reviewer also attended the finale show the children put on for parents and the community. The room was filled with parents, grandparents, and community members watching the children present their accomplishments and talents.

The center has worked hard on the transition and merger. The leadership and staff have diligently worked on making the center a place in the community where the door is open for those needing services. This is evidenced by interviews, observations, and review of participant files.

Requirements

Staff who implement and review the Goal Attainment Scale must participate in GAS training.

Standard	Fully Meets	Partially Meets	Needs Improvement	Comment
Contract General Conditions & Special Conditions (5 indicators)	X			
Program Methodology (12 indicators)	X			
Contract Service Levels, Measurable objectives, & Other Deliverables (7 indicators)	X			
Program Staff and/or Volunteer Management (12 indicators)	X			
Data Collection & Reporting (11 indicators)	X			
Program Management (11 indicators)	X			
Administrative Standards (6 indicators)	X			

Fully Meets = Program met every indicator

Partially Meets = Program received a partial rating in one or more of the indicators

Needs Improvement = Program received a needs improvement in one or more of the indicators

Issues and Procedures

- ___ Previous A.S.S.E.T. and Compliance Reviews were discussed with agency/program staff.
- X Previous review requirements were successfully implemented.
- X An exit conference was conducted with agency and program staff.
- X Performance information as reported in SAMIS and/or manually by the Service Provider verified.
- ___ Fiscal and personnel file review report and supporting documents completed.
- X Record review form completed (Participant files, group activity, volunteer files).
- X Interview forms completed.
- X Report cover letter is attached.
- X Prescriptive training needs, if any, discussed with program and JWB Training Department staff.
- X Program continues to be in alignment with JWB strategic plan.
- X No changes in program methodology are recommended at this time.
- X No changes in contracted services levels are recommended at this time.
- X No changes in measurable objectives are recommended at this time.

Please explain any issue/procedure not checked above: Agency was not subject to ASSET. JWB serves as the agency's administrative services provider and therefore a fiscal review was not completed.

Overall Rating

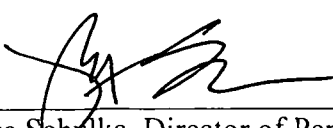
- X Program is in full compliance.
- ___ Program is in partial compliance (level 1) and is able to complete correction without further assistance or requires prescriptive training and technical assistance.
- ___ Program is experiencing compliance infractions of a more severe nature (level 2). Provider must demonstrate compliance within six months. Prescriptive training, technical assistance, and more frequent monitoring will be conducted.
- ___ Program is required to implement a corrective action plan (level 3).



 Karen Sierra
 Senior Contract Manager



 Delphinia Davis
 Senior Contract Manager



 Lisa Sabulka, Director of Performance Management

**JWB CHILDREN'S SERVICES COUNCIL OF PINELLAS COUNTY
COMPLIANCE & QUALITY REVIEW REPORT**

AGENCY NAME:	Martin Luther King Jr. Neighborhood Family Center
PROGRAM NAME	Neighborhood Family Center
REVIEW DATES:	May 6, 2010
REVIEW TEAM MEMBERS:	Karen Sierra, Delphinia Davis, Danielle Ricciardi
REPORT SUBMITTED BY:	Karen Sierra
DATE OF REPORT:	10/21/10

Program Description

As submitted by the agency in the program methodology:

The mission of the Martin Luther King NFC is to enrich the lives of children and families in the spirit of community and common goals by being a resource for collaborative partnerships.

The Center is dedicated to the belief that families should have the resources, supports and skills necessary to raise children in a healthy and safe neighborhood that promotes the development of their maximum potential. The Center is staffed by people who either live in the neighborhood or who are knowledgeable in their area of expertise surrounding youth, family and community issues. Families come to the Center for referrals to community resources to meet basic needs, and participate in programs, activities and events to help them grow healthy minds and bodies. Youth programming occurs five days per week after school, and there is a 10-week Summer Camp. Family enrichment services and activities provide for families needing additional strength based training and support. Other agencies in the building include the Pinellas Opportunity Council, Inc. the Neighborly Care, Pinellas County Health Department (WIC) which provides emergency services, health and nutrition and other family development programs. The Family Literacy Coordinator (funded through the City of Clearwater) provides economic development activities such as financial planning, parenting enhancement workshops, and healthy living seminars. The Volunteer Opportunity Program links the community and surrounding neighborhoods to the center and provides the necessary resources to successfully carry out the mission of the agency. The Center also serves as a hub for community, civic, and social activities during most evenings and weekends; providing meeting space for such agencies as the NAACP, Sickle Cell Organization, Kinship Care, Spiritual Change NA, Young Life, and the Community Coalition Group. The Center also serves as a polling place for national and local elections.

Summary of Overall Impressions and Significant Accomplishments:

The Martin Luther King, Jr. Neighborhood Family Center (MLK NFC) has evolved over the last several years into a neighborhood family center offering not just youth development services, but resources for the entire family and community. The center offers the following:

Youth Development Program/Afterschool and Summer Camp – builds children and youth's resiliency, social skills, academic success, leadership skills through the following services offered five (5) days per week from 2:30 – 5:30 pm and a ten (10) week summer camp operating 8:30 – 5:30 pm: tutoring; computer learning

lab; basic computer literacy and TechnoPC© reading literacy program, cultural awareness and diversity activities, visual and performing arts, financial literacy, leadership development activities, drug awareness, career exploration, field trips, and social/recreational activities.

Family Life Coach – focuses on strengths and abilities of parents and uses goal setting to build their capacity in education, job skills, employment, and financial stability. This component does provide group activities on occasion.

Family Literacy-(provided City of Clearwater funds this component) coordination and delivery of literacy services, support groups, skills training, financial literacy, economic development, early learning activities and skills, and linkages to related literacy community supports.

Volunteer Opportunity-recruits and trains community volunteers to assist with services in the center and carrying out the mission.

In FY 09-10, the center was required to transition the Family Life Coach position into the MLK NFC from Pinellas Core Management Services. Having the position in house allows for families to receive comprehensive services. Parents are now offered family support and goal planning. The previous year the afterschool program was under the Out-of-School Time Initiative and along with all NFC afterschool programs, the program was removed from that initiative.

In January 2010, MLK NFC was approved by the JWB Board to administer the subcontract of the Youth Development Initiatives (YDI). MLK NFC is responsible for monitoring YDI's contract and services. Meetings have taken place between MLK NFC leadership and YDI leadership for this transition.

The agency receives JWB ASO services for fiscal and Human Resources support. The agency is still responsible as the employer for financial and Human Resource management.

The agency continues to work on their organizational structure and Board membership. The agency is due for an A.S.S.E.T. review in January 2012. The agency will be moving its location sometime in August 2011, into a nearby Clearwater Recreation Center. The City of Clearwater is renovating the building during this FY in preparation for opening in later summer 2011.

Summary of Compliance & Quality Findings

The MLK NFC site visit was conducted on May 6, 2010. The site visit included interviews with all staff, a tour of the facility, observation of afterschool programming and the review of participant files.

The agency is adhering to most general conditions of the contract. The Executive Director is newer to the position and its roles and responsibilities. This year has presented the Executive Director with numerous challenges. It is recommended that training opportunities in the areas of financial management and nonprofit management may be beneficial to assisting the Executive Director in her role. The clients served during the fiscal year matches the population in the program methodology. The agency program components are adhering to the program methodology.

The Review Team met with the Executive Director, Administrative Services Manager, Family Life Coach, Youth Technology Educator, Volunteer Coordinator and the Youth Development Specialists. The Executive Director provides supervision for all positions. All staff reports that the Executive Director has an open door policy. There was not evidence of regular formal supervision. JWB staff recommends regular supervision of staff becomes formalized. Also the use of formal case conference may assist with assessing families' needs. The

staff attends trainings offered through JWB and other community resources. The staff required to go through BEST training have completed the course or are attending currently.

The agency did not meet its contracted service levels for FY 09-10. JWB Research Staff use a "smoothing" method to estimate appropriate service level numbers. Due to the many changes this NFC has gone through, and will continue to go through, the Review Team is recommending decreasing the numbers to be served.

Twenty (20) random participant files were reviewed. The files did not contain all required documentation. A number of the Goal Attainment Scale (GAS) forms were not reviewed by the Executive Director as evidenced by no signature being present on the document. This was discussed with the Executive Director during the site visit. In addition, the GAS forms were not always completed appropriately. A Goal Attainment Scale (GAS) refresher training will be required. The youth files did contain Healthy Kids Surveys, consent to participate in the program, and other required documentation. However, the dates of administration of the surveys were not always consistent. Again, this demonstrates a need for the agency to have a Continuous Quality Improvement (CQI) process that includes participant file review to ensure required documentation is present and complete. In addition, the CQI process would also address SAMIS data integrity. Only one staff person was trained in SAMIS data entry and reports. There should always be a backup staff person trained to assist. It is important to note that the Healthy Kids measurable objective language will change in FY 10-11.

The Team observed the afterschool programming where children and youth were sectioned off into older and younger age groups. The afterschool program serves children and youth ages 5 through 14. The team met with children, youth, and staff during the activity. The participants were engaged with the staff in the activity. The staff are preparing for summer programming in a few weeks.

The agency provides services to a low-income, predominantly at-risk population. The agency has gone through significant changes over the last several years and has new ones to face this coming year. As it works itself through those changes it must also provide the internal structure and support necessary to keep an agency thriving and successful.

Requirements

- Goal Attainment Scale training is required for family support staff and for staff reviewing and signing off on this document.
- The agency is required to have a Continuous Quality Improvement (CQI) process in place that includes regular reviews of participant files to ensure required documentation is complete and present and for data integrity.
- At a minimum two agency staff are required to attend SAMIS trainings in the area of data entry and reports.

Recommendations

- Evidence of formal supervision and staff meetings will help the agency with quality improvement and preparation for A.S.S.E.T. review in the near future.

Standard	Fully Meets	Partially Meets	Needs Improvement	Comment
Contract General Conditions & Special Conditions (5 indicators)		x		
Program Methodology (12 indicators)	x			
Contract Service Levels, Measurable objectives, & Other Deliverables (7 indicators)		x		CSL's and MO's not all met
Program Staff and/or Volunteer Management (12 indicators)	x			
Data Collection & Reporting (11 indicators)		x		
Program Management (11 indicators)		x		
Administrative Standards (6 indicators)		x		

Fully Meets = Program met every indicator

Partially Meets = Program received a partial rating in one or more of the indicators

Needs Improvement = Program received a needs improvement in one or more of the indicators

Issues and Procedures

Previous A.S.S.E.T. and Compliance Reviews were discussed with agency/program staff.

Previous review requirements were successfully implemented.

An exit conference was conducted with agency and program staff.

Performance information as reported in SAMIS and/or manually by the Service Provider verified.

Fiscal and personnel file review report and supporting documents completed.

Record review form completed (Participant files, group activity, volunteer files).

Interview forms completed.

Report cover letter is attached.

Prescriptive training needs, if any, discussed with program and JWB Training Department staff.

Program continues to be in alignment with JWB strategic plan.

No changes in program methodology are recommended at this time.

No changes in contracted services levels are recommended at this time.

No changes in measurable objectives are recommended at this time.

Please explain any issue/procedure not checked above:

CSL's and MO's are changing for FY 10-11. City of Clearwater funding has been reduced and that eliminates several positions for FY 10-11. The agency will be working closely with JWB Program Support and Development Department during this transition time working on leadership and management.

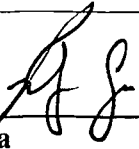
Overall Rating

Program is in full compliance.

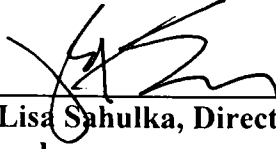
Program is in partial compliance (level 1) and is able to complete correction without further assistance or requires prescriptive training and technical assistance.

Program is experiencing compliance infractions of a more severe nature (level 2). Provider must demonstrate compliance within six months. Prescriptive training, technical assistance, and more frequent monitoring will be conducted.

Program is required to implement a corrective action plan (level 3).

 *K. Sienra*

Karen Sienra
Senior Contract Manager Signature



Lisa Sahulka, Director of Performance Management
and

**JWB CHILDREN'S SERVICES COUNCIL OF PINELLAS COUNTY
COMPLIANCE & QUALITY REVIEW REPORT**

AGENCY NAME:	Safety Harbor Neighborhood Family Center
PROGRAM NAME	Neighborhood Family Center
REVIEW DATES:	August 19, 2010
REVIEW TEAM MEMBERS:	Karen Sierra, Delphinia Davis, and Wilnise Horsey
REPORT SUBMITTED BY:	Karen Sierra
DATE OF REPORT:	December 15, 2010

Program Description

The Safety Harbor Neighborhood Family Center (SHNFC) provides comprehensive services to the residents of the Safety Harbor, Oldsmar, and eastern Clearwater. The services are designed to strengthen the community as a whole. SHNFC offers programs to help children achieve success in school through technology training, literacy, academic tutoring, and the development of social skills. SHNFC offers programs for adults in technology training and career development to improve their employability. SHNFC also collaborates with other agencies to address some of the most basic needs such as food, clothing, mental health services, and financial support. The underlying premise is that by addressing all facets of the family, SHNFC does not only improve the family, but also increases the family's sustainability within the community. Youth and families receive comprehensive evaluations resulting in either youth or family support plans linking them to funds and services providing a strong support system and increasing self-sufficiency. SHNFC continually evaluates programs and assesses the needs of residents and develops new initiatives when necessary to better serve the community.

Summary of Overall Impressions and Significant Accomplishments:

SHNFC is uniquely placed in a community that although having one of the highest median incomes in Pinellas County also has twenty (20) percent of its residents that are low-income with great needs. The agency also provides assistance to the low-income residents residing in Oldsmar and eastern Clearwater where there are no NFC's. SHNFC's leadership changed just over two (2) years ago which provided the agency an opportunity to expand services. The agency is building partnerships and collaborations in the community to be able to meet the needs of its residents. In addition, the agency is recruiting new board members that reside in eastern Clearwater and Oldsmar areas to secure representation of the areas served. The agency now offers satellite services at Oldsmar Elementary School where literacy staff assist children with reading and math skills. This partnership with Pinellas County Schools has benefitted children with low reading and math skills. The agency's Board of Directors and management staff continue to seek out funding sources in the business community to further diversify funding and to help address community needs. In addition, the agency has developed a relationship with the City of Oldsmar, the City of Safety Harbor, and has applied for a City of Clearwater grant. The agency holds fundraisers throughout the year as well.

The agency provides the following:

Family Support and Family Life Coaching- Information and referrals are provided to families concerning specific resources available to assist them. Limited financial assistance may be provided by other funders to help "bridge the gap" for those families in financial stress. Goal oriented support plans are developed to help the family not only resolve the primary issue in the short term, but create new strategies for long term success. Youth participants receive comprehensive services through an evaluation to identify areas of need. A youth

support plan offers strategies and resources to address many social and academic needs such as juvenile crime, truancy, substance abuse, anger management, and replace dysfunctional behavior with developmentally appropriate practices and behaviors. The support plan provides a road map of action steps to change outcomes and lives. The program supports the development of attitudes and behaviors that allow youth to succeed and become healthy and productive citizens.

Children's Youth Development Programs- The philosophy guiding the children's program is to promote school success and school readiness through structured activities that improve their academic skills. The agency provides homework assistance, technology classes, reading club, math and science assistance. Staff also address social development needs through problem solving and team building. Literacy skill development is part of the Bright Ideas after school program. This includes the summer camp programming that is offered five (5) days per week. Individual tutoring and homework assistance is offered through appointment.

The agency also provides: a computer learning lab and training center for the community, offers a food pantry, is a Women, Infants and Children (WIC) site, has a clothing closet, is an site for Department of Social Services Temporary Cash Assistance, Food Stamps, Medicaid and Refugee Assistance (ACCESS), offers bilingual services, notary public services, coordinates a Back to School Celebration event, Adopt-a-Family event during the holidays, career development, holiday food distribution, and an eight (8) week parenting class, and provides space for the AIDS Service Association of Pinellas programs and support groups.

The agency is due for an Agency Self-Assessment Tool (ASSET) review in 2011. The agency contracts with JWB administrative services organization for financial and human resource services. The agency has a Strategic Plan that it continues to work on. As with all of the Neighborhood Family Centers, the staff is small in number but is greatly committed and dedicated to the mission of the agency and to help the community. The agency is currently exploring a name change to better reflect all of the communities it serves.

Summary of Compliance & Quality Findings

The site visit was conducted on August 19th, 2010. The review consisted of a tour of the facility, interviews with the Executive Director, Program Coordinator, Family Life Coach, Family Specialist, and Youth Specialist. In addition, interviews with parents and a Board Member. The team observed summer programming activities and reviewed twenty (20) participant files.

The agency is adhering to the general conditions of the contract. In FY 09-10, the agency exceeded its contracted service levels serving a total of 126 primary youth and 69 primary adults. SAMIS does not reflect the events and group activities the community attends throughout the year. The agency met its measurable objectives with the understanding that the Healthy Kids measurement was a baseline.

Interviews with a Board Member, Executive Director, and program staff reflect dedication and commitment to serving children and families. Lack of participant access to transportation was expressed as a concern during the site visit. Staff receives supervision; however, it is evidenced that this process is not formalized. The agency would benefit from providing more formal supervision in a structured manner to better guide staff.

Twenty (20) youth and adult participant files were reviewed. The files were organized but did not always contain all required and completed documentation. This was specifically noted in the Family Specialist participant documentation which was noted in the previous year's site visit report. Documentation of progress notes are required in each file receiving family support services. Other participant files had data entry errors in SAMIS that can be addressed through data cleansing. Goal Attainment Scale forms and Healthy Kids Surveys were located in the files. The agency would benefit from a Continuous Quality Improvement (CQI) process that addresses file review and maintenance. In addition, supervision and review of participant progress notes and family support assistance and goals is required.

Summer programming services were observed. The center serves youth from kindergarten through fifth (5th) grade. Many children were present and participating in the activities. The center has several different pet animals cared for by the children. In addition, the center uses volunteers and encourages families that have participated in services to volunteer. A parent was interviewed during the review who talked about how her family volunteers at the center and that her children attend the afterschool and summer programming which have helped her family.

Requirements

1. Staff to complete data cleaning and implement a quality improvement system to randomly select files ensuring data integrity related to client file information and SAMIS data by using the Client Participant Detail report in SAMIS.
2. Staff responsible for developing and reviewing GAS documentation must participate in additional GAS training.
3. Implement more formal staff supervision and process for reviewing client files and goals.

Standard	Fully Meets	Partially Meets	Needs Improvement	Comment
Contract General Conditions & Special Conditions (5 indicators)	X			
Program Methodology (12 indicators)	X			
Contract Service Levels, Measurable objectives, & Other Deliverables (7 indicators)	X			
Program Staff and/or Volunteer Management (12 indicators)		X		Supervision for file review
Data Collection & Reporting (11 indicators)		X		File review and supervision
Program Management (11 indicators)	X			
Administrative Standards (6 indicators)	X			

Fully Meets = Program met every indicator

Partially Meets = Program received a partial rating in one or more of the indicators

Needs Improvement = Program received a needs improvement in one or more of the indicators

Issues and Procedures

 N/A Previous A.S.S.E.T. and Compliance Reviews were discussed with agency/program staff.

 N Previous review requirements were successfully implemented.

 Y An exit conference was conducted with agency and program staff.

 Y Performance information as reported in SAMIS and/or manually by the Service Provider verified.

 Y Fiscal and personnel file review report and supporting documents completed.

 Y Interview forms completed.

 Y Report cover letter is attached.

 Y Prescriptive training needs, if any, discussed with program and JWB Training Department staff.

 Y Program continues to be in alignment with JWB strategic plan.

 Y No changes in program methodology are recommended at this time.

 Y No changes in contracted services levels are recommended at this time.

 Y No changes in measurable objectives are recommended at this time.

Please explain any issue/procedure not checked above:


Overall Rating

 Program is in full compliance.


 X Program is in partial compliance (level 1) and is able to complete correction without further assistance or requires prescriptive training and technical assistance.

 Program is experiencing compliance infractions of a more severe nature (level 2). Provider must demonstrate compliance within six months. Prescriptive training, technical assistance, and more frequent monitoring will be conducted.

 Program is required to implement a corrective action plan (level 3).



 Karen Sierra, Senior Contract Manager



 Lisa Sahulka, Director of Performance Management

**JWB CHILDREN'S SERVICES COUNCIL OF PINELLAS COUNTY
COMPLIANCE & QUALITY REVIEW REPORT**

AGENCY NAME:	Suncoast Center Inc.
PROGRAM NAME	Family Services
REVIEW DATE(S):	September 1,2,3, 2010
REVIEW TEAM MEMBERS:	Rod Cyr, Wilnise Horsey, Ph.D, Jeanine Evoli, Junko Lescinski, and Gary Cernan
REPORT SUBMITTED BY:	Gary Cernan
DATE OF REPORT:	December 10, 2010

Program Description

The mission of the Suncoast Center Family Services program is to strengthen, protect, and restore lives for a healthier community. The program is designed to stabilize and empower families to fully succeed in supporting, protecting, and nurturing their children. Within the last two years, Suncoast Center successfully completed two major mergers with Help-a-Child and Family Service Center. In light of the large number of programs merged under the Suncoast Center umbrella and their varying eligibility requirements; administering them separately made little sense. In response, Suncoast requested that JWB approve the use of a much more efficient and accessible single program model which would consolidate all of the individual programs into a single program with a broad continuum of services. This model also included the development of a single access point and all services would be available at every one of the twelve Suncoast program sites. This model was approved by JWB at the midpoint of the 2009-10 fiscal year. Suncoast consolidated all the individual intervention strategies into a single program now known as Family Services. All of the former program services were integrated into five services areas and one budget. The core service areas are as follows:

1. Early Childhood Services - Screening, assessment, intervention, therapy, parenting support, and case management services. Serves families with children ages 0-6.
2. Trauma Services – Assessment, therapy, crisis intervention, case management, support services, prevention and education. Serves families with children of all ages who have experienced trauma.
3. Outpatient Services – Individual and family counseling, psychiatric, mental health, substance abuse, and case management services. Serves families with children of all ages whose needs can be addressed in an office setting.
4. In-Home Services - Individual and family counseling, intensive mental health, substance abuse, and case management services, serving families with children of all ages whose needs can be addressed in the home.
5. Total Family Strategy Continuum of Care Services - Parent mentoring, family case management, family therapy, and family social support services. Serves families with children of all ages who needs can best be addressed using community and natural supports in conjunction with in-home services.

Suncoast staff are confident that this model will support improved access to a broad range of services, facilitate integration of participant records, improve leveraging of insurance funding, enhance the quality of services, and support common quality documentation standards. In short, Suncoast Center expects that this model will enable more families to be served as well as each family being served better than before.

Summary of Overall Impressions

A portion of the first day of the site visit was devoted to providing the JWB monitoring team with a presentation and in-depth explanation of each step in the merger and consolidation process undertaken by Suncoast Center. The changes highlighted included: moving from paper to electronic medical files, changing the conventional treatment plan to a Goal Attainment Scale (GAS) oriented electronic treatment plan, conversion from the Service Activities Management Information System Information System (SAMIS) and the Suncoast Center's internal data base systems to the AVATAR data base system (this will replace SAMIS in fiscal year 2010-11), reorganization of agency leadership staff, development of agency-wide training plans for new data base system, construction of a centralized intake system, a new interconnect phone system, and development of new policies and procedures. The agency opted to merge all JWB funded programs mid-year in FY 2009-10. As a result, Suncoast Center's fiscal department was required to submit an over \$3 million dollar budget amendment, and had to enter every position in the agency into (SAMIS) position management module. Next year this single program, which has been named as Family Services, will wield a budget of over \$5 million dollars, which represents the total of the 9 former program expenses into one unified budget. Because of two mergers, the agency also took on responsibility for several new service sites including the relocation and re-employment (if possible) of the former staff members of Help-A-Child and Family Service Center. In addition, the administrative component of Suncoast Inc. has been relocated to the newer and better equipped building that was occupied by Help-A-Child, and is located in the Gateway complex in Pinellas Park. Suncoast Center, also relocated its Therapeutic Pre-school staff, into what was the Family Services Center facility on Roosevelt Road in Largo.

Suncoast Center was issued two disallowances this year as a result of an employee defrauding the agency and poor client support administration. Staff reported this fraud to agency leadership who, in turn, informed the local police, and JWB. The fraud resulted in the immediate termination of the employee and losses totaling about \$20,000 in missing funds, with about \$12,000 in JWB identified funds. Suncoast Center was required to return the funds to JWB. Suncoast Center also developed new fiscal procedures and internal safeguards to minimize the possibility of future misappropriation. These new policies have been embodied in the agency's formal Corrective Action Plan (CAP). This plan was submitted to JWB and approved in July 2010. The results of the team's review of the agency's CAP and its fiscal procedures are noted in the fiscal site visit report (see attachment 1).

The site visit review team noted the significant progress made to date in regard to Suncoast Center's transitional plan. Team members also noted the ease of use and the broad scope of application offered by the agency's new Avatar electronic file and data system. Team members were given the opportunity to test Avatar themselves and found it to be user friendly. The team was also encouraged to learn that each electronic case note will include the goals and the anchor points of the Goal Attainment Scale, so that the therapists can continually be mindful of the participant goals and focus their treatment strategies toward meeting them.

Significant Accomplishments

Last year the agency merged with Help-A-Child Inc. on December 1, 2009. Then, in March of 2010, the agency also merged with Family Service Centers. As previously stated, Suncoast then consolidated its entire portfolio of programs (from both its current programs and the newly merged programs) into a single program with a comprehensive array of services, reorganized staff and service sites, purchased a new phone system, and a new data base and electronic file system (Avatar). In January of 2009, the agency was accredited by the nationally recognized Commission for the Accreditation of Rehabilitation Facilities (CARF), which also qualified the agency to be accredited via the JWB Agency Self-Study Efficacy Tool (A.S.S.E.T.); both accreditations are effective until January of 2012.

In collaboration with Coordinated Child Care (CCC), Suncoast Center agreed to assess the need for continued LIEF entitled child care for abuse/neglect cases closed by the Sheriff's protective services staff, but still deemed as possessing sufficient risk factors to benefit from a LIEF Entitled childcare slot which may enhance the safety of the child and family. A large portion of the child protective service investigator placements are also in the Family Services program even if they are not currently participating in programming as it is not required in order to receive child care.

Suncoast Center has also entered into a partnership with 2-1-1 Tampa Bay Cares for a rape crisis hotline and after hours coverage for the SAVE (Sexual Assault Victims Exams) and CARS (Child Abuse Recovery Services) programs. In addition, Suncoast Center is collaborating with PEMHS (Personal Enrichment through Mental Health Services, 2-1-1, CFBHN (Central Florida Behavioral Health Network) and CCC (Coordinated Child Care) and a consultation firm (MTM Services) to develop a plan to provide a single access to care model utilizing a standard assessment process and a single phone number to enhance Pinellas County's consumer access to care and services.

As previously mentioned, Suncoast Center implemented a sophisticated information technology system (Avatar) provided through Netsmart Technologies. Avatar is an electronic medical records system that has allowed Suncoast Center to integrate the data from the 3 merging agencies into one data collection system. All Suncoast services and programs are expected to be fully utilizing Avatar by December 2010. This client centered system provides many advanced features including the ability to export information to JWB and other funders to increase efficiency and eliminate dual data entry. It also facilitates the customization of data collection fields for demographics and measurable objectives, a sophisticated workflow system that provides notifications of changes and assistance with supervision, and a robust customizable reporting system. Beginning 2010-11 fiscal year, Suncoast Center will begin exporting demographic and measurable objective data directly from Avatar into the JWB data warehouse.

Summary of Compliance & Quality Findings

The team interviewed 15 staff (by telephone or face-to-face) who represented all nine of the former JWB funded programs. Many were former employees of the previously existing Help-a-Child and Family Services Center agencies. During the interviews, staff expressed a number of common ideas and issues. These included appreciation for Suncoast management and the high level of supervision and training that is offered to each therapist. However, staff members did express that more Avatar training is needed. Staff members impacted by the merger expressed satisfaction with their new duties and their new job location. Staff appeared pleased with the flexibility their positions offered. They stated that they felt like they were part of a team of dedicated and concerned workers. The mergers were not without some friction in that staff stated that they experienced a lot of stress during the transitions. Many staff members indicated that more wrap-around resources needed to be available to meet the demand for summer camps, child care, tutoring and transportation. TFS staff in particular were pleased that they could offer child care and wraparound services through their program and felt these services provided additional needed supports for families. A number of staff members also expressed the desire to serve participants longer than the three or six month program length. Staff members appeared satisfied with their inter-agency relationships, and TFS staff noted that their relationship with ERT improved significantly since the two programs started participating in regular joint meetings.

All therapeutic staff have received BEST training, have a master's degree, receive weekly or bi-weekly supervision, and most are licensed therapists. Since the mergers, staff members reported that they are continuing to work on integrating programs, data and phone systems, as well as policy and procedural manuals. One staff person indicated he didn't have access to SAMIS, and was advised by the review team to submit an access form to the JWB SAMIS Help Desk.

In addition the team interviewed nine (9) participants during the site review, and all spoke highly of the services they received and would recommend them to friends or family members. Most participants stated that staff went above and beyond their normal job duties to help them. Some interviewees also commented on how helpful

staff members were by assisting them with achieving their goals, by their punctuality, and by the convenient time and location of their services.

Although ERT staff members had positive reports about Suncoast Center services, the Pinellas County Sheriff's Child Protective Investigation Division (CPID) office reported difficulty in getting a live operator at Suncoast Center and reported that it sometimes takes up to a week for the Suncoast staff members to return calls. During the site visit, 55 files were randomly selected for review from the nine (9) former programs. Many files, across all programs, had incorrect closing dates, and several had wrong dates of birth, address, or social security number.

At the time of the review, all programs/services except the Allyn B. Giffin Medical Foster Care program (MFC), were utilizing Avatar to some extent. All files contained the required documentation. However, there were some cases that were missing annual medical update service component entries in SAMIS. It was also noted that if the biological parent rights were terminated, there were no GAS goals being tracked for either the parent (s) or the medical foster home where the child was placed. It will be recommended that this be corrected so that there are always current GAS goals established for either the biological parent or the foster parent. Overall, the agency's proficiency in utilizing the GAS system was generally good, with one program (Therapeutic Preschool) doing excellent GAS work, however, other service areas within the agency are not as adept with this tool and could still benefit from additional GAS training and follow-up file reviews. It should also be noted that, at the time of the site visit, Avatar had not yet been programmed to provide the GAS goals for each electronic case note, but this enhancement will be implemented within the near future.

The attached Site Visit Data Report (Attachment 1) indicates that the consolidated program exceeded all contracted service level (CSL) goals, measurable objectives (MO's) and manual measurable objectives (MMO) # 698 and #699 for fiscal year 2008-09. Data is still being collected and analyzed for MMO's #767, #768, for FY 2009-10, but the program again exceeded its CSL for FY 2009-10. The Family Services program has exceeded the number of participants expected to be served by all former programs. The program has a three year lapse history of less than two percent (2 %) each year, and an average cost per participant of \$708 for fiscal year 2008-09 and \$871 for fiscal year 2009-10.

Requirements – Programmatic

1. It is recommended that the agency develop internal procedures to randomly select files and use the client participant detail report in SAMIS/Avatar, and/or peer review to ensure accurate demographic data (such as the date of birth, social security), and the closing dates for each participant are accurately entered in SAMIS/Avatar.
2. It is recommended that the program proceed with its pursuit of a revamped intake process designed to improve access to consumers and provider agencies. In addition, it is recommended that during normal hours the agency's intake process provides for a "live" person to respond to consumers and referring agencies that are calling to seek services.
3. It is recommended that the Medical Foster Care files be reviewed to assure that the annual Medical updates are entered into SAMIS/Avatar, and that there is always a current (annual) GAS goal established for whomever has legal or temporary custody of the child (a parent, foster parent, legal guardian, etc.).
4. It is recommended that the agency continue to provide agency-wide GAS training to help assure that SMART goals, GAS objectives, GAS anchor points, and the action steps are all used in accordance with GAS protocols and programming best practices.
5. It is recommended that C-Gas scores also be reflected in each case note, if applicable.

Requirements – Fiscal

A fiscal review was conducted by Junko Lescinski, JWB Fiscal Analyst, on September 3, 2010 (see attachment 1). A summary of her recommendations is as follows:

1. The agency now has a policy and a Corrective Action Plan (CAP) which mandates that a log sheet will be used to account for all bus passes to each individual. To avoid any future disallowances, the agency should continue to adhere to its own policy and procedures and continue to implement its CAP. In addition, the accounting department should not issue another check to purchase bus passes before the log sheet for the previous check has been completed.
2. Client information should be included in all check requests when requesting payments on behalf of the client.
3. The agency should continue to pursue BEST training for licensed clinicians as it becomes available. It is anticipated that JWB will offer this specific training in March of 2011.

Standard	Fully Meets	Partially Meets	Needs Improvement	Comment
Contract General Conditions & Special Conditions (5 indicators)	X			
Program Methodology (12 indicators)	X			
Contract Service Levels, Measurable objectives, & Other Deliverables (7 indicators)	X			
Program Staff and/or Volunteer Management (12 indicators)	X			
Data Collection & Reporting (11 indicators)		X		
Program Management (11 indicators)	X			
Administrative Standards (6 indicators)	X			

Fully Meets = Program met every indicator

Partially Meets = Program received a partial rating in one or more of the indicators

Needs Improvement = Program received a needs improvement in one or more of the indicators

Issues and Procedures

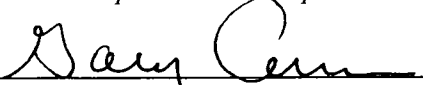
- Previous A.S.S.E.T. and Compliance Reviews were discussed with agency/program staff.
- Previous review requirements were successfully implemented.
- An exit conference was conducted with agency and program staff.
- Performance information as reported in SAMIS and/or manually by the Service Provider verified.
- Fiscal and personnel file review report and supporting documents completed.
- Record review form completed (Participant files, group activity, volunteer files).
- Interview forms completed.
- Report cover letter is attached.
- Prescriptive training needs, if any, discussed with program and JWB Training Department staff.
- Program continues to be in alignment with JWB strategic plan.
- No changes in program methodology are recommended at this time.
- No changes in contracted services levels are recommended at this time.
- No changes in measurable objectives are recommended at this time.

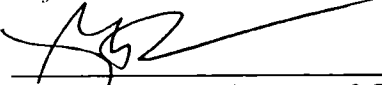
Please explain any issue/procedure not checked above:

The program still had issues with some files that were not closed in accordance with SAMIS and some files that had demographic data that was incorrect or not matching up SAMIS data.

Overall Rating

- Program is in full compliance.
- Program is in partial compliance (level 1) and is able to complete correction without further assistance or requires prescriptive training and technical assistance.
- Program is experiencing compliance infractions of a more severe nature (level 2). Provider must demonstrate compliance within six months. Prescriptive training, technical assistance, and more frequent monitoring will be conducted.
- Program is required to implement a corrective action plan (level 3).
**Program is already on a fiscal Corrective Action Plan (CAP), due to employee fraud, which was discovered and immediately acted upon by the agency. The disallowances cited during this site visit occurred prior to the implementation date of the CAP.*


 Gary Cernan
 Senior Contract Manager Signature


 Lisa Sahulka, Director of Contract Management, Finance,
 and Research

JWB FISCAL SITE VISIT SUMMARY REPORT

AGENCY & PROGRAM: Suncoast Center Inc. (Childnet, Children's Outpatient, Family Services, Intensive Family Services, Safe Start Partnership, and Therapeutic Preschool)

Reviewer: Junko Lescinski

Date of Review: 9/3/10 and 9/10/10

Interviewee(s): Tim Hudson, Karen Mozgai-Weiskopf, Serena Barnes, and Gyda DePeppe

STATEMENT OF OBJECTIVE:

Perform procedures to determine the validity of reimbursement requests. Review HR practices and determine if they are in compliance with the agency's policies and procedures as well as JWB policies and procedures.

STATEMENT OF SCOPE:

The review period covered was 1/23/09 through 8/31/10. We obtained source documentation from the *Finance and HR Department*. We used original records, copies and electronic media as evidence and verified through physical examination.

STATEMENT OF METHODOLOGY:

We selected a sample of 115 reimbursement request line items from a total population size of 4,257. The percentage tested was 3%.

SITE VISIT CONCLUSIONS:

Based on the test work performed and the site visit findings noted below, we concluded the following:

1. Reimbursements and payroll are processed in accordance with agency policies and procedures.
2. Reimbursements are appropriate and allowable as to account and fiscal year except for the item listed in the section.
3. Payroll records were reviewed to ensure appropriate employee was paid and amount paid was correct.
4. Personnel files contain required documentation according to agency policy and procedures.
5. Accounting & Personnel policies and procedures manuals are up-to-date
6. Bank Statements are reconciled on time.

WP 100
QA 10/6/10

7. Agency retains financial records and participants records as required in the Contract General Conditions of Agreement # 2.
8. No duplicate request was made for reimbursement.
9. A peer review was performed on the agency's auditor.

SITE VISIT FINDINGS:

Check 2403 - \$3,300 (WP 302) - We were unable to account for 54 bus passes. \$2,970 was disallowed (WP 303).

Check 3567 - \$3,300 (WP 302) - We were unable to account for 54 bus passes. \$2,970 was disallowed (WP 304).

Check 4292 - \$3,300 (WP 302) - We were unable to account for 53 bus passes. \$2,915 was disallowed (WP 305).

Check 4904 - \$3,300 (WP 302) - We were unable to account for 35 bus passes. \$1,925 was disallowed (WP 306).

Check 6775 - \$240 (WP 302) - We were unable to account for 2 bus passes. \$8 was disallowed (WP 307).

Check 7313 - \$240 (WP 302) - We were unable to account for 9 bus passes. \$36 was disallowed (WP 308).


Check 3423 - \$698 (WP 302) - This check was issued to the landlord to pay for a participant's rent. We could not identify who the participant was from the back up documentation attached (WP 309). The case manager could not remember who it was for either. JWB portion, \$555.24 was disallowed.

Total disallowed amount **\$11,379.24.**

SITE VISIT RECOMMENDATIONS:

1. The agency has a policy and procedure to keep a log sheet to account for bus passes. It should adhere to its own policy. The accounting department should not issue another check to purchase bus passes before the log sheet for the previous check has been completed.
2. Client information should be included in all check requests when requesting payments on behalf of the client.
3. Per JWB's general conditions of the agreement #18, anybody who directly works with youth (ages 11 to 17) is required to complete BEST training. BEST training for licensed clinicians will be available at JWB around March 2011.

WP 101
CA 10/1/10


Fiscal Analyst 10/12/10
Date

Symon Deane 10/12/10
Accountant Date

WP 102
92 10/6/10