

Transitional Living Program (TLP) Site Visit Tool

Date of Site Visit:
Provider:
Provider Contact:
DCF Surveyor:

Instructions: The Site Visit Tool is to be completed at in-person site visits for initial reviews, 90-day reviews and annual reviews. This site visit tool will score the policy and procedure manuals, youth, files, employee files, and facility for compliance with the placement standards. Review each section and coordinating source of information. When completing the findings section, choose Substantially Met if all items are located. Partially Met if some of the items are located. Not Met if you do not find the information asked for. And Not Applicable if the item does not apply to this facility. If an item is not Substantially Met, please note what is missing in the comments section.

Scoring: **Substantially Met = 1**
 Partially Met = .5
 Not Met = .25
 Not Applicable = 0

Total possible score on this site visit tool is 73. If score is 63 or less, that requires an automatic Corrective Action Plan (CAP). Items that do not score substantially met, will require comments that will be the basis for the CAP. Facilities will have 14 days to address the missing items and submit corrections or a plan to make necessary corrections (for example trainings, this can take time to find and schedule). Track CAP corrections on this form and document the date corrections are received.

SECTION 1: GENERAL PROGRAM DESCRIPTION						
Transitional living is designed for youth who are ready to enter a phase of care that will eventually transition them to independent living. Transitional living affords youth an opportunity to practice basic independent living skills in a variety of settings with decreasing degrees of supervision. DCF requires foster parents and designated officials at child care institutions to apply the reasonable and prudent parenting standard. The standard is characterized by careful and sensible parental decisions that maintain a child's health, safety, and best interests while at the same time encouraging the child's emotional and developmental growth that a caregiver must use when determining whether to allow a child in foster care to participate in extracurricular, enrichment, cultural, and social activities.						

Section 1.1: Transitional Living Program (TLP)						
- Youth reside in apartments within one building or complex (contained apartments). Each youth shall be afforded sufficient bedroom space to insure adequate privacy, safety and security. - The provider shall insure the environmental safety of the apartment is in compliance with local over sight agencies such as HUD, Fire Marshall, Municipalities, Apartment Management, etc. - Service Access plan development, review, and case supervision are carried out by the Transitional Living provider. - Services will be designed to work in collaboration with other community-based providers to develop a strong foundation of service and support access. - Staff shall have experience, skill and knowledge in adolescent development, behavior management, child abuse and neglect, family dynamics, provision of community-based services, development of youth's strengths and assets, and positive youth development. - The provider shall provide assistance to ensure that youth obtain the basic necessities of daily life. - The provider shall offer or arrange for strength-based interventions to address crisis and or daily living situations. - The provider shall facilitate development of support systems to increase the youth's interdependency within the community in which they reside. - All services accessed shall be appropriate to the age, gender, sexual orientation, cultural heritage, developmental and functional level, as well as the learning ability of each youth. - Admission requirements shall include a list of support service needs as identified by the referring agency.						
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
1	Review p/p	Policies,	Substantially Met			

		Procedures or Documents	Partially Met Not Met Not Applicable			
2	Review program description.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

Section 2: Description of Youth to be Served						
Prior to consideration for admission to any TLP service youth shall be able to demonstrate knowledge of basic life skills. All youth in transitional living placements shall: • Be at least 16 years of age • Be working towards full or part-time employment • Be working towards a diploma or equivalent (if not already obtained) • Have demonstrated a basic knowledge of life skills • Youth are required to maintain a savings account to be held in trust by the TLP. • Youth shall deposit the full or partial amount (depending upon their employment status) of their share of the monthly apartment rent and utilities. • The youth's planning team (facility staff in coordination with the CWCMP Case Manager) will determine the actual amount required to be deposited in trust. These monies are then available to the youth when they leave the TLP. ○ TLP staff shall keep financial records for all money deposited or debited from the youth's account.						
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
3	Review p/p	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
4	Review program description.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
5	Review case records for documentation of initial assessments.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

Section 3: General Staffing Requirements	
Staff shall meet the qualifications and responsibilities as set forth in this document. Written job descriptions shall be developed for all staff and maintained on site where personnel functions are carried out. All youth in TLP placements shall have twenty-four (24) hour access to on-site program staff that is responsible for monitoring the activities of youth in their programs. Program staff shall develop a schedule for providing supervision with guidance based on a specific youth's maturity, acquired skills, and emotional status. The supervisory schedule shall be designed so that staff may observe that the youth is practicing healthy and responsible life skills and will be developed in collaboration with a youth's CWCMP Case Manager. This collaboration will determine the frequency and type of supervision/support provided to the youth. Based on the needs and behaviors of youth, staff may leave youth at the facility for short periods of time, for the purpose of transporting another youth to and from offsite activities (job, appointment, school, etc). Administrator: • Shall have a bachelor's degree and prior administrative experience. • Shall not be a person restricted from working with youth as defined by K.S.A. 65-516. • Shall have a working knowledge of adolescent development principles. • Shall be responsible for working with, supervising and training other staff (e.g., case coordinator, life coach) who are working with youth in the transitional living program. Case Coordinator: • Shall have at least a bachelor's degree in one of the human service fields (social work, psychology, human development and family life, criminal justice, counseling, nursing or education) and a working knowledge of adolescent development principles. The youth to case coordinator ratio is 1:16. • Shall be at least twenty-one (21) years of age and at least three years older than the oldest youth served. • Shall not be a person restricted from working with youth as defined by K.S.A. 65-516.	

	Life Coach: • Shall have at least a high school diploma or equivalent and have a working knowledge of adolescent development principles. • Shall be at least twenty-one (21) years of age and at least three years older than the oldest youth served. • Shall not be a person restricted from working with youth as defined by K.S.A. 65-516. • Shall be responsible for any direct supervision of youth as required. • Shall inspect youth's apartment as needed to ensure the safety and security of youth. • Shall be responsible for the day-to-day modeling of life skills (e.g., assertiveness, communication, conflict management, problem solving and decision making). • Shall monitor youth's daily life skills and provide appropriate feedback. • Shall work in partnership with the case coordinator.					
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
6	Review p/p	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
7	Review position descriptions	HR Files	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

	Section 4: Case Coordination					
	The TLP's case coordinator has the responsibility for coordinating the child's program and progress with the CWCMP Case Manager, school, employer, family, and other appropriate community resources. This shall include, but not be limited to, documenting phone calls, appointments and visits (on and off site). The Case Coordinator will maintain a resource base of services to address the needs identified in Individual Program Plans and document in the youth's file, when and what community resources have been contacted and utilized for services for the youth. The case coordinator shall be responsible for Weekly Progress Notes (see Section 14: Record Keeping).					
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
8	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
9	Review personnel file for compliance.	HR Files	Substantially Met Partially Met Not Met Not Applicable			
10	Review job description and HR file.	HR Files or contract	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

	Section 5: Staff In-Service Training					
	Section 5.1 Orientation					
	Each facility shall have an in-service orientation training program for new employees, which is especially directed toward the initial training needs of staff working directly with children. Documentation of completion of orientation training shall be kept, in the staff member's personnel file. The documentation shall be placed in a specific area in the staff's file, indicating: • staff training, reflecting orientation or annual training • name of trainer • name of training • specify the number of training hours • date of the training Facility staff shall have completed a minimum of 18 hours of in-service orientation training. Staff shall demonstrate competency in the trainings from orientation before they can work independently with children. All topics listed below shall be trained, even if it exceeds the minimum 18 hours of orientation:					

Facility Trainings: • Facility policy and procedures manual • Facility emergency and evacuation procedures • Facility discipline standards • Child record documentation policies and procedures • Resident rights (See Appendix 4, Resident Rights) • Confidentiality laws • Report Writing Trainings from an outside source and/or trained trainers within the facility (source must be well recognized and qualified, trained trainers must have documentation on file): • Emergency safety interventions (including management of aggressive or suicidal behavior) (if a facility chooses to use Emergency Safety Intervention staff shall be certified) • De-escalation (staff shall be certified) • The handling of blood borne pathogens • Medication Administration (staff who pass medications shall be certified) • Certified in CPR/First Aid • Trauma based informed care/trauma specific intervention • Mandated Reporting (Provided By DCF) http://www.dcf.ks.gov/services/MRT/Pages/default.aspx • HIPPA Laws • Comprehensive LGBTQ+ • Human Trafficking and exploitation • Cultural Diversity • Suicide Prevention/Intervention/Safety						
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
11	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
12	Review case personnel file for compliance.	HR Files	Substantially Met Partially Met Not Met Not Applicable			
13	Review training curriculum	HR Files. Documents	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

Section 5.2 Annual In-Service Training	
Annual training is beyond or in addition to the initial 18-hour orientation training program from the date of employment. During the first year of employment staff shall receive a minimum of 36 hours of training (18 orientation hours, 18 annual In-Service). All TLP direct care staff shall have a minimum of 18 documented clock hours of in-service training per year. Documentation shall be provided in each staff member's personnel record to include content, amount of time, trainer, and qualifications. The documentation shall be placed in a specific area in the staff's file, indicating staff training, indicating: • staff training, reflecting orientation or annual training • name of trainer • name of training • specify the number of training hours • date of the training All topics listed below shall be trained, even if it exceeds the minimum 18 hours of annual in-service: Facility Refreshers/Trainings: • Facility policy and procedures manual • Facility emergency and evacuation procedures • Facility discipline standards • Child record documentation policies and procedures • Resident rights (See Appendix 4, Resident Rights) • Confidentiality laws Refreshers/Trainings from an outside source and/or trained trainers within the facility (source must be well recognized and qualified, trained trainers must have	

	documentation on file):					
	- Emergency safety interventions (including management of aggressive or suicidal behavior) (staff shall maintain certification) - De-escalation (staff shall maintain certification) - The handling of blood borne pathogens - Medication Administration (staff shall maintain certification, may or may not require annual training) - CPR/First Aid (Staff shall maintain certification, may or may not require annual training) - Trauma based informed care/trauma specific intervention - Mandated Reporting (Provided By DCF) http://www.dcf.ks.gov/services/MRT/Pages/default.aspx - HIPPA Laws - Comprehensive LGBTQ+ - Cultural Diversity - Childhood and adolescent sexuality issues, especially the effects of early sexual abuse - Substance Use Disorders - Blood Borne Pathogens - Childhood and adolescent development (including developmental disorders) - Childhood and adolescent psycho-pathology (including such topics as effects of abuse/neglect, reactive attachment disorders, separation anxiety disorders, ADHD) - Suicide Prevention/Intervention/Safety					
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
14	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
15	Review personnel file for compliance.	HR Files	Substantially Met Partially Met Not Met Not Applicable			
16	Review training curriculum.	HR Files, Documents	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

	Section 6: Placements Confirmation of Placement					
	A Foster Care Confirmation of Placement (PPS 5122) is available through the CareMatch system which confirms the placement arranged by the Child Welfare Case Management Provider (CWCMP).					
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
17	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
18	Review case file for documentation	Case Record	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

	Section 7: Initial Assessment					
	When a youth enters the facility, the TLP shall begin immediately assessing their strengths and needs including documentation and shall have a completed assessment within 7 days from admission. The assessment shall include but not be limited to the following: - Reasons for referral to the facility - Evaluation or assessment covering the following areas: - Physical health - Family relations - Academic or vocational training					

• Community life • Interpersonal interactions • Daily living skills as outlined in the scope of services listed above • Immediate service needs: 1. Mental Health 2. Developmental 3. Dental 4. Medical • Involvement or exposure to Substance Use/disorder • Involvement or exposure to other trauma • Assessment of the child/youth's self- injuring or suicidal attempts Additional Assessments: The case coordinator or life skills coach may administer life skills assessments as needed to further identify needs to be addressed in the service access plan.						
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
19	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
20	Review case records for documentation of initial assessment	Case Record	Substantially Met Partially Met Not Met Not Applicable			
21	Review initial assessments for timeliness.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

Section 8: Resident Lodging Apartment/Room Assignment						
To support the daily management and administration of youth, each residential provider shall develop an objective formal procedure to assess physical housing needs of youth. Youth in a residential facility shall be assigned to an apartment/room based upon a range of factors, as identified by risk/needs assessment(s) in addition to other indicators. Factors to consider in assigning apartments/rooms shall include (but are not limited to): • Suicidal tendencies • Level of specialized needs (i.e. mental health, medical, etc.) • Displaying inappropriate sexual behaviors /victims of sexual abuse) • Gender • Age and/or maturity level • Program needs (substance use disorder, cognitive behavioral, independent living, etc.) • Vulnerability to being victimized by others (i.e. physical stature) • Comprehensive LGBTQ+ While each youth will have an individualized program plan, assigning apartments/rooms based upon risk/need/responsivity factors will allow for a safer, more secure environment, as well as efficient and effective management of the living units. The youth's apartment/room assignment and how the decision was made shall be documented in the youth's file. The apartment/room assignment shall be completed immediately upon admission.						
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
22	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
23	Review case file for apartment/room assignment documentation.	Case File	Substantially Met Partially Met Not Met Not Applicable			
24	View apartment/room and living spaces.	Facility Tour	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

Section 9: Services						
Youth in transitional living placements may need access to supportive services including but not limited to the following categories: • Mental health services • Alcohol and substance use disorder treatment services • Educational/vocational support services • Individual counseling • Sex Offender treatment services • Pro-social recreational activities • Preventative, routine and emergency health care • Routine transportation • Emergency transportation when routine transportation is not available • Administration, oversight of youth's trust • Financial guidance to youth (e.g., budgeting, consumer skills) TLP services shall provide the opportunity to practice the skills necessary to live independently. These skills, at a minimum, shall include: • Preparing meals • Basic nutrition education • Doing laundry • Maintaining a clean, orderly, and safe living space • Living cooperatively with other housemates or neighbors • Handling landlord/tenant complaints • Controlling guests' behavior • Handling basic maintenance • Handling simple repairs • How to call the landlord about problems • Developing and following a budget • Access to routine transportation (e.g., public transportation, carpool) • Shopping, food preparation, food storage, and consumer skills Section 9.1: Positive and Realistic Living Experiences Youth are further prepared for adulthood by being provided a realistic living experience, through transitional living placements in which they can take increasing responsibility for themselves. Elements of those living experiences include, but are not limited to, the following: • Direct experience with the consequences of daily actions and decisions • Life skills practice while having access to staff for support and advice • Daily social contacts • Emotional adjustment to the difference between present living situation and previous ones • Practice living alone • Use of leisure time • Obtaining and using transportation to access needed resources These experiences shall also be tailored to a youth's current level of functioning. Additional experiences and opportunities may be introduced as a youth's skill level increases and more complex opportunities are desired Section 9.2: Home Furnishings The provider shall make available certain articles and supplies for furnishing the youths residence. The articles and supplies may be new or used but shall be in good condition. The articles and supplies shall include, but are not limited to: • A bed and bed linens • A dining table and chairs • Living or sitting room furniture • A stove and refrigerator • Kitchen furnishings (e.g., pots, pans, cooking and eating utensils) • Basic cleaning supplies • Telephone • Utilities (e.g., water, trash, electricity, gas) • Access to laundry services • Food in sufficient quantity to provide at least three (3) nutritionally balanced meals per day • Kitchen and bath linens • Entertainment equipment (e.g., television, stereo, video games) are optional, if not provided, youth shall be provided the opportunity to purchase these items when they are financially capable						
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
25	Review p/p.	Policies,	Substantially Met			

		Procedures or Documents	Partially Met Not Met Not Applicable			
26	Review case file for life skills training documentation.	Case File	Substantially Met Partially Met Not Met Not Applicable			
27	View living spaces.	Facility Tour	Substantially Met Partially Met Not Met Not Applicable			
28	View resident financial records to include documentation of staff meeting with residents about budgeting, savings, giving resident receipts.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
29	View documentation	Case Records	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

	Section 10: Behavior Management					
	Each TLP shall have a written program of consistent rules guiding and governing the daily behavior of the youth under the care of the program. The behavior management system shall include a description of daily general routines of the program. The system of rules, rewards, and consequences for behaviors shall be identified. Notation shall be made in the youth's file and signed by the youth that the rules, rewards and consequences have been discussed. Each youth shall be oriented to the TLP's behavior management system by a staff member during the admission or orientation process. The youth shall be given a written copy of the system to use as a reference and the TLP shall post the behavior management system in a common area where the youth are able to easily access the system. Behavior management shall include rules governing: • interpersonal interactions with staff and peers • facility leave policies • school attendance and behavior while at school • verbal and physical aggression • allowable possessions • awakening and bedtime hours • leisure hours, visitation policies • runaway attempts • involvement in recreation and other activities • self-destructive behaviors • sexuality • communications with family and others outside the program • religious worship • involvement in therapies • theft • property destruction • behaviors resulting in mandatory removal from the program • behaviors at the program which could result in legal prosecution When a youth decides not to attend religious worship or activities, alternative supervised activities shall be made available. The overarching goals shall be to help the youth adjust to the residential facility and to daily life within society. A resource list shall be maintained by the facility of the available resources to meet the youth's need in the community. Discipline at the facility shall be consistent and not be physically or emotionally damaging. Youth shall not be subjected to cruel, severe, unusual, or unnecessary punishment. Youth shall not be subjected to remarks that belittle or ridicule them or their families. Youth shall not be denied food, mail, telephone calls or visits with their families as punishment. Seclusion shall not be utilized as a disciplinary measure. Only staff members shall discipline youth.					
#	Requirement	Source	Findings	Comments	Date Corrections	Score

			<i>(Delete the three that don't apply)</i>		Completed <i>(Or note)</i>	
30	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
31	Review case file for documentation.	Case File	Substantially Met Partially Met Not Met Not Applicable			
32	View posted schedule, behavior management system.	Facility Tour	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

Section 10.1: Resetting						
A procedure used to assist the child in regaining regain emotional control by providing a safe and quiet area. Application of a reset: • A youth in a reset shall never be physically prevented from leaving the reset area. • Resets may take place away from the area of activity or from other youth. • Staff shall monitor the youth while he or she is in resetting.						
#	Requirement	Source	Findings <i>(Delete the three that don't apply)</i>	Comments	Date Corrections Completed <i>(Or note)</i>	Score
33	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
34	Review case file for documentation.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

Section 10.2: De-escalation Certification						
De-escalation is a technique used during a potential crisis situation in an attempt to prevent a youth from causing harm to themselves, others and/or staff. De-escalation techniques shall be utilized for any activity required to diffuse a conflict or intense situation to ensure safety and calm the youth. Staff shall be certified in authorized, evidenced based de-escalation techniques programs for managing aggressive behavior. Staff training records shall be kept as part of the staff member's personnel file and shall be made available upon request. At the time of admission to a facility, the youth and parent (if applicable)/guardian and/or CWCMP Case Manager shall be oriented to the managing aggressive behaviors policies of the facility and shall sign a written acknowledgment of this orientation. This written acknowledgment shall be kept in the youth's case record.						
#	Requirement	Source	Findings <i>(Delete the three that don't apply)</i>	Comments	Date Corrections Completed <i>(Or note)</i>	Score
35	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
36	Review employee file for documentation.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

Section 10.3: Emergency Safety Intervention Certification						
An emergency safety intervention shall be performed in a manner that is safe, proportionate, and appropriate to the severity of the behavior, and the youth's chronological and developmental age, size, gender physical, medical, psychiatric condition, and personal history.						

The use of emergency safety interventions shall be performed only using nationally recognized restraint procedures applicable to this population designed to prevent a youth from harming self or others by exerting external control over physical movement. An emergency safety intervention is the application of physical force without any mechanical device, for the purpose of restricting the free movement of a youth's body. An emergency safety intervention shall be used only as last resort after all verbal de-escalation techniques have failed and when the youth is at-risk of harming themselves or others. Mechanical restraint is the use of mechanical devices to restrict the free movement of the youth's body, most often for purposes of preventing self-destructive behavior. Mechanical restraints are not allowed in TLP residential facilities. Each facility shall have a written policy and all staff shall be trained to provide safe emergency safety interventions. Staff shall be certified in authorized, evidenced based training programs for managing aggressive behavior and de-escalation techniques. Staff training records shall be kept as part of the staff member's personnel file and shall be made available upon request. At the time of admission to a facility, the youth and parent (if applicable)/guardian (if applicable) and/or CWCMP Case Manager shall be oriented to the emergency safety intervention policies of the facility and shall sign a written acknowledgment of this orientation. This written acknowledgment shall be kept in the youth's case record.						
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
37	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
38	Review employee files for documentation.	HR Files	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

SECTION 11: Program Plan	
Each youth residing in a residential facility shall have a program plan that is based on a thorough assessment. Assessment documents shall be included in the case record. The program plan shall be established by the end of 14 days from admission and shall address the identified needs in the emotional, physical, educational, social, familial, and independent living skill domains. Youth may not have identified needs in every domain. If so, document that no needs were identified. Program plans shall be updated when new needs are identified or when program goals are met. Program plans shall be thoroughly reviewed, and revisions made at the case review conferences within 30 days of completion of initial program plan and each 30 days thereafter, including updated information of the progress of the youth's goals. Information obtained from the youth, parent, guardian, and CWCMP Case Manager shall be considered in the report. The initial program plan and all updates shall be sent to the CWCMP Case Manager after review/updating and/or each month. The program plan shall include individualized services to match the youth's identified needs in the following areas: • Long term goals in the areas of: 1. physical health 2. family relations 3. daily living skills 4. academic and/or vocational skills 5. interpersonal relations 6. substance use service needs 7. emotional/psychological health • Short term goals which will help a youth eventually reach his/her long-term goals in each of the above areas. • Services to meet independent living goals. • Specific plans for reaching the short-term goals including services to be provided and frequency. • Estimated time for reaching short term goals. • The youth shall sign and date the program plans indicating participation and input in the development of the plan. • Updated information of the progress of the youth's goals shall be included. TLP staff shall participate in case plan conducted by CWCMP Case Manager. Permanency Planning: Includes the evaluation and design of an approach for the youth and family that focuses on opportunities for the youth to have ongoing active and meaningful connections with family, kin, relatives, and the community. The goal for achieving permanency shall be coordinated with the youth's CWCMP Case Manager and be included in the program plan to be reviewed every 30 days. The permanency plan shall include strategies and tasks to accomplish the youth's goals. Behaviors which place the youth at risk for disruption, activities to prepare the youth's family or kinship network for reunification, identification of other	

less restrictive living environments and preparing the youth for transition to these settings shall be addressed.						
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
39	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
40	Check for signatures and dates on reviews.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
41	Review case record.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
42	Check for program objectives.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
43	Check for 30 day reviews.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
44	Check for CIP staff participation in CWCMP service planning.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

Section 12: Visitation						
Subject to the provider's visitation guideline (days of the week, times, appropriate attire, etc.) a provider shall not prohibit contact with a child's immediate family except for the following reasons: • A court orders no contact • There is documented violence, threatening or disruptive behavior by family member that occurred during contact • There is documented introduction of contraband into the facility The facility shall provide private accommodations for visitation. Accommodations shall include but not be limited to: a private office/room, no staff presence (unless required), free of any individuals that may overhear confidential information. When home visits are a part of the treatment plan, there shall be coordinated connections with the child, their family, and the case coordinator/facility program staff regarding the youth's treatment and program goals and objectives. The goal of placement shall be to return the child to a family-like setting, so it is important that home visits be carefully planned and executed in the best interests of permanency planning for the child. All home visits shall be arranged through coordination with the child's CWCMP Case Manager. Documentation in child's file shall include who is transporting children to and from family visits and observation of the child's behavior during transportation. The child shall have an approved contact list to include, the type of contact allowed (letter, phone, day passes, overnight passes, etc.) The contact list must be reviewed/updated every 60 days. Approved contacts shall be determined by the CWCMP Case Manager. The initial contact list and all reviews/updates shall include the CWCMP Case Manager signature.						
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
45	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
46	Review case file for approved contact list	Case Records	Substantially Met Partially Met Not Met Not Applicable			
47	Review case file for documentation of phone calls and visits.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
48	View visitation area at the	Facility Tour	Substantially Met			

	facility.		Partially Met Not Met Not Applicable			
Score for this section:						

Section 13: Discharge/Aftercare Plan						
	Discharge planning shall begin upon admission of the youth to the facility. At a minimum, the youth, the youth's parents (if applicable) or guardian, and the CWCMP Case Manager shall be involved in planning the discharge from the facility. The discharge plan and modifications to it shall be noted in the case file. A discharge summary shall be completed at the time of the youth's discharge and be forwarded to the CWCMP Case Manager within one business day. The discharge summary shall include written: • Summary of progress, or lack thereof, of the youth's goals and objectives while the youth was in placement • Summary of the progress towards securing a residence, home furnishings and utilities for youth being released to live independently • Summary of the youth's behavior while in placement • Recommendations for aftercare services specifying the nature, frequency, duration of services and responsible parties • Written list of community resources given to the youth upon discharge (food banks, 211.org, educational opportunities, job search methods/job fairs, health care resources, how to reach for help, banking/budgeting, etc.) • Summary of the reasons the youth was discharged					
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
49	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
50	Review closed files for discharge summary	Case Record	Substantially Met Partially Met Not Met Not Applicable			
56	Review case file for documentation of discharge/aftercare planning.	Case Record	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

SECTION 14: Record Keeping	
	The record keeping requirements of KAR 28-4-272 shall be met by the facility. In addition, the following shall be kept by the facility. If a facility chooses to use electronic filing full access shall be given to DCF employees who are conducting site visit. Youth's File: The provider shall maintain a file for each youth. The file shall contain the following: • Youth's name and date of birth • Name, address and emergency contact information of the youth's CWCMP Case Manager • Name and contact information of other family members and fictive kin who are not part of the family and permanency plan (to be included on the approved contact list, if applicable) • Foster Care Confirmation of Placement • Current CWCMP Referral form • Current CWCMP Case Plan • If reunification is the goal, evidence demonstrating that the parent from whom the youth was removed provided input on the members of the family and permanency plan. • Initial Assessment • Suicide/self-injury questionnaire • Room assignment assessment • Medical and surgical consents • Medical and dental records (history and current) • Documentation of diagnosis (history and current) • Records of the youth's prescription(s) and non-prescription(s) and when administered • Authorization for release of confidential information • Daily observation logs by shift • Weekly progress notes • Program plans • Treatment Plans, if applicable • Discharge plans/Aftercare

	• Approved contact list • Resident's rights acknowledgement • Emergency Safety Intervention/de-escalation acknowledgements • Handbook/Rules acknowledgement • Pre and Post visit documentation • Significant incident reports • Personal Property Inventory • Educational documentation Case records, including medical records, shall be maintained for 6 years from the date of the youth's discharge or until completion of an on-going audit and production of a final audit report, whichever is longer. Daily Observations: A dated record of daily observations and significant occurrences involving each youth shall be maintained by each shift and maintained in each youth's individual file. The record shall include events which may affect the well-being of the youth. Significant events should include but not be limited to; attendance at school or groups (specific group), interactions and/or interventions with staff and other youth, medical appointments, mental health appointments, medication compliance, hygiene (if identified as a need), visits/passes, meals eaten and overall behavior. Each report shall include the staff member and/or youth involved, the nature of the incident and the circumstances surrounding it. The record shall be available to review. Weekly Progress Notes: Notes shall be completed by the case coordinator. These notes shall be entered into the youth's chart, reflecting the delivery of services according to the treatment plan. This documentation shall address the youth's responses to interventions and the progress of the youth on individualized goals and objectives. The note shall include any significant events that occurred during the week and shall also summarize contacts with family members and other involved agencies. If an unmet need is identified, the note shall reflect the actions to be taken to revise the plan to meet that need. The case coordinator shall document specific services and activities they are providing to each youth. Each month the weekly progress notes shall be sent to the CWCMP Case Manager. The Monthly Progress Report Form shall be submitted to each child's provider no later than the 15th of each month following the reporting month, for all children who are in placement more than 15 days of that calendar month. Submission will be accepted by e-mail to: • Cornerstones of Care: KSmnthlyprogressreports@Cornerstonesofcare.org • KVC: KVCMonthlyReports@KVC.org • St. Francis Ministries: MonthlyProgressReports@st-francis.org • TFI: MonthlyReports@TFIFamily.org Health Records: Health Care and Records of youth shall meet the requirements of KAR 28-4-275. Records of over the counter and prescribed medications shall be kept in each youth's case medical record and include the: • name of the prescribing physician • name of the medication • dosage prescribed • medication schedule • purpose of the medication • noted side effects • date of the prescription • date prescribed by a physician A record of medication given, amount, date and time, and person dispensing shall be recorded. All doctor and dental visits, major illnesses, and accidents shall be recorded. Mental health appointments shall also be specifically documented in a youth's medical record. This provides for a complete Health record for the youth and their family, which documents the frequency of the youth's mental health treatment. Personnel Records: A separate file shall be maintained for each employee. Personnel files shall include the following: • Written employment application, resume and reference checks • Date of hire • Position description • Educational transcripts, HS diploma, college degree, etc. • OGC- 3004 Staff Information Sheet • Copy of driver's license/Kansas ID (current) • Disciplinary action records • Training records • Out of state registry checks, when applicable (staff member has lived outside of Kansas within the last 5 years)					
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
57	Review p/p.	Policies, Procedures or Documents	Substantially Met Partially Met Not Met Not Applicable			
58	Review case files for weekly progress reports.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
59	Review case files for	Case Records	Substantially Met			

	monthly progress reports.		Partially Met Not Met Not Applicable			
60	Review case files for documentation that weekly and monthly reports are sent to the CWCMP's.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
61	Review case file for documentation of daily activities.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
62	Review case files for documentation of program plan reviews.	Case Records	Substantially Met Partially Met Not Met Not Applicable			
63	Review case file for personal property documentation.	Case Record	Substantially Met Partially Met Not Met Not Applicable			
64	Review case file for medication documentation.	Case Record	Substantially Met Partially Met Not Met Not Applicable			
65	Review employee files for job description.	HR Files	Substantially Met Partially Met Not Met Not Applicable			
66	Review employee files for education requirement documentation	HR Files	Substantially Met Partially Met Not Met Not Applicable			
67	Review employee files for driver's license verification.	HR Files	Substantially Met Partially Met Not Met Not Applicable			
Score for this section:						

	Section 15: Reporting Abuse/Neglect					
	The KPRC number shall be posted in a prominent place in the facility. Any employee of the facility who suspects the abuse/neglect of a resident within that facility is to notify the Director of the facility immediately, except in cases where the alleged perpetrator is the Facility Director.					
#	Requirement	Source	Findings (Delete the three that don't apply)	Comments	Date Corrections Completed (Or note)	Score
68	Review p/p.	Policies, Procedures or Documents	Substantially Met (1) Partially Met (0.5) Not Met (0.25) Not Applicable (0)			
69	View posting of KPRC number in the facility.	Tour	Substantially Met (1) Partially Met (0.5) Not Met (0.25) Not Applicable (0)			
Score for this section:						

	Section 16: Significant Incidents					
	A Significant Incident is an unanticipated event which does not rise to the level of a critical incident but has the potential risk of a serious adverse outcome.					
	Section 16.1: Significant Incident Reporting					
	Significant incidents are to be reported to the youth's CWCMP case manager and the youth's parent or guardian when appropriate per PPM 0513.					
	The following significant incidents shall be verbally reported immediately with a written report to the CWCMP case manager within 24 hours of the event (please refer to the following definitions for clarification):					

Significant Incident involving a child in the custody of the Secretary include but are not limited to: 1. death of a parent/primary caregiver (provide date of death) 2. runaway or missing from placement. PPM 5245 shall be followed. 3. arrested for a juvenile offense 4. alleged abuse or neglect 5. child is an alleged perpetrator or victim of a criminal assault of any kind 6. attempted suicide 7. serious physical illness 8. unanticipated medical attention that requires treatment beyond first aid 9. pregnancy. See PPM 0513 D. 2. 10. birth. See PPM 0513 D. 2. 11. emergency change in placement 12. use of illegal drugs 13. suspension of the license of a group or residential facility used by children 14. alleged victim of human trafficking 15. alleged perpetrator of animal abuse 16. other (document specifics) 17. death of child in care If the significant incident involves abuse, neglect, or exploitation the facility shall also follow mandated reporting requirements. All facilities shall have procedures for reporting significant incidents to administrative staff and recording significant incidents in the resident files. An administrative file of significant incidents shall be kept by facility and a copy of the significant incident shall be placed in the youth's file. An administrative file shall be kept by the facility documenting significant incidents that is separate from the documentation in the youth's file. Each TLP provider shall develop an internal process for obtaining on-call/emergency contact information for all CWCMP case managers in the event of an emergency or significant incident.						
#	Requirement	Source	Findings <i>(Delete the two that don't apply)</i>	Comments	Date Corrections Completed <i>(Or note)</i>	Score
70	Review p/p.	Policies, Procedures or Documents	Substantially Met (1) Partially Met (0.5) Not Met (0.25) Not Applicable (0)			
71	Review reports of significant incidents.	Case Records	Substantially Met (1) Partially Met (0.5) Not Met (0.25) Not Applicable (0)			
72	Check significant incidents log.	Case Records	Substantially Met (1) Partially Met (0.5) Not Met (0.25) Not Applicable (0)			
73	Review sample from log for compliance w/ reporting within proper time frame.	Case Records	Substantially Met (1) Partially Met (0.5) Not Met (0.25) Not Applicable (0)			
Score for this section:						

Section 17: Final Scoring	
A cumulation of all the above sections are scored here for a total score based on the assessments completed.	
Scoring:	Substantially Met = 1 Partially Met = 0.5 Not Met = 0.25 Not Applicable = 0
Total possible score on this site visit tool is 75. If the score is 65 or less, the result is an automatic Corrective Action Plan (CAP). Items which do not score substantially met, will require comments which will be used for developing a CAP. Facilities will have 14 days to address the missing items and submit corrections or a plan to make necessary corrections (for example trainings, this can take time to find and schedule). Track CAP corrections on this form and document the date corrections are received.	
Section	Section Score
Section 1.1: Services Provided in a Transitional Living Program	
Section 2: Description of Youth to be Served	
Section 3: General Staffing Requirements	
Section 4: Case Coordination	
Section 5: Staff In-Serving Training	
Section 5.2: Annual In-Service Training	
Section 6: Confirmation of Placement	
Section 7: Assessments	
Section 7.2 Initial Assessment	
Section 8: Room Assignment	
Section 9: Services	
Section 10: Behavior Management	
Section 10.1 Resetting	
Section 10.2 De-escalation Certification	
Section 10.3: Emergency Safety Interventions Certification	
Section 11: Program Plan	
Section 12: Visitation	
Section 13: Discharge/Aftercare	
Section 14: Record Keeping	
Section 15: Reporting Abuse/Neglect	
Section 16: Significant Incidents	
Total Score	
If the score is 63 or less, the result is an automatic Corrective Action Plan (CAP). Use the comments captured above to develop a CAP on the following pages. The facility will have 14 days to address the missing items and submit corrections or a plan to make necessary corrections, as applicable. Some corrective items may take longer, such as training compliance.	

Transitional Living Program (TLP) Corrective Action Plan

Date of Site Visit	Final Score on Site Visit Tool	DCF Surveyor:
Facility Name		
Address, City, County, Zip Code		
Agency/Facility Representative	Agency/Facility Phone Number and Email	

Correction/Compliance Action Plan

Presented Findings:

Please use the comments listed on the site scoring tool to outline the presenting corrections and steps needing to be taken to ensure compliance with all DCF Policy and Procedures, Placement Standards and Provide Agreements are met. If more sections are needed, please add accordingly.

Finding:

Action Plan to Correct Finding:

Person Responsible for Completion:

Target Date for Completion:

Finding:

Action Plan to Correct Finding:

Person Responsible for Completion:

Target Date for Completion:

Finding:

Action Plan to Correct Finding:

Person Responsible for Completion:

Target Date for Completion:

Signatures

By signing the Corrective Action Plan I agree what is listed above is accurate and complete. I understand I may be required to provide additional information or modify the plan as needed to ensure full compliance. I further understand this information may be provided to DCF Licensing, if necessary to ensure the safety and well-being of the children and youth served.

Agency/Facility Representative

Date

DCF Surveyor

Date

