



# Direct Service Provider Orientation and Training



# Agenda

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- ✓ Welcome!
- ✓ Onboarding
- ✓ Contract
- ✓ Referral Packet and Process
- ✓ Reporting
- ✓ Communication Expectations & Best Practices
- ✓ Quality Assurance, Improvement & Monitoring
- ✓ Performance Measures
- ✓ Other Best Practices & QA Initiatives





Welcomes  
You!



# AMKids Team Members



**Korah Skuce  
(Regional  
Director)**



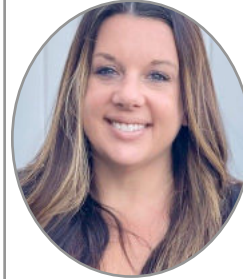
**Jaclyn Scott  
(Program  
Director)**



**Ernest  
Madison  
(Eastern  
Regional  
Service  
Manager)**



**Betty Dixon  
(Western  
Regional  
Service  
Manager)**



**Kristi  
Raymond  
(Southern  
Regional  
Service  
Manager)**



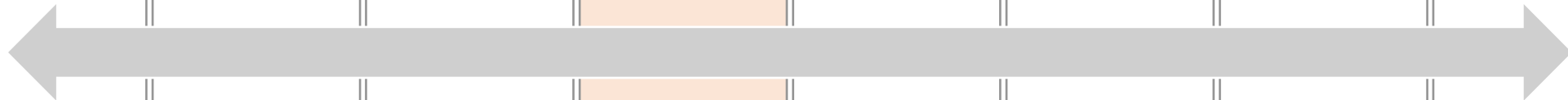
**Christie  
Runski  
(Billing and  
Business  
Manager)**



**Allicia  
Gnolfo  
(Data Entry  
Records  
Specialist)**



**Autumn  
Moss  
(Compliance  
Manager)**



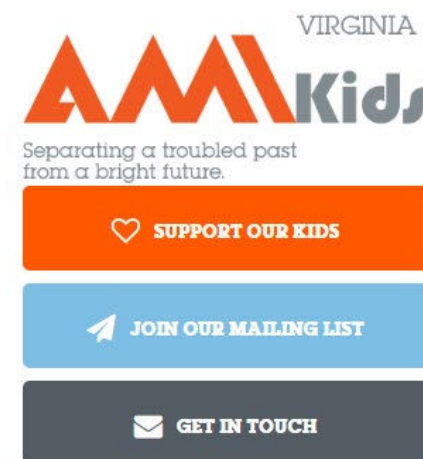
# www.amikidsvirginia.org



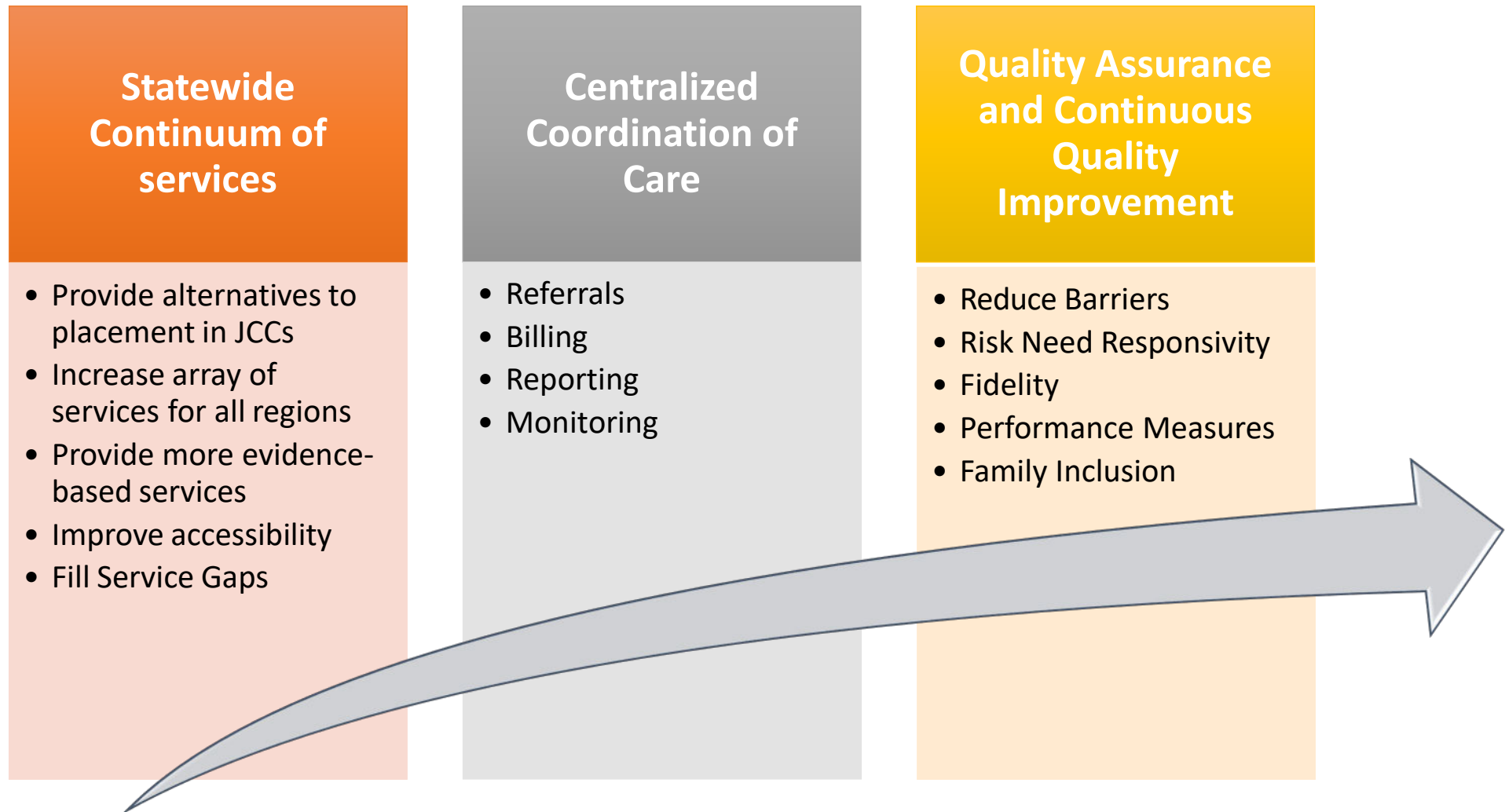
**Link to Documents for Virginia DJJ Staff**

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**Link to Documents for Virginia Service Providers**



# Overview of RSC Model



# Onboarding



# Request for Qualifications

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**This outlines the RSC Background, Target Population, Elements of Service Continuum, and Scope of Services we are seeking. [www.amikids.org/rfq](http://www.amikids.org/rfq)**

**We ask for you to include in your qualifications/proposal:**

- Agency History and Qualifications
- Description of proposed Programs or Services, including curriculum or model utilized
- Staff Qualifications
- Agency Oversight and Quality Assurance methods
- Performance Outcomes
- Cost Presentation (if applicable)
- Service Area description
- Testing & Instruments for evaluations and assessments
- Residential Facility Information in applicable





# Initial Onboarding Checklist

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## Did you?

- ☐ Receive the Welcome Letter
- ☐ Complete online DSP informational sheet with list of agency contacts using link:  
<https://forms.office.com/r/CCJsYt81qb>
- ☐ Submit copies of staff licensures to [virginiaseservices@amikids.org](mailto:virginiaseservices@amikids.org)
- ☐ Ensure all staff sign the VDJJ confidentiality Statement and keep these on file
- ☐ Submit provider locality workbook with counties served for each contracted service
- ☐ Submit Logic model or schedule collaboration & training call
- ☒ Schedule billing call with AMIkids – Christie Runski
- ☐ Verify information correct on AMIkids Vendor Directory
- ☐ Have all team members view the YASI for DSPs training
- ☐ Schedule 1:1 call with RSM to share information about your program



# Contract



# Contract Highlights

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- **Reporting Requirements:** Page 3-4 - Evaluations, Monthly Summary Reports, Discharge Reports, Incident Reporting, DSP Agency Reports
- **Confidentiality** – pages 5 and 38 and Appendix F (electronic records, use of encryption, signed policy)
- **Service Descriptions-** Appendix A
- **Fee Schedule** - Appendix B
- **Performance Measures** - Appendix C
- **Insurance Requirements** - Appendix D General Terms, Page 28-29
- **Subcontracting** - page 31 in Appendix E Special Terms
- **Billing & Payment** page 32 in Appendix E Special Terms
- **Employee Background Checks** page 37 in Appendix E Special Terms





# Contract Documents

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Contract documents should remain current throughout the length of the contract. Please send updated agency licenses , staff licenses, SWaM certification, and Certificates of Insurance to [Virginiaservices@amikids.org](mailto:Virginiaservices@amikids.org), as they are renewed and updated.

Service rates are standardized and must align with other state agency funders. These are reviewed each year in June prior to new contract renewal. Please make sure any requests for changes are submitted timely and with justification.



# Referral Packet and Process



# Referral Packet

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- **UPDATED** Referral Form with Rationale
- Authorization Form
- BADGE Face Sheet
- Comprehensive Case Plan
- YASI Wheel & Mapping
- YASI Behavioral Analysis
- Social History
- Release Form
- ACE assessment
- Other Evaluations
- Court Orders
- Other Court Documents





# Updated Referral Form

## ASSESSMENT OF RISK, NEEDS, AND RESPONSIVITY

Date of Current YASI:  Overall Risk Level:

If the YASI is not completed, indicate the reason:

Dynamic Needs 6-Level:

Dynamic Protective Score:

YASI Priority Domain 1:

Domain 2:  Domain 3:

Indicate DSS Involvement:

Check areas of responsivity/barriers: ☒ Language (list here):

☒ Transportation ☒ Trauma History

Explain and elaborate areas of responsivity/barriers:

# Updated Referral Form

## OTHER REQUESTED SERVICES\*

*Use the links at the end of the form to see providers and services available in each region.*

Requested Start Date:  Requested Start Date Details:

If services are requested to begin prior to release, explain:

**Service Request 1)** Requested Sub-Category:

Requested Service:

Requested Dosage:  Requested Provider:

Target Need Area for Requested Service:

Provide detailed rationale and overarching goal(s) for the requested service:

# AMIkids Authorization Form

## AMIkids Service Authorization Form



*On behalf of Virginia Department of Juvenile Justice, the Regional Service Coordinator (RSC) AMIkids has approved funding for the following service(s) to your agency*

**Authorization Approved Date:** \_\_\_\_\_ **Target Date to Begin Services:** \_\_\_\_\_

### Approved Direct Service Provider

DSP: Choose an item  
DSP Phone Number: 0

DSP Contact Name: 0  
DSP E-mail: 0

### Youth Demographics

Youth Name: \_\_\_\_\_  
Youth Date of Birth: \_\_\_\_\_

Youth's DJJ #: \_\_\_\_\_

### Referring CSU or CAP Information

Name of Referring PO/CC: Choose an item  
Direct Care Referral: Choose an item  
County/City & CSU: Choose an item

E-mail of PO/CC: 0  
Phone of PO/CC: 0  
Status at Service Initiation: Choose an item

### Service Approved #1

Service Name: Choose an item  
Length of Authorization: \_\_\_\_\_ Days  
Units Approved and Unit Type: \_\_\_\_\_ Choose an item  
Service Frequency: \_\_\_\_\_

Billing Abbreviated Name: 0

← *this is consecutive days from the service start date, it can't be interrupted*

Rate per Unit: \_\_\_\_\_

### Additional Comments:



# Authorization Form Sample

<b>Extended Service Approved #1</b>		<input type="checkbox"/>	<b>Approved Date:</b>	<b>12/15/2020</b>
Service Name: Residential Group Home		Billing Abbreviated Name: GH		
Initial Start Date of Service: 9/1/2020		Previous Auth Expiration Date: 12/30/2020		
Extension Type: Extension from previous end date		Gap in Services Authorized: 0 Days		
Monthly Summary Reports received and reviewed: Yes		This extension was PO requested: Yes		
Length of Extension: 30 Days		New Auth Expiration Date based on this Extension: 1/29/2021		
Additional Units Approved and Unit Type: 30 Days		Rate per Unit: \$350		
Service Frequency:				

**Additional Comments:**

<b>Extended Service Approved #1</b>		<input type="checkbox"/>	<b>Approved Date:</b>	<b>12/15/2020</b>
Service Name: Residential Group Home		Billing Abbreviated Name: GH		
Initial Start Date of Service: 8/1/2020		Previous Auth Expiration Date: 11/29/2020		
Extension Type: Reauthorization with service auth gap		Gap in Services Authorized: 16 Days		
Monthly Summary Reports received and reviewed: Yes		This extension was PO requested: Yes		
Length of Extension: 30 Days		New Auth Expiration Date based on this Extension: 1/15/2021		
Additional Units Approved and Unit Type: 30 Days		Rate per Unit: \$350		
Service Frequency:				

**Additional Comments:**

# YASI

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- The Youth Assessment and Screening Instrument or YASI is the evidence-based screening tool used by VDJJ
- The YASI assesses for Risk (Static & Dynamic), Needs, and Protective Factors.
- You will receive a copy of this in the referral packet – Full YASI, YASI wheel, & Case Plan with YASI Priorities.
- DJJ has Virtual YASI training designed for DSPs. See link on our Webpage – Resources for Providers



# YASI Case Planning Example

Priority 3:

Aggression/Violence

## The Wheel



### Targeted Items:

- Assaultive behavior

### Protective Factors:

- Shows constraint in dealing with conflict
- Rarely gets upset over small things or has tantrums

### Long Term Goals:

AV - Significantly reduce the frequency and intensity of angry verbal outbursts and assaultive/aggressive behaviors

LH - Achieve successful probation supervision without violations or new offenses

### Short Term Goals:

AV - Examine and change beliefs about the use of physical and verbal aggression as an appropriate/necessary way to solve problems

AV - Learn about how interpretations of events can lead to aggressive behavior and develop new ways of viewing events

AV - Learn strategies for handling frustration without becoming aggressive

LH - Comply with established rules of probation



# Reporting



# Reporting Requirements

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**Evaluations**

**Youth Monthly  
Summaries**

**Discharge  
Reports**

**Incident  
Reports**

**Authorization  
Status Report (aka  
Termination Report)**

**Invoicing/Billing**

**Fidelity Reports**



# Youth Monthly Summary Reports

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- i. Progress towards the identified measurable goals and objectives listed in the Youth's Individualized Service Plan **and revisions made**
- ii. Specific updates related to the referral reasons identified at time of referral**
- iii. Dates of Services, length of sessions/dosage, **and modality**
- iv. YASI risk factors addressed **and progress made on items within the domains of the YASI**
- v. **Assessment of level of family engagement partnership, including specific strategies and activities**
- vi. Completion date or anticipated completion of each goal
- vii. Youth Information including: youth name, DJJ#, referring PO, CSU and locality,**
- viii. Service Information including: service authorized, service start date, authorization information, and specific activities and strategies utilized**
- ix. Agency Information including: agency name, person completing the report, credentials**

# Incident Reporting Basics

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- Incident Reports due within **24 hours** to AMIkids and DJJ referring officer
- Must be submitted on **standard VDJJ form**: (1) Service Provider and Local Partner Incident Report for Youth not in Direct Care Status or (2) Direct Care/Commitment Direct Service Provider Incident Report
- Form is on our webpage under Documents for DSPs.
- Incident Descriptions are on following page
- Instructions and details for reporting for RSC DSPs are on following page
- Be sure to use DJJ ID Number
- Will include a follow up call from AMIkids if further questions



# Incident Reporting Basics

To be completed by designated service provider or local partner staff.

1. Program Name (no abbreviations):	
2. Program Funding: <input type="checkbox"/> RSC Direct Service Provider <input type="checkbox"/> VJCCCA Local Partner/Provider <input type="checkbox"/> N/A	
3. Program Licensing/Regulatory Entity: <input type="checkbox"/> DJJ <input type="checkbox"/> DSS <input type="checkbox"/> DBHDS <input type="checkbox"/> N/A	
4. Program Address:	
5. Incident Location:	
6. Incident Location Address (if different from program):	
7. Incident Date:	8. Incident Time:
9. Activity When Incident Occurred:	
10. Report Date:	11. Report Time:
12. Reporting Person:	13. Work Title:
14. Contact Email:	15. Contact Number:

16. **Incident Type:** Note: Reporting incidents to DJJ does not preclude providers (which include contracted providers and VJCCCA partners) from mandatory reporting to licensing agencies and child protective services (CPS), as applicable.

Check all categories that apply: All serious incidents, <i>actual or alleged</i> , relating to a youth must be reported by the provider.	
<input type="checkbox"/> Absent without Leave (AWOL)	<input type="checkbox"/> Fire
<input type="checkbox"/> Allegation of Sexual Assault on Youth	<input type="checkbox"/> Major Arrest of Youth
<input type="checkbox"/> Allegation of Sexual Child Abuse or Neglect	<input type="checkbox"/> Other
<input type="checkbox"/> Allegation of Staff Sexual Misconduct	<input type="checkbox"/> Physical Restraint
<input type="checkbox"/> Allegation of Suspected Non-Sexual Child Abuse or Neglect	<input type="checkbox"/> Serious Youth Injury or Illness
<input type="checkbox"/> Allegation of Youth Consensual Sexual Activity	<input type="checkbox"/> Serious Staff Injury
<input type="checkbox"/> Assault on Staff (by Anyone)	<input type="checkbox"/> Staff Arrest
<input type="checkbox"/> Assault on Youth (by Anyone)	<input type="checkbox"/> Suicide Attempt
<input type="checkbox"/> Death	

17. Youth's Identification Information:

Youth <u>Name</u> (First & Last)	DJJ Juvenile Number	Date of Birth	Service Start Date

# Authorization Status Report

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- **Pre-Service Engagement Date**
- **Pending / Waitlisted**
- **Active**
- **Service Start Date**
- **Termination**
- **Service Plan Completed**
- **Reason Service Never Began**
- **Close Out Date**
- **Service Progress at Termination**
- **Notes/Comments**



# Fidelity Reports & DSP Outcomes Reports

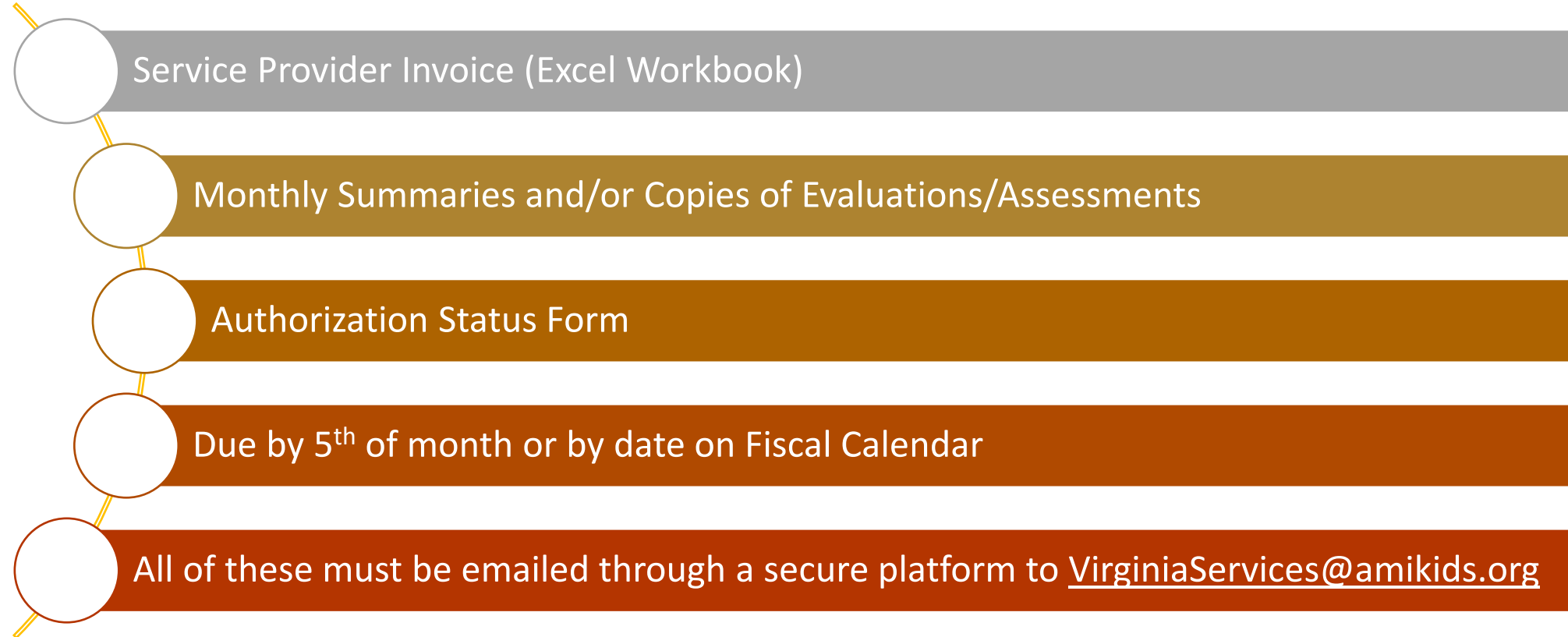
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- Please submit Fidelity reports (for EBPs) to AMKids as they are developed.
- Example MST PIR and FFT TYPE
- Please submit annual outcome reports prepared by your agency or a contracted agency as they are developed



# Billing Requirements

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- Christie Runski email: [crunski@amikids.org](mailto:crunski@amikids.org) phone: 910-386-3227
- Allicia Gnolfo email: [agnolfo@amikids.org](mailto:agnolfo@amikids.org) phone: 910-442-0000

# Communication Expectations & Best Practices





# Communication about Case Information

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- Acknowledge receipt of referral upon receipt and notify of anticipated start date
- Notify of any challenges or barriers to service initiation to RSM & PO
- Please make sure you are staying connected with POs by phone, email, and by sending reports. They are the case manager driving the referral decisions and must report updates back to Judges.
- ***What are your best practices with communication??***



# Ongoing Communication & Updates to AMI

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- Please help us keep your information up to date with staff changes, new roles, updated staff licenses / certifications, contacts, etc
- Please call us if you have any questions about reporting, timelines, service initiation, training opportunities, etc
- AMIkids hosts quarterly Coffee & Collaboration Webinars that are open for all DSP team members.
- AMIkids will provide one on one training as needed and will hold larger DSP trainings throughout the year on topics as needed



# Quality Assurance, Improvement & Monitoring



# Purpose of QA/QI

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- Monitor
- Ensure Quality Services
- Engage
- Train
- Learn
- Collaborate
- Provide Feedback
- Identify Best Practices
- Improve services for youth
- Reduce recidivism
- Bridge gap with DSPs and DJJ



# Quality Assurance Tasks

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## Compliance Reviews

- annually for all providers – ensure all contractual documents and received such as updated COI, update directory, review contract

## CQI (Continuous Quality Improvement)

- Monitoring Visits
- Reviewing Monthly Reports
- Scheduled monthly Support Calls
- Quality Improvement Plans

## Annual QAR (Quality Assurance Review)

- Tier 2 or 3
- Self Review
- Client File Review, Staff File Review
- Document Submission
- Collaborative Call





# Performance Measures



# DSP Performance Measures

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## *(Appendix C in Contract)*

### Are services beginning in a timely manner? Service Initiation

- 95% of Assessments/Evaluations will be delivered on or before need-by date identified at time of referral.
- 80% of services will begin within 10 days of referral (probation / community)
- 80% of services will begin within 3 days of return to the community (parole)

### Are youth making progress while receiving services? Service Progress

- 80% of services will end with at least some progress
- 80% of youth served will be discharged based on successful completion of their Individual Treatment Plan.



# DSP Annual Service Report

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- Utilization Information
- Service Initiation
- Service Completion Status
- Youth Progress
- Dosage / Length of Stay
- Monthly Summary Review
- Incident Report Review
- PO Feedback
- QIP Tasks
- DSP Submitted Data



# Other Best Practices & QA Initiatives



# RNR

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## Risk

Who

Deliver more intensive services to higher risk youth

## Need

What

Target criminogenic needs to reduce risk for recidivism

## Responsivity

How

Individualize and match delivery of interventions to each youth. Use EBP and CBT approaches



# 6 Trauma Informed Care Principles

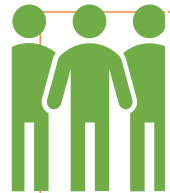
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Safety



Trustworthiness &  
Transparency



Peer Support &  
Mutual Self-help



Collaboration &  
Mutuality



Empowerment,  
Voice, & Choice



Cultural, Historical,  
and Gender issues



# 8 Principles of Effective Youth Offender Interventions

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Assess  
Risk/Needs



Target  
Interventions



Increase Positive  
Reinforcements



Engage Ongoing  
Community  
Support



Skill Train with  
Direct Practice



Ensure Fidelity



Enhance Intrinsic  
Motivation



Allow Feedback  
and Evaluate



# Logic Models



Provides stakeholders with a *road map* of your plan to achieve intended outcomes



Communicates the *purpose* of your program



Explains why your program is *important*



Describes the anticipated *outcomes*



Better position programs for *success* because you are able to plan for:  
Implementation Activities, Program Evaluation & Sustainability



# Casey Life Skills

Developed by Casey Family Programs

Program Components	Targets	Intervention	Immediate Outcomes	Long Term Outcomes
<ul style="list-style-type: none"> <li>• Youth of age 14-21</li> <li>• 60-80 hours</li> <li>• 90-120 days</li> <li>• Trauma Informed Approach</li> <li>• Casey Life Skills Training – Goal: To teach youth a broad curriculum of independent living skills</li> <li>• Resiliency Theory – Goal: To help the client develop a stable and reliable support group.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>YASI Risk Factors</b> <ul style="list-style-type: none"> <li>• Skills</li> <li>• Attitudes</li> <li>• Employment/Free Time</li> <li>• Community / Peer</li> <li>• Alcohol / Drugs</li> <li>• Violence / Aggression</li> </ul> </li> <li>• <b>Risk Factors</b> <ul style="list-style-type: none"> <li>• Poor problem solving</li> <li>• Poor communication</li> <li>• Impulsive behaviors</li> <li>• Antisocial values and beliefs</li> <li>• Low education</li> <li>• Mental health issues</li> </ul> </li> <li>• <b>Protective Factors</b> <ul style="list-style-type: none"> <li>• Maintaining healthy relationships</li> <li>• Work and study habits</li> <li>• Planning and goal-setting</li> <li>• Using community resources</li> <li>• Daily living activities</li> <li>• Budgeting and paying bills</li> <li>• Computer literacy</li> <li>• Their permanent connections to caring adults</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• CLS Assessment</li> <li>• CLS Curriculum and Resource Guide to include: <ul style="list-style-type: none"> <li>• Daily Living Skills</li> <li>• Self Care Skills</li> <li>• Relationships &amp; Communication Skills</li> <li>• Housing &amp; Money Management</li> <li>• Work &amp; Study Skills</li> <li>• Career &amp; Education Planning</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Learn independent living skills</li> <li>• Improve support system</li> <li>• Increased productivity</li> <li>• Increase self-esteem</li> <li>• Improved decision-making process</li> <li>• Short term goal setting</li> </ul>	<ul style="list-style-type: none"> <li>• Reduce recidivism</li> <li>• Reduce criminogenic thinking</li> <li>• Improve community involvement</li> <li>• Increased sense of belonging</li> <li>• Enhance pro-social skills</li> <li>• Employment stability</li> <li>• Career Development A lot more can be added here. Please feel free to input any relevant information in other sections as well.</li> </ul>



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**Questions or  
Other Announcements?**

