

COMMONWEALTH OF KENTUCKY
DEPARTMENT OF JUVENILE JUSTICE
DIVISION OF PROGRAM SERVICES
EDUCATION BRANCH

**Contract Day Treatment Center
(Mercer County Day Treatment)**

Date	9/25/2018
Lead Monitor	Dr. Greg Finkbonner
Principal	Mr. Jaziel Guerra
Day Treatment Staff	Ms. Stacy Price
Office Address/Phone Number	530 Perryville St. Harrodsburg, KY 40330/859-733-7120

Entrance Meeting

Lead Monitor	Dr. Greg Finkbonner
Principal	Mr. Jaziel Guerra

Comments:

The meeting began at approximately 9:05 with Mr. Guerra and Dr. Finkbonner. The process for the Medicaid Monitoring visit was discussed. This would include; eight Individual Client Records (ICR) needed for review, a copy of the Monthly Medicaid Report (MMR), the Standard Operating Procedures (SOP), staff surveys to collect, youth surveys to gather, and to meet with the counselor. This is the first year for Mr. Guerra and this process is new to him. However, he did update much of the SOP's.

Part I
Individual Client Record (ICR)

Youth Initials JT Counselor Stacy Price Age 13 DOA 8/8/18 DOR OPEN Legal Status: Court Ordered
Case 1

Standard	Indicator	Findings
Admissions 3. Date <u>8/8/18</u>	1. School Records/Infinite Campus 2. Verification of Rights 3. Orientation (ITP) completed within 1 week of admission 4. Grievance Procedure reviewed and signed by all parties 5. Orientation/Admission Packet reviewed and signed by all parties 6. Copy of PDI and or Court ordered Conditions <input checked="" type="checkbox"/> N/A 7. Substance abuse records and procedures followed <input checked="" type="checkbox"/> N/A 8. Mental Health Records and procedures followed <input checked="" type="checkbox"/> N/A	<u>8</u> of 8
Assessments Completed Prior to ITP	1. Academic Assessments 2. Career Scope 3. Learning Styles Inventory 4. Psycho-Social/Social History	<u>4</u> of 4
Weekly	1. Treatment Team Summaries (weekly) 2. Individual Counseling documented 1x per week (dates, content and participation) 3. Group Counseling documented 2x per week (dates, content and participation) 4. Documentation of contact with family 5. Documentation of contact with collateral contacts 6. Treatment team meets bi-weekly and documented (will document in file) 7. Staff signatures are on weekly treatment team/progress summaries 8. All content areas are completed	<u>8</u> of 8
ITP	1. ITP conference held within 14 days Date <u>8/22/18</u> 2. Tasks/Interventions are aligned with goals 3. Aftercare/Transition Plan is initiated 4. Signed by a Qualified Mental Health Professional (QMHP) <u>Yes</u> 5. ITP date corresponds with date on MMR report <u>Yes</u> 6. All content areas are completed	<u>6</u> of 6
Reviews 1. _____ 2. _____ 3. _____ 4. _____ 5. _____	1. 60 Day review completed within time frame and complete documentation. <u>n/a</u> 2. Parents/Guardians received notification for ITP and reviews 3. 120 Day review completed within time frame and complete documentation <input checked="" type="checkbox"/> N/A _____ 4. 180 Day review completed within time frame and complete documentation- review of ITP, re-signatures of all parties and QMHP <input checked="" type="checkbox"/> N/A _____ 5. 180 Day Review date corresponds with date on MMR report <input checked="" type="checkbox"/> N/A	<u>5</u> of 5
Aftercare/Transition Plan	1. Completed 30 days prior to transition or discharge Date _____ <input checked="" type="checkbox"/> N/A _____	<u>1</u> of 1
Comments: <u>32</u> of 32 <i>No evidence of treatment team signing off on each individual student; however, the team does meet each week and signs a form with multiple students listed. The counselor will have team sign off on the individual student form to be kept in the ICR.</i>		

Youth Initials ZL Counselor Stacy Price Age 17 DOA 8/2/18 DOR Open Legal Status Probated DJJ
Case 2

Standard	Indicator	Findings
Admissions 8/2/18	1. School Records/Infinite Campus 2. Verification of Rights 3. Orientation ITP completed within 1 week of admission date 8/2/18 4. Grievance Procedure reviewed and signed by all parties 5. Orientation/Admission Packet reviewed and signed by all parties 6. Copy of PDI and or Court ordered Conditions <input checked="" type="checkbox"/> N/A 7. Substance abuse records and procedures followed <input checked="" type="checkbox"/> N/A 8. Mental Health Records and procedures followed <input checked="" type="checkbox"/> N/A	<u>8</u> of 8
Assessments Completed Prior to ITP	1. Academic Assessments 2. Career Scope 3. Learning Styles Inventory 4. Psycho-Social/Social History	<u>4</u> of 4
Weekly	1. Treatment Team Summaries (weekly) 2. Individual Counseling documented 1x per week (dates, content and participation) 3. Group Counseling documented 2x per week (dates, content and participation) 4. Documentation of contact with family 5. Documentation of contact with collateral contacts 6. Treatment team meets bi-weekly and documented 7. Staff signatures are on weekly treatment team/progress summaries 8. All content areas are completed	<u>8</u> of 8
ITP	1. ITP conference held within 14 days <u>8/2/18</u> 2. Tasks/Interventions are aligned with goals 3. Aftercare/Transition Plan is initiated 4. Signed by a Qualified Mental Health Professional (QMHP) <u>Yes</u> 5. ITP date corresponds with date on MMR report <u>Yes</u> 6. All content areas are completed	<u>6</u> of 6
Reviews 1. _____ 2. _____ 3. _____ 4. _____ 5. _____	1. 60 Day review completed within time frame and complete documentation <u>n/a</u> 2. Parents/Guardians received notification for ITP and reviews 3. 120 Day review completed within time frame and complete documentation <input checked="" type="checkbox"/> N/A 4. 180 Day review completed within time frame and complete documentation- review of ITP, re-signatures of all parties and QMHP <input checked="" type="checkbox"/> N/A 5. 180 Day Review date corresponds with date on MMR report <input checked="" type="checkbox"/> N/A	<u>5</u> of 5
Aftercare Plan	1. Completed 30 days prior to transition or discharge <input checked="" type="checkbox"/> N/A	<u>1</u> of 1
Comments: <u>32</u> of 32 <i>No evidence of treatment team signing off on each individual student; however, the team does meet each week and signs a form with multiple students listed. The counselor will have team sign off on the individual student form to be kept in the ICR.</i>		

Youth Initials KF **Counselor** Stacy Price **Age** 15 **DOA** 8/8/18 **DOR** Open **Legal Status:** Board Ordered
Case 3

Standard	Indicator	Findings
Admissions	1. School Records/Infinite Campus 2. Verification of Rights 3. Orientation ITP completed within 1 week of admission <u>3/6/18 (student attended previously)</u> 4. Grievance Procedure reviewed and signed by all parties 5. Orientation/Admission Packet reviewed and signed by all parties 6. Copy of PDI and or Court ordered Conditions <input checked="" type="checkbox"/> N/A 7. Substance abuse records and procedures followed <input checked="" type="checkbox"/> N/A 8. Mental Health Records and procedures followed <input checked="" type="checkbox"/> N/A	8 of 8
Assessments Completed Prior to ITP	1. Academic Assessments 2. Career Scope 3. Learning Styles Inventory 4. Psycho-Social/Social History	4 of 4
Weekly	1. Treatment Team Summaries (weekly) 2. Individual Counseling documented 1x per week (dates, content and participation) 3. Group Counseling documented 2x per week (dates, content and participation) Dates are there but no other notes 4. Documentation of contact with family 5. Documentation of contact with collateral contacts 6. Treatment team meets bi-weekly and documented 7. Staff signatures are on weekly treatment team/progress summaries 8. All content areas are completed	8 of 8
ITP	1. ITP conference held within 14 days <u>3/29/18 (Student attended previously)</u> 2. Tasks/Interventions are aligned with goals 3. Aftercare/Transition Plan is initiated 4. Signed by a Qualified Mental Health Professional (QMHP) <u>Yes</u> 5. ITP date corresponds with date on MMR report <u>Yes</u> 6. All content areas are completed	6 of 6
Reviews 1. _____ 2. _____ 3. _____ 4. _____ 5. _____	1. 60 Day review completed within time frame and complete documentation <u>n/a</u> 2. Parents/Guardians received notification for ITP and reviews <u>n/a</u> 3. 120 Day review completed within time frame and complete documentation <input checked="" type="checkbox"/> N/A 4. 180 Day review completed within time frame and complete documentation- review of ITP, re-signatures of all parties and QMHP <input checked="" type="checkbox"/> N/A 5. 180 Day Review date corresponds with date on MMR report <input checked="" type="checkbox"/> N/A	5 of 5
Aftercare Plan	1. Completed 30 days prior to transition or discharge <input checked="" type="checkbox"/> N/A	1 of 1
Comments: 32 of 32 <i>No evidence of treatment team signing off on each individual student; however, the team does meet each week and signs a form with multiple students listed. The counselor will have team sign off on the individual student form to be kept in the ICR.</i>		

Youth Initials TS Counselor Stacy Price Age 14 DOA 8/8/18 DOR Open Legal Status: n/a
Case 4

Standard	Indicator	Findings
Admissions	1. School Records/Infinite Campus 2. Verification of Rights 3. Orientation ITP completed within 1 week of admission <u>8/7/18</u> 4. Grievance Procedure reviewed and signed by all parties 5. Orientation/Admission Packet reviewed and signed by all parties 6. Copy of PDI and or Court ordered Conditions <input checked="" type="checkbox"/> N/A 7. Substance abuse records and procedures followed <input checked="" type="checkbox"/> N/A 8. Mental Health Records and procedures followed <input checked="" type="checkbox"/> N/A	<u>8</u> of 8
Assessments Completed Prior to ITP	1. Academic Assessments 2. Career Scope 3. Learning Styles Inventory 4. Psycho-Social/Social History	<u>4</u> of 4
Weekly	1. Treatment Team Summaries (weekly) 2. Individual Counseling documented 1x per week (dates, content and participation) 3. Group Counseling documented 2x per week (dates, content and participation) n/a 4. Documentation of contact with family 5. Documentation of contact with collateral contacts 6. Treatment team meets bi-weekly and documented 7. Staff signatures are on weekly treatment team/progress summaries 8. All content areas are completed	<u>8</u> of 8
ITP	1. ITP conference held within 14 days <u>8/22/18</u> 2. Tasks/Interventions are aligned with goals 3. Aftercare/Transition Plan is initiated 4. Signed by a Qualified Mental Health Professional (QMHP) <u>Yes</u> 5. ITP date corresponds with date on MMR report <u>Yes</u> 6. All content areas are completed	<u>6</u> of 6
Reviews 1. _____ 2. _____ 3. _____ 4. _____ 5. _____	1. 60 Day review completed within time frame and complete documentation <u>n/a</u> 2. Parents/Guardians received notification for ITP and reviews 3. 120 Day review completed within time frame and complete documentation <input checked="" type="checkbox"/> N/A 4. 180 Day review completed within time frame and complete documentation- review of ITP, re-signatures of all parties and QMHP <input checked="" type="checkbox"/> N/A 5. 180 Day Review date corresponds with date on MMR report <input checked="" type="checkbox"/> N/A	<u>5</u> of 5
Aftercare Plan	1. Completed 30 days prior to transition or discharge <input checked="" type="checkbox"/> N/A	<u>1</u> of 1
Comments: <u>32</u> of 32 <i>No evidence of treatment team signing off on each individual student; however, the team does meet each week and signs a form with multiple students listed. The counselor will have team sign off on the individual student form to be kept in the ICR.</i>		

Youth Initials CS Counselor Stacy Price Age 17 DOA 8/9/18 DOR Open Legal Status: Court Ordered
Case 5

Standard	Indicator	Findings
Admissions	1. School Records/Infinite Campus 2. Verification of Rights 3. Orientation ITP completed within 1 week of admission <u>8/9/18</u> 4. Grievance Procedure reviewed and signed by all parties 5. Orientation/Admission Packet reviewed and signed by all parties 6. Copy of PDI and or Court ordered Conditions <input checked="" type="checkbox"/> N/A 7. Substance abuse records and procedures followed <input checked="" type="checkbox"/> N/A 8. Mental Health Records and procedures followed <input checked="" type="checkbox"/> N/A	<u>8</u> of 8
Assessments Completed Prior to ITP	1. Academic Assessments 2. Career Scope 3. Learning Styles Inventory 4. Psycho-Social/Social History	<u>4</u> of 4
Weekly	1. Treatment Team Summaries (weekly) 2. Individual Counseling documented 1x per week (dates, content and participation) 3. Group Counseling documented 2x per week (dates, content and participation) 4. Documentation of contact with family 5. Documentation of contact with collateral contacts 6. Treatment team meets bi-weekly and documented 7. Staff signatures are on weekly treatment team/progress summaries 8. All content areas are completed	<u>8</u> of 8
ITP	1. ITP conference held within 14 days <u>8/23/18</u> 2. Tasks/Interventions are aligned with goals 3. Aftercare/Transition Plan is initiated 4. Signed by a Qualified Mental Health Professional (QMHP) Yes 5. ITP date corresponds with date on MMR report <u>Yes</u> 6. All content areas are completed	<u>6</u> of 6
Reviews 1. _____ 2. _____ 3. _____ 4. _____ 5. _____	1. 60 Day review completed within time frame and complete documentation <u>n/a</u> 2. Parents/Guardians received notification for ITP and reviews 3. 120 Day review completed within time frame and complete documentation <input checked="" type="checkbox"/> N/A 4. 180 Day review completed within time frame and complete documentation- review of ITP, re-signatures of all parties and QMHP <input checked="" type="checkbox"/> N/A 5. 180 Day Review date corresponds with date on MMR report <input checked="" type="checkbox"/> N/A	<u>5</u> of 5
Aftercare Plan	1. Completed 30 days prior to transition or discharge <input checked="" type="checkbox"/> N/A	<u>1</u> of 1
Comments: <u>33</u> of 32 <i>No evidence of treatment team signing off on each individual student; however, the team does meet each week and signs a form with multiple students listed. The counselor will have team sign off on the individual student form to be kept in the ICR.</i>		

Youth Initials IB Counselor Stacy Price Age 14 DOA 8/8/18 DOR Open Legal Status: N/A
Case 6

Standard	Indicator	Findings
Admissions	1. School Records/Infinite Campus 2. Verification of Rights 3. Orientation ITP completed within 1 week of admission <u>8/2/18</u> 4. Grievance Procedure reviewed and signed by all parties 5. Orientation/Admission Packet reviewed and signed by all parties 6. Copy of PDI and or Court ordered Conditions <input checked="" type="checkbox"/> N/A yes 7. Substance abuse records and procedures followed <input checked="" type="checkbox"/> N/A yes 8. Mental Health Records and procedures followed <input type="checkbox"/> N/A	<u>8</u> of 8
Assessments Completed Prior to ITP	1. Academic Assessments 2. Career Scope 3. Learning Styles Inventory 4. Psycho-Social/Social History	<u>4</u> of 4
Weekly	1. Treatment Team Summaries (weekly) 2. Individual Counseling documented 1x per week (dates, content and participation) 3. Group Counseling documented 2x per week (dates, content and participation) n/a 4. Documentation of contact with family 5. Documentation of contact with collateral contacts 6. Treatment team meets bi-weekly and documented 7. Staff signatures are on weekly treatment team/progress summaries 8. All content areas are completed	<u>8</u> of 8
ITP	1. ITP conference held within 14 days <u>8/22/18</u> 2. Tasks/Interventions are aligned with goals 3. Aftercare/Transition Plan is initiated 4. Signed by a Qualified Mental Health Professional (QMHP) <u>Yes</u> 5. ITP date corresponds with date on MMR report Yes 6. All content areas are completed	<u>6</u> of 6
Reviews 1. <u>n/a</u> 2. _____ 3. _____ 4. _____ 5. _____	1. 60 Day review completed within time frame and complete documentation 2. Parents/Guardians received notification for ITP and reviews 3. 120 Day review completed within time frame and complete documentation <input checked="" type="checkbox"/> N/A 4. 180 Day review completed within time frame and complete documentation- review of ITP, re-signatures of all parties and QMHP <input checked="" type="checkbox"/> N/A 5. 180 Day Review date corresponds with date on MMR report <input checked="" type="checkbox"/> N/A	<u>5</u> of 5
Aftercare Plan	1. Completed 30 days prior to transition or discharge <input checked="" type="checkbox"/> N/A	<u>1</u> of 1
Comments: <u>32</u> of 32 <i>No evidence of treatment team signing off on each individual student; however, the team does meet each week and signs a form with multiple students listed. The counselor will have team sign off on the individual student form to be kept in the ICR.</i>		

Youth Initials DS Counselor Stacy Price Age 13 DOA 8/8/18 DOR Open Legal Status: Court Ordered
Case 7

Standard	Indicator	Findings
Admissions	1. School Records/Infinite Campus 2. Verification of Rights 3. Orientation ITP completed within 1 week of admission <u>8/3/18</u> 4. Grievance Procedure reviewed and signed by all parties 5. Orientation/Admission Packet reviewed and signed by all parties 6. Copy of PDI and or Court ordered Conditions <input checked="" type="checkbox"/> N/A 7. Substance abuse records and procedures followed <input checked="" type="checkbox"/> N/A 8. Mental Health Records and procedures followed <input checked="" type="checkbox"/> N/A	<u>8</u> of 8
Assessments Completed Prior to ITP	1. Academic Assessments 2. Career Scope 3. Learning Styles Inventory 4. Psycho-Social/Social History	<u>4</u> of 4
Weekly	1. Treatment Team Summaries (weekly) 2. Individual Counseling documented 1x per week (dates, content and participation) 3. Group Counseling documented 2x per week (dates, content and participation) 4. Documentation of contact with family 5. Documentation of contact with collateral contacts 6. Treatment team meets bi-weekly and documented 7. Staff signatures are on weekly treatment team/progress summaries 8. All content areas are completed	<u>8</u> of 8
ITP	1. ITP conference held within 14 days <u>8/22/18</u> 2. Tasks/Interventions are aligned with goals 3. Aftercare/Transition Plan is initiated 4. Signed by a Qualified Mental Health Professional (QMHP) <u>Yes</u> 5. ITP date corresponds with date on MMR report <u>Yes</u> 6. All content areas are completed	<u>6</u> of 6
Reviews 1. _____ 2. _____ 3. _____ 4. _____ 5. _____	1. 60 Day review completed within time frame and complete documentation 2. Parents/Guardians received notification for ITP and reviews 3. 120 Day review completed within time frame and complete documentation <input checked="" type="checkbox"/> N/A 4. 180 Day review completed within time frame and complete documentation- review of ITP, re-signatures of all parties and QMHP <input checked="" type="checkbox"/> N/A 5. 180 Day Review date corresponds with date on MMR report <input checked="" type="checkbox"/> N/A	<u>5</u> of 5
Aftercare Plan	1. Completed 30 days prior to transition or discharge <input checked="" type="checkbox"/> N/A	<u>1</u> of 1
Comments: <u>32</u> of 32 <i>No evidence of treatment team signing off on each individual student; however, the team does meet each week and signs a form with multiple students listed. The counselor will have team sign off on the individual student form to be kept in the ICR.</i>		

Youth Initials AE Counselor Stacy Price Age 15 DOA 7/26/18 DOR 9/18/18 Legal Status: Court Ordered
Case 8

Standard	Indicator	Findings
Admissions	1. School Records/Infinite Campus 2. Verification of Rights 3. Orientation ITP completed within 1 week of admission <u>1/23/18</u> (first time) 4. Grievance Procedure reviewed and signed by all parties 5. Orientation/Admission Packet reviewed and signed by all parties 6. Copy of PDI and or Court ordered Conditions <input checked="" type="checkbox"/> N/A 7. Substance abuse records and procedures followed <input checked="" type="checkbox"/> N/A 8. Mental Health Records and procedures followed <input checked="" type="checkbox"/> N/A	<u>8</u> of 8
Assessments Completed Prior to ITP	1. Academic Assessments 2. Career Scope 3. Learning Styles Inventory (not included) 4. Psycho-Social/Social History	<u>3</u> of 4
Weekly	1. Treatment Team Summaries (weekly) 2. Individual Counseling documented 1x per week (dates, content and participation) 3. Group Counseling documented 2x per week (dates, content and participation) 4. Documentation of contact with family 5. Documentation of contact with collateral contacts 6. Treatment team meets bi-weekly and documented 7. Staff signatures are on weekly treatment team/progress summaries 8. All content areas are completed	<u>8</u> of 8
ITP	1. ITP conference held within 14 days <u>8/9//18</u> 2. Tasks/Interventions are aligned with goals 3. Aftercare/Transition Plan is initiated 4. Signed by a Qualified Mental Health Professional (QMHP) <u>Yes</u> 5. ITP date corresponds with date on MMR report <u>Yes</u> 6. All content areas are completed	<u>6</u> of 6
Reviews 1. _____ 2. _____ 3. _____ 4. _____ 5. _____	1. 60 Day review completed within time frame and complete documentation <u>n/a</u> 2. Parents/Guardians received notification for ITP and reviews 3. 120 Day review completed within time frame and complete documentation <input checked="" type="checkbox"/> <u>N/A</u> 4. 180 Day review completed within time frame and complete documentation- review of ITP, re-signatures of all parties and QMHP <input checked="" type="checkbox"/> <u>N/A</u> 5. 180 Day Review date corresponds with date on MMR report <input checked="" type="checkbox"/> <u>N/A</u>	<u>5</u> of 5
Aftercare Plan	1. Completed 30 days prior to transition or discharge <input checked="" type="checkbox"/> <u>N/A</u> left before end of transition	<u>1</u> of 1
Comments: <i>The Learning Styles Inventory was missing from this ICR.</i> <i>No evidence of treatment team signing off on each individual student; however, the team does meet each week and signs a form with multiple students listed. The counselor will have team sign off on the individual student form to be kept in the ICR.</i>		<u>31</u> of 32

Part II Standards		
Standard	Indicators	Findings
Standard 1.01: Program staff and referral sources are made aware of the day treatment's mission and philosophy consistent with the program's procedures manual.	<ul style="list-style-type: none"> Review documentation that program procedures are followed. 	<u>1</u> of 1
Standard 1.02: Referral sources are provided a copy of the referral procedures consistent with the program's procedures manual.	<ul style="list-style-type: none"> Review documentation that program procedures are followed. 	<u>1</u> of 1
Standard 1.03: Referral sources are notified of a youth's admission status consistent with the program's procedures manual.	<ul style="list-style-type: none"> Review documentation that program procedures are followed. 	<u>1</u> of 1
Standard 1.04: The admission process is consistent with the program's procedures manual.	<ul style="list-style-type: none"> Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 1.05: Family/guardian/custodian involvement is consistent with the program's procedures manual.	<ul style="list-style-type: none"> Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 2.01: The day treatment has an established assessment process for all youth admitted to the program.	<ul style="list-style-type: none"> Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 3.01: The program has a multi-disciplinary treatment team that is consistent with the program's procedures manual.	<ul style="list-style-type: none"> Review documentation that program procedures are followed Treatment team members are notified of schedule Treatment team schedule is followed 	<u>3</u> of 3
Standard 3.02: The day treatment has a process to address the needs of youth identified with mental health or substance abuse issues.	<ul style="list-style-type: none"> Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 4.01: The behavior management system shall include behavior interventions, consequences, rewards, and alternatives to suspension and expulsion.	<ul style="list-style-type: none"> Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 4.02: Use of physical restraint/management is consistent with the program's procedures manual.	<ul style="list-style-type: none"> Review documentation that program procedures are followed Review STI Discipline Report or Special Incident Summary for documentation concerning the use of physical restraint/management of a youth 	<u>2</u> of 2

Standard 5.01: The day treatment has an established process to consistently supervise the youth.	<ul style="list-style-type: none"> Review documentation that program procedures are followed Review staff assignment/daily supervision schedule 	<u>2</u> of 2
Standard 5.02: The day treatment has a process to conduct searches of youth and visitors for contraband.	<ul style="list-style-type: none"> Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 5.03: The day treatment has a process to assure that program and staff keys are accounted for at all times.	<ul style="list-style-type: none"> Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 5.04: The day treatment has a process to assure that all tools, sharps, toxics and flammables are properly stored when not in use.	<ul style="list-style-type: none"> Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 6.01: All instances of alleged abuse within the program are reported consistent with Kentucky Revised Statutes and program procedures.	<ul style="list-style-type: none"> Review documentation that program procedures are followed Review documentation of allegations of abuse reported to have occurred within the program Review notification to DJJ of allegations of abuse 	<u>3</u> of 3
Standard 6.02: The day treatment will have a process to report to DJJ all requests by the media for information and/or coverage of the day treatment, its personnel or youth actively enrolled in the program.	<ul style="list-style-type: none"> Review documentation that program procedures are followed Review documentation of media requests Review immediate notification to DJJ 	<u>3</u> of 3
Standard 6.03: The day treatment has a process for documenting special incidents and compiling a year to date listing/description of these special incidents.	<ul style="list-style-type: none"> Review documentation that program procedures are followed Review documentation of compiled year-to-date listing and description of special incidents, (STI discipline reports, incident report summary, etc) <p>No indicators of report.</p>	<u>1</u> of 2
Standard 7.01: Training of new employees is consistent with program procedures.	<ul style="list-style-type: none"> Review documentation of training for new employees 	<u>1</u> of 1
Standard 7.02: The day treatment develops a yearly training plan for each staff that is consistent with program procedures.	<ul style="list-style-type: none"> Review documentation that program procedures are followed Review documentation of yearly training plans for staff members 	<u>2</u> of 2
Standard 8.01: The program has standard operating procedures that are reviewed annually by the Program Director and staff, updated as needed and made available to all staff and volunteers.	<ul style="list-style-type: none"> Review documentation that staff are aware of, and will adhere to, the program's procedures Review documentation that staff is made aware of revisions of program procedures 	<u>2</u> of 2

Standard 8.02: Staff meetings are held consistent with the program procedures.	<ul style="list-style-type: none"> • Review documentation of monthly staff meetings • Review that organizational chart is current and reflects lines of supervision • Review documentation of staff attendance • Review documentation of discussion • Review that staff meetings are held monthly 	<u>5</u> of 5
Standard 8.03: The Monthly Medicaid Report (MMR) is submitted by the 5 th of each month, is complete, current and accurate.	<ul style="list-style-type: none"> • Review documentation that program procedures are followed • Review dates when MMR was received and accuracy of information 	<u>2</u> of 2
Standard 8.04: The youth treatment files are uniformly compiled, kept in a secure location and audited internally.	<ul style="list-style-type: none"> • Review documentation that program procedures are followed • Review ICR checklist for uniformity of files • Review documentation of file audits consistent with program procedures 	<u>3</u> of 3
Standard 8.05: The staff conducts themselves in a professional manner consistent with the program's procedures.	<ul style="list-style-type: none"> • Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 8.06: The day treatment has established a process that addresses youth attendance.	<ul style="list-style-type: none"> • Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 8.07: The day treatment has a referral process that enables the program to operate at capacity.	<ul style="list-style-type: none"> • Review of documentation that the referral process is followed consistent with program procedures • Review of MMR 	<u>2</u> of 2
Standard 8.08: The day treatment has a process to promote the use of community resources	<ul style="list-style-type: none"> • Review documentation that program procedures are followed • Review of documentation of community resources utilized 	<u>2</u> of 2
Standard 8.09: The day treatment has a process to assure adequate housekeeping and maintenance of the program	<ul style="list-style-type: none"> • Review documentation that program procedures are followed 	<u>1</u> of 1
Standard 9.01: Day Treatment procedures are the same as those submitted to DJJ.	<ul style="list-style-type: none"> • Review documentation that program procedures are followed 	<u>1</u> of 1
Comments:		<u>46</u> of 47

Part III
Score Part V
Exit Conference

Part I-Individual Client Record (ICR)

8 ICR records were reviewed = 256 possible points

255 of 256 were Complete

Part II- Standards

Standards were reviewed = 47 Points Possible

46 of 47 were Complete

The overall score is based on the average percentage correct. Eight (8) files from each program will be monitored

301 of 303 were correct

99 is the final percentage score

PART IV Surveys

Youth: Eight (8) students were surveyed using a five-point Likert scale and the results are as follows: The overall rating of the youth surveys was very good with a score of 3.8 out of 5, with 3 being good, and 4 being very good! There were two areas with the highest score ratings of 4.9 and the themes that appeared to score at the top are around students being very well aware of their individual treatment plan and that they were involved in creating the plan.

The areas with lowest score rating, but still good is; question 20: I go to group counseling sessions two times a week.

There was one comment left by a student that indicated that he/she liked the activities and wanted to do more.

Staff: Five (5) staff completed the staff surveys. All surveys consistently responded yes to almost all questions. Only one answered “no” to question 30: “Do youth have unrestricted access to report allegations of abuse?” and question 27: “Does most staff implement consequences consistently?” The staff who took the surveys answered favorably towards the Day Treatment Center. No comments were left.

<p>Part V Exit Conference</p>

Lead Monitor	Dr. Greg Finkbonner	Title:	Executive Staff Advisor
Principal	Mr. Jaziel Guerra	Title:	Program Administrator
Counselor	Ms. Stacy Price	Title:	School Counselor

Comments/Recommendations:

The Mercer County Day Treatment is an excellent program with many strengths. The program offers individualized instruction that addresses students' unique learning styles and provides credit recovery through APEX, a computerized online learning system.

The staff are committed to providing the students the education and treatment that is needed. From the surveys, staff indicate that they are very satisfied with the program. The results are positive, and there are no areas of concern.

By the indication from surveys, students are very satisfied with the program as well and have a clear idea of their Individual Learning Plan and that they were involved in creating it. There was also an indication of satisfaction with the activities provided at the Day Treatment Program and wanting to do more.

As far as student files, they are in good order. The only documentation that is missing is one student learning styles inventory. Also, there is no evidence of treatment team signing off on each individual student; however, the team does meet each week and signs a form with multiple students listed. The counselor will have team sign off on the individual student form to be kept in the ICR.

Further discussions with the counselor indicated that there is a need for providing services for youth with impulse control issues. It is suggested to search for a curriculum in this area.

As far as the standards, there was only one area lacking, which was documenting special incidents and compiling a year to date listing/description of these special incidents.

Recommendations

- Treatment team will begin signing for each individual student on progress.
- Look for and consider curriculum on impulsive control for individual counseling.
- Ensure all students have completed a learning styles inventory.
- Provide documentation of a year-to-date listing/description of special incidents

These recommendations above are for program improvement. Technical assistance is offered to help meet the needs of the Owensboro Day Treatment. A follow up visit will be scheduled in the Spring of 2010.

Thank you!