

PROGRAMS UNIT  
PROGRAM REVIEW SCORE SHEET  
**INMATE RE-ENTRY PROGRAM**

Date of Review:

Reviewed by:

The Re-Entry Program Review consists reviews of case files, Risk Management Reports, Client Progress Notes, external reviews, and employees' training files. The Case File Review is comprised of 9 critical standards for which compliance is mandatory, and 23 secondary standards. Scoring is either in compliance (1 point), non-compliance (0 points), or NA to indicate standards that do not apply to the file being reviewed. NA scores are subtracted from the total number of points a file can earn. Failure to comply with all Critical Standards results in an automatic non-compliance rating for the entire file. The target score for secondary standards is 80%. The final number reported is the total number of files in compliance out of the total number of files that were reviewed (for example, 18 out of 20 files or 90% were in compliance).

**Legend**

- Critical Standards
- Reviewer Must Enter Requested Number
- A Formula is in the Cell - Do Not Change

**I. FILE REVIEW**

**SATISFACTORY SCORE THIS SECTION IS 100% COMPLIANCE W/ CRITICAL STANDARDS**

Scoring: 1 = Compliance; 0 = Non-Compliance; 1 = NA

CRITICAL STANDARDS	Satisfactory Score This Section is 100% Compliance w/ Critical Standards																			
<i>Compliance is Mandatory</i>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1. A comprehensive assessment of inmate's strengths, risks and needs to include the Booking Process's mental health staff's assessment and the Orientation and Assessment Process's SALCE and TABE assessment	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
2. The assessment is completed within two days of entering program, or written explanation if not.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
3. Transition plan completed within five days of entering program, or written explanation if not.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
4. Basic Needs Classes/Activities are presented in motivational educational principals and provided as schedule.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
5. Dually Diagnosed Groups are provided as designed and on schedule for all designated populations.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
6. Establish an enduring, stable and dynamic community referral network committed through signed service agreements. 1. Outreach efforts are practiced and documentation maintained. 2. Number of new community/faith based agencies	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
7. Monthly, quarterly and annual reports are completed on time	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
8. Prior to release, update transition plan and establish plan of action with community providers to facilitate uninterrupted services upon inmate's return to the community.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
9. Client surveys are completed on all inmates prior to release or written explanation if not.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b># OF CRITICAL STANDARDS IN COMPLIANCE</b>	Max=9 minus NA Scores																			
<b>COMPLIANCE (C); Non-Compliance (N)</b>	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
<b># OF FILES IN COMPLIANCE</b>	20	out of																		
	20	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1

SECONDARY STANDARDS ASSESSMENT	SATISFACTORY SCORE IS 80% ON SECONDARY STANDARDS (4=max # pts that can be missed)																			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
1. All inmates are screened for Social Security Income (SSI), Social Security Disability Insurance (SSDI), Medicaid eligibility, and Florida I.D. Card	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
2. If inmate signs consent, contact family to assess their needs.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
3. The assessment is completed & signed by the assessor, and supervisor	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>SERVICE PLANS</b>																				
4. Transition plan developed w/ full participation of inmate & Program Planner	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
5. Transition plan aligned with assessment.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
6. Transition plan specifies referrals by what agency, and how they are to be provided.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
7. Transition plan includes updates/plan reviews with inmate.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>INFORMED CONSENT</b>																				
8. Copies of signed, written consent forms.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>CASE NOTES</b>																				
9. Case notes are signed and dated by worker.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
10. Chronological progress notes documenting all activities related to the case.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
11. Case supervision is documented & includes Program Director's signature.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>CASE REVIEWS</b>																				
12. Program Director conducts quarterly case reviews based upon SOP criteria.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>COMPLETION STATUS</b>																				
13. Each case contains a Discharge Summary form indicating:	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
14. Services Provided	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
15. Progress of the Inmate	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
16. Updated Transition Plan	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
17. Referrals, recommendations, aftercare	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
18. Follow up information	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>RELEASED FROM JAIL</b>																				
19. Re-entry releases and referrals are tracked to determine upon release the inmate's destination.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>GENERAL</b>																				
20. Records clearly legible.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
21. Records are marked confidential.(Mental Health)	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
22. Records are kept locked & access limited as appropriate.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
23. Records are up-to-date from assessment to release	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
<b>FILE REVIEW SCORES ON SECONDARY STANDARDS ONLY</b>																				
THE TOTAL NUMBER OF SECONDARY STANDARDS IS 23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23
NUMBER OF NAs GRANTED (Secondary Standards Only)																				
MAX NUMBER OF POINTS THAT CAN BE EARNED PER FILE	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23	23
# OF POINTS EARNED ON SECONDARY STANDARDS	18	19	21	18	20	18	21	22	23	23	23	23	23	24	22	23	23	23	23	23
SCORE AS A PERCENTAGE PER FILE	78%	83%	91%	78%	87%	78%	91%	96%	100%	100%	100%	100%	100%	104%	96%	100%	100%	100%	100%	100%
# OF FILES IN COMPLIANCE	17	out of	20	Score = 85%																
<b>FILE REVIEW RESULTS FOR CRITICAL &amp; SECONDARY STANDARDS COMBINED</b>																				
FILE IN COMPLIANCE - Yes = 1; No = 0 (Critical & Secondary)	0	1	1	0	1	0	1	1	1	1	1	1	1	1	1	1	1	1	1	1
# OF FILES IN COMPLIANCE	17	out of	20																	

**II. RISK MANAGEMENT REVIEW**

1. Incidents that occur are reported accurately and in a timely manner.	<input checked="" type="checkbox"/> Compliance	<input type="checkbox"/> Non-Compliance
2. Serious incidents handled in accordance with SOPs.	<input checked="" type="checkbox"/> Compliance	<input type="checkbox"/> Non-Compliance

Comments:

**III. SERVICE VERIFICATION REVIEWS**

1. Program verification provided for at least 10% of the inmate re-entry population and include cases from each employee.	<input checked="" type="checkbox"/> Compliance	<input type="checkbox"/> Non-Compliance
2. Program Director will personally speak to inmates to verify that services were provided as indicated in the case file.	<input checked="" type="checkbox"/> Compliance	<input type="checkbox"/> Non-Compliance
3. Program Director addressed evidence of discrepancies in program verification and case file.	<input checked="" type="checkbox"/> Compliance	<input type="checkbox"/> Non-Compliance

**VI. TRAINING REVIEW**

TRAINING	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
TRAINING SCORING: YES, NO, NA. "NO" SCORES INDICATE NON-COMPLIANCE.																				
1. Training plan developed for new staff within one week of hire.	1	1	1	1	1		1	1	1	1	1	1	1	1	1	1	1	1	1	1
2. Training plan includes required training (for both new hires and employees who have been with the Division for more than a year).	1	1	1		1	1	1	1	1	1	1	1		1	1	1	1	1	1	1
3. Training is completed within one month from date of hire.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Max score = 3	3	3	3	2	3	2	3	3	3	3	3	3	2	3	3	3	3	3	3	3
COMPLIANCE (Y) OR NON-COMPLIANCE (N)	Y	Y	Y	N	Y	N	Y	Y	Y	Y	Y	Y	N	Y	Y	Y	Y	Y	Y	Y
Number of Employees in Compliance	16	out of		19	[# of Training Files Reviewed]		Score= 84%													

Comments:

Feedback from Program Director:

**V. STAFFING OVERVIEW**

STAFFING OVERVIEW	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20
TRAINING SCORING: YES, NO. "NO" SCORES INDICATE NON-COMPLIANCE.																				
1. Employee's files are updated annually to include: copies of Social Security Card and driver's license, emergency phone contact and copies of credentials ( i.e. diplomas, degrees, transcripts).	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
2. Job descriptions are included in the file.	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
3. Staff performance reviews are completed annually.	1	0	1	1	1	1		1	1	1	1	1	1	1	1	1	1	1	1	1
4. Training records are updated quarterly and need to indicate the following: a. Each staff have a training log, whereby, the number of training hours, location and topic of training is documented. b. A running total of training hours needs to be on a yearly basis. c. Training records should contain copies of the agenda, or outline of the training. d. All licenses and certifications are current.	1	1		1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Max score = 4	4	3	3	4	4	4	3	4	4	4	4	4	4	4	4	4	4	4	4	4
COMPLIANCE (Y) OR NON-COMPLIANCE (N)	Y	N	Y	Y	Y	Y	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Number of Employees in Compliance	16	out of		19	[# of Training Files Reviewed]		Score= 84%													

Comments:

Feedback from Program Director:

