



VA DJJ Transformation Initiative: The Regional Service Coordination (RSC) Project

Guidance for EBA Sub-Contracted Providers About Centrally Managed
Referrals, Funding and Delivery of Services

PURPOSE

This Manual is designed to inform contracted Direct Service Providers (DSP) of EBA expectations and processes detailed in the Sub-Contractor Agreement. This is only designed to be a guide for day to day application and it not designed to replace or supplant the fully executed contract.

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WHO’S WHO?

Regional Service Coordinator (RSC): An EBA staff member who coordinates referrals and service authorizations, acting as the liaison between the DJJ Staff (CSU/CAP staff) and the Direct Service Provider (DSP).

Direct Service Provider (DSP): That’s you! A private or public agency that delivers services to youth and families in the community (e.g. youth’s home, agency office), within detention facilities, or residential programs.

EBA serves the full continuum of **DJJ-Involved Youth (Youth):** Youth involved in various stages of the Virginia Juvenile Justice system (and their families), including youth supervised by the court, committed youth, or youth placed on probation or parole. These youth generally demonstrate various levels of criminogenic risks to reoffend and display behaviors to include, but not limited to: delinquent history and propensity to commit delinquent acts/crimes in the future, running away from home, residential placements, association with anti-social companions (e.g. favorable attitudes towards violence, dishonesty, and rule breaking), impulsivity, low levels of educational achievement, mental health diagnoses, and poor school performance.

Meet the EBA VA Team.

Kara Brooks, VA Project Director
804-433-7554 (cell)
kbrooks@ebanetwork.com

Lindsey Dixon, Western RSC
ldixon@ebanetwork.com

Tina Hawkins, Northern RSC
thawkins@ebanetwork.com

Gladylu Burgos, Central RSC
GBurgos@ebanetwork.com

Dan Edwards, Director of Business Development
dedwards@ebanetwork.com

Nicole Janer, Sr Director of Operations
njaner@ebanetwork.com

Margaret McAlister, Human Resources
MMcAlister@ebanetwork.com

Bob Sayles, Director Information Management and Technology
bsayles@ebanetwork.com

Vivian Little, Fiscal Specialist
vilittle@ebanetwork.com

Direct Billing Questions to:
BillingVA@ebanetwork.com

Please contact Kara Brooks or the RSC assigned to region for additional information.

Ongoing Communication

EBA Communique



EBA encourages ongoing communication. EBA uses the Mail Chimp Platform to share information. Various members of the provider's agency are suggested to attend, including the Contract Signor/Administrator, Program Director, clinical lead, and billing staff. [Sign up Here](#)

The Newsletter may share additional information about ongoing training events including First Friday Support Calls, DJJ conferences, or EBA training options.

BACKGROUND.

DJJ contracted with AMI and with EBA to implement and manage a continuum of services provided to Virginia's Department of Juvenile Justice (DJJ) involved youth with regards to a variety of residential and community-based programs. Both agencies seek to support DJJ's efforts and to collaborate, coordinate, and align transformation efforts as much as possible.

The goals of this initiative include a) use of best-practices and evidence-based interventions that have been shown to reduce juvenile recidivism and improve long-term outcomes; and b) achieve measurable reductions in the rate of re-arrests, re-adjudications, and commitments (or recommitments) to Juvenile Correctional Centers. For more background on evidence-based models and interventions, see the EBP Overview [\(Attachment A\)](#).

TARGET POPULATIONS

The primary target population(s) include youth involved at various stages of the DJJ system and their families. These youth, including males and females, typically aged 12-20 at the time of referral, may have been committed to Direct Care and are scheduled for release/reentry, or they may be on DJJ community supervision (parole or on probation). Youth eligible for services under this funding stream will be at higher risk of reoffending and are therefore more likely to require intensive, individualized services to obtain the supports needed to achieve positive outcomes.

Youth referred for these services demonstrate various levels of criminogenic risk to reoffend and often display the following behaviors and needs:

- Delinquent history and propensity to commit delinquent acts/crimes in the future
- History of running away from home, foster care, and/or residential placements
- History of association with anti-social companions (i.e.: favorable attitudes towards violence, dishonesty, and rule breaking)
- Impulsivity, poor emotional regulation, and inadequate decision-making skills
- Low levels of educational achievement
- History of low family affection/history of poor supervision
- History of substance abuse
- History of self-destructive behavior
- Mental health diagnoses (such as Post-Traumatic Stress Disorder, Depression, Oppositional Defiant Disorder, and Attention Deficit Hyperactivity Disorder)
- Low or limited functioning youth
- History of poor school performance
- Lower levels of job readiness and independent living skills
- Need for focused intensive transition and community reintegration services
- History of trauma and exposure to violence

WHAT SERVICES ARE PROVIDED, WHERE?

EBA prioritizes providers of quality clinical service, evidence-based programs and providers who meet the needs of DJJ involved youth in a clear and documented methodology. Upon contracting, each DSP shall communicate current services offered through their agency, including documentation of licensure status, treatment modalities, and evidence-based program certifications, as appropriate. The services purchased through EBA shall be offered according to the qualifications and description of services outlined by the approved Service names.

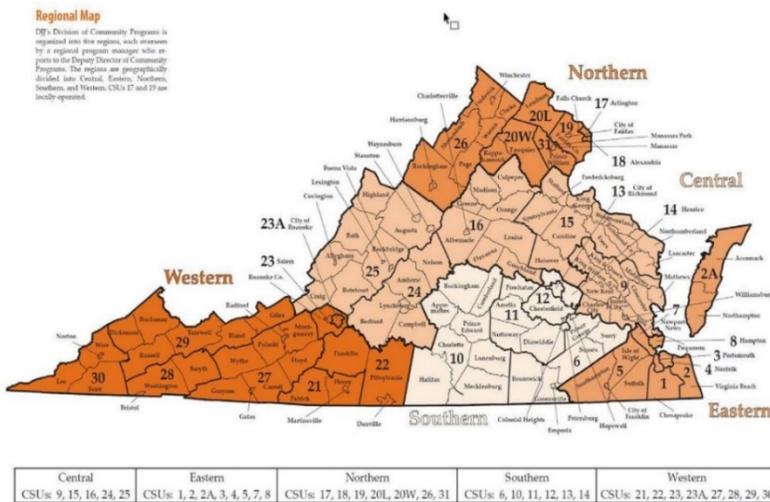
SERVICE AREAS

The contract formally references **Geographic Regions**. DSPs shall indicate to EBA, in connection with the application and prior to the contract, the geographic regions within which the DSP is able to provide Services. DSPs shall only be obligated to provide Services in those geographic regions. The goal of EBA is to work with DSPs to expand into regions that need further support or to meet a need that is identified.

To fulfill this portion of the contract, EBA developed an online Provider Map that allows DSPs to adjust and grow easily outside of a formal contractual agreement, by updating the [EBA Provider Directory](#).

The [EBA Provider Directory](#) is a tool utilized by the CSU staff to locate services for youth; it can grow out of date frequently as providers add and change service provisions. An accurate directory ensures that EBA can link service referrals to appropriate providers and identify service gaps across the DJJ regions.

Also note, the directory captures languages spoken other than English, to help meet this growing responsibility need.



Please take a moment review your agency listing for accuracy on a regular basis.

Providers are encouraged to use the [Self-Service tool](#) to submit edits exactly as you would like them to appear in the directory.

Please note that this tool works best in the Google Chrome Browser.

EBA Regions

EBA serves youth referred from CSUs in the Northern, Central and Western Region, but youth may temporarily reside in various areas of the state.

Service Names and Definitions. DSP shall provide Services per the criteria defined in “EBA Services Names and Definitions”. DSP shall meet all requirements for documentation, delivery of service, and reporting timelines, as identified in the contract and by the appropriate licensing body for Services. DSP shall provide Services at or above the quality level prevailing in the community for the provision of similar services at the time of performance.

CONFIDENTIALITY.

Any information obtained by the DSP concerning youth shall be treated as confidential. Use and/or disclosure of such information by the DSP shall be limited to purposes directly connected with the DSP's responsibilities for services. DSP agrees to adhere to all Federal and State laws and regulations regarding confidentiality of juvenile offender and student information, including the confidentiality provisions of Section 2.2-5210 of the Code of Virginia. This includes, but is not limited to, not photographing a youth and not permitting media coverage of the Youth without the written permission of the parent(s) or the legal guardian(s). It further precludes audiovisual recording of the Youth as well as prohibits the Youth's participation in any research projects without the written permission of the parents(s) or the legal guardian(s).

Signed Confidentiality Agreement Required. DSP shall require all Personnel that have contact with individuals receiving services through the RSC Model/ EBA contract to sign the Confidentiality Agreement. DSP shall, upon request, provide signed copies of such Confidentiality Agreements to EBA ([See Attachment B](#)).

Contract Requirements Information Security. Providers are required to use an encrypted e-mail product approved by DJJ Information Services to send and receive all e-mails containing data or any other identifying information (e.g. name, juvenile number) concerning Youth and families.

Keep Contact Information Current

Storage. DSP shall maintain any records that indicate the identity of juveniles in the custody of DJJ in paper form, in a locked file cabinet at all times.

Electronic Records. Any electronic records maintained by the DSP shall be maintained in accordance with DJJ's Mutual Nondisclosure Agreement and DJJ's Security.

Provide EBA with the contact person(s) in your agency that will handle referrals. We need to know whom to send information to provide an efficient process.

REFERRAL PROCESS

Security

EBA sends authorized referrals to DSPs to initiate services for youth and families involved with DJJ. In efforts to ensure client confidentiality and privacy within the Service Coordination process, EBA uses Virtru as the method of sending referrals and supporting client documentation to DSPs. DSPs are also able to reply to the e-mail thread in a secure fashion.

Referrals & Service Authorization

EBA will issue a referral packet to the DSP (secured through Virtru). The referral packet will include a minimum of the following items:

- BADGE Face Sheet (this has the youth's demographics, home address, and family's contact information)
- Continuum of Services and Rationale Form
- Release Form
- YASI Wheel and YASI Behavioral Analysis

Depending on the type of service the following items may be attached to provide the needed background information: CAP Assessment(s), Case Plan, Court Order, JCC/BSU Reports, MHSTP, Social History, and other items as needed. An e-mail from EBA with the Referral Packet will notify the DSP of the need for Services. Depending on the type of service and admission process, the service authorization or Purchase Order (POSO) may accompany the referral packet.

In all cases the DSP needs to respond and confirm the service start date as soon as possible, no longer than three (3) days after receipt of the referral. The DSP shall notify EBA RSC and CSU Staff of the Service start date (hopefully this is one streamlined e-mail).

The POSO will describe which services are requested and shall designate a weekly/monthly number of qualifying program hours. As EBA (and the local CSU) learn your program, please communicate and share information about the services provided to make the dosage request accurate (considering open groups, closed group start dates, transportation needs, etc.).

Make sure the referral and service request come from the EBA RSC! This includes authorizations for service extensions. If a PO or CAP unit contacts you directly to start services, please check with the RSC before beginning services to ensure funding approval.

The Contract references **Dosage Guidelines**. This simply means services will be provided in accordance to EBA's POSO. The DSP will adhere to the service request for referred youth and will track program participation for each. The DSP shall not exceed the approved number of units in the POSO. Requests for changes or alterations to the approved Dosage shall be made to the assigned Court Service Unit (CSU) staff **and** EBA.

What is the YASI?*

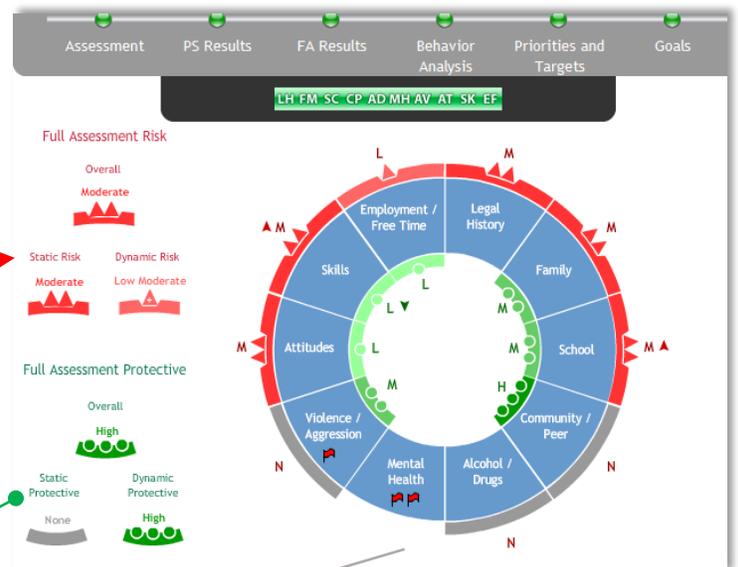
The Youth Assessment and Screening Instrument (YASI) Wheel and Behavioral Analysis are included in the original Referral packet and are a required part of the DSP's Service Plan and service intervention with the youth.

The YASI is an assessment tool which evaluates risk, needs, and protective factors for youth involved in the DJJ system. The tool reviews the youth's risk to re-offend and is not designed for youth with no criminal history (which is different than the CANS, used frequently in other state systems to assess strengths and needs).

The CSU performs the YASI to anticipate future recidivism, risk level, and required intervention. The full assessment includes 87 items and becomes the basis of the case plan. The CSU gathers the needed information prior to completing the assessment, which produces the visual wheel and the base format for the case plan.

The YASI is completed initially and every 90 days thereafter which allows the CSU staff and EBA to assess the effectiveness of services.

Sample YASI Wheel.



The **red arrows** on the outside reflect risk levels associated with each portion of the wheel. **STATIC RISK** areas are unchangeable as they are historically based. Whereas, the **DYNAMIC RISK** Factors change and are likely to improve with effective services.

The green circles represent protective factors or strengths within the categories. The **STATIC Protective factors** are historical and the **DYNAMIC** Factors are able to be changed and impacted by services. This captures the strengths of each area.

Note: Mental Health will not indicate Risk or Protective Factors, as a diagnosis doesn't increase recidivism, but the flag alerts the viewer to a diagnosis or incident.

*This is merely an overview and doesn't substitute a full YASI training. Please let the RSC know if you want additional training, we can review the date with you or send you a training video.

BILLING.

EBA collects a single monthly invoice from each Provider (with all youth captured on a single EBA Invoice). The DSP will prepare and submit an activity form, a comprehensive monthly invoice, to EBA by the 5th day of the month following the month in which services were delivered, for all youth served.

All invoices shall include an itemized activity form containing (A) CSU, (B) Youth Served, (C) Services Provided, (D) Date of Each Service, (E) Number of Units Provided, and (F) the Service Charge per Service.

Sample Activity Form

Activity Form										
Provider										
Month										
Year	2017									

Totals	
Units	Dollars
7	\$420.00

CSU	First Name	Last Name	Juvenile #	Category	Service	Units	Billing Rate	Billing Unit	Billable Amount	Activity Date
24	FIRST	LAST	J ID#	Intensive In-Home Family Services	Intensive In-Home Family Services	3	\$60.00	HOUR	\$ 180.00	12-Apr-17
	FIRST	LAST	J ID#	Intensive In-Home Family Services	Intensive In-Home Family Services	2	\$60.00	HOUR	\$ 120.00	18-Apr-17
	FIRST	LAST	J ID#	Intensive In-Home Family Services	Intensive In-Home Family Services	2	\$60.00	HOUR	\$ 120.00	19-Apr-17

All invoices need to be sent with the Service Plan and Monthly Progress Report for each Service provided. When submitting the Activity Form, save the file with the agency name and month (i.e. Agency August 2018 Billing).

Final Invoices. The DSP shall submit the final invoice for payment to the EBA no more than forty-five (45) days after the Termination Date.

Other Billing Concerns.

Unauthorized Absences. For residential programs, to include group home and IL placements, payment for unauthorized absences to the DSP shall be made at the rates specified in the POSO, not to exceed seventy-two (72) hours without prior written approval of the EBA RSC. Unauthorized absences include, but are not limited to, placement in detention, hospitalization, or AWOL, as determined by the EBA RSC. Should EBA provide written approval to continue payments during unauthorized absences exceeding seventy-two (72) hours, such payments shall be made in accordance with a separate written agreement with the DSP. The DSP shall not be required to maintain a youth's placement for more than seventy-two (72) hours following an unauthorized absence without prior written agreement to continue payments to hold the placement.

- For office-based, community service, neither absences nor no-shows, whether authorized or not, will be funded.
- For community-based services, provided in the home, a DSP may bill for the "travel time" only once during the month, if good faith efforts to contact the family are made as determined by EBA's discretion (i.e. DSP confirms with the family prior to the appointment, etc.). EBA reserves the right to approve or deny payment for travel time in its sole discretion.

Medicaid?

Yes, we want to maximize Private Insurance and Medicaid-funded services, whenever available for the appropriate treatment of youth receiving services. Not only to be wise stewards of DJJ funding, but to also maintain the natural supports and resources for the youth and families within their community.

Licensed DSPs shall meet all Medicaid requirements for documentation, delivery of service, and reporting timelines for Medicaid services (i.e. Intensive In-Home). The DSP shall submit all required documentation for approval by the Department of Medical Assistance Services (DMAS) in a timely manner as soon as the proper documentation has been received by the DSP.

If the DSP is Medicaid eligible (including outpatient therapy or residential), it shall confirm the status of Medicaid eligibility for all youth prior to providing any services, and it shall file for Medicaid reimbursement for all eligible youth and services. If a Youth is eligible for Medicaid, then the DSP shall seek reimbursement for Services from DMAS. If the DSP receives Virginia Medicaid payments for services rendered under this Agreement, such payments shall constitute payment in full for those services. EBA shall not reimburse the DSP more than the Medicaid-authorized rate for the same service. EBA shall not be responsible for reimbursing a DSP for Medicaid-eligible Services. Notwithstanding the above, if, through no fault of the DSP, Medicaid denies a claim for services, EBA shall reimburse DSP for such Services. EBA shall not accept or pay invoices for Medicaid-eligible services until DMAS determines services are no longer reimbursable for a youth. Should Medicaid be discontinued or denied (and the discontinuance or denial is not attributable to the fault of the DSP), EBA shall become responsible for all services outlined in the POSO, provided the specific client is not receiving Medicaid.

The DSP shall provide to EBA a copy of all Medicaid approval and denial certifications with monthly billing. EBA may, in its sole discretion, choose not to reimburse DSP for Services if DSP fails to timely notify EBA.

COVID-19 Guidance

Joint guidance released 3.2020 by DJJ, EBA and AMIkids

In response to the COVID-19 pandemic, providers contracted with EBA through DJJ's RSC Model are permitted to deliver all currently authorized **Clinical, Non-Clinical, and Case Management** services via telehealth (including telephonic communications), with the following notes and requirements:

- Providers shall only bill, and EBA will only reimburse, for structured sessions that are consistent with the previously issued purchase of service authorization and in alignment with the previously developed YASI-driven service plan.
- Care coordination and supportive "check-ins" while encouraged are not billable in lieu of authorized services and will not be funded.
- If the provider is delivering services only through telephonic communications (no video), the provider will bill and AMI and EBA will authorize payment only one hour of service per day, regardless of the duration of the call (this mirrors DMAS's limits for Medicaid-funded IIH services).
- Providers shall maintain appropriate documentation if the plan to provide or continue care deviates from the normal protocol or mode of delivery and shall maintain ongoing communication with CSU staff.
- Monthly reports shall include a rationale for the service delivery mode chosen to include virtual sessions, telehealth or precautions taken for face to face sessions.
- Documentation for all services must include the date, time, participants, modality (e.g. telephone, Zoom, FaceTime, Skype) and intervention utilized.

DOCUMENTATION.

All documentation, including but not limited to Service Plans, Monthly Reports, and Discharge Reports shall be submitted to the assigned CSU Staff and EBA.

Service Plans.

DSP shall design a Service Plan (or Treatment Plan) in conjunction with the Youth, an assigned Probation or Parole Officer (“CSU Staff”) and, when applicable, the parent(s)/guardian(s). Such **Service Plans must be consistent with, and describe a reasonable plan to meet, the goals of the court and must comport with the Youth’s court supervision status, the criminogenic need identified in the referral packet, YASI, and other related assessments.**

The Service Plan shall include the following:

- Specific measurable, achievable, time-limited goals;
- Related tasks indicators for the achievement of identified outcomes as they apply to the Youth’s discharge from services; and
- Signatures of the Youth, (where applicable) the Youth’s parent(s)/custodian(s), and CSU Staff.

Monthly Progress Report.

DSP shall submit a written monthly report addressing each goal of the Service Plan related to authorized services on the POSO. Monthly progress reports shall be sent to the assigned CSU Staff and the EBA billing email address and shall include the following:

- Progress towards the identified measurable objectives listed in the Service Plan
- Specific activities and strategies worked on during the month
- Assessment of level of family engagement partnership
- Revisions to measurable objectives, as appropriate
- Completion date or anticipated completion of each objectives

When Services are billed in hourly units, the following items are required on the Monthly report: the date, time, duration of each service; the names of the individuals involved in the service; and the location at which the service was provided.

Monthly Report Template

The Monthly Report Template is located on the EBA website, the template is intentionally unlocked, to allow providers to individualize or modify as needed.

Youth Information	
Youth Name:	JTI#
Age:	
CSU:	PO:
Service Information	
Service Authorized:	Date Service Initiated:
Service Plan Date:	Next Review Date:
Worker Name: (and Credentials)	Supervisor Name: (and Credentials)
Has the assigned Staff or Supervisor changed during the last month? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates of Services: (Include participants and location, as applicable)	
Case Coordination: Include contact dates and type with CSU, Family, other providers or systems	

Discharge Reports.

The DSP shall submit a fully and accurately completed written Discharge Report to EBA and the CSU Staff within 20 calendar days of termination of Services. The discharge plan must be completed prior to submission of the final invoice for payment. The discharge report shall include:

- Status of discharge (successful or unsuccessful);
- Overall progress made toward the identified measurable objectives; and
- Youth-specific recommendations for continued services.

Other Documentation.

Upon request, the DSP shall provide EBA with a copy of any reports, including, but not limited to, progress notes, social histories, physical examinations, and psychological exams and psychiatric evaluations performed by the DSP or while in the DSP’s care.

Quarterly and Annual Reports.

Each DSP shall submit quarterly and annual reports that reflect the effectiveness of Services and outcomes of the Services for Youth served. The performance areas to be addressed shall include, but not be limited to the following:

- Number of Youth served and completion status (i.e. successful and unsuccessful completions);
- Average length of stay;
- Educational Status to include number of Youth attaining high school diploma, pursuing GED, receiving special educational services, and graduates. Of the graduates, how many participate in higher education or vocational training;
- Number of AWOLS and serious incidents that follow DJJ’s SIR policy and procedure criteria;
- Number of treatment hours delivered to each Youth
- Staff training hours targeting Evidence-Based Services, per staff member and aggregated quarterly totals.

Performance Objectives.

DSP’s delivery of the services shall be evaluated against Performance Objectives, as defined by EBA. Developing such Performance Objectives will be a collaborative process between DJJ, EBA, and DSPs. Failure to meet Performance Objectives or failing to submit required reports may result in termination of this Agreement or imposition of a Corrective Action Plan, at the discretion of EBA.

Service Completion Form

The Service Completion form is required for all referred youth. It is a simple way to capture the outcome summary for youth on a monthly basis. For youth that do not begin services, the form allows the DSP to indicate the reason the service was not started. For all other youth discharged from the program/service, the DSP shall report the Service start date, Service plan date, Service closure, completion, and if the youth achieved their goals while in the program.

The screenshot shows a software interface for a 'Discharge Form'. At the top, there is a title 'Discharge Form' and a dropdown menu for 'Provider' with the text '**Select Provider Name From Dropdown List**'. To the right is a date selector for 'August 2018'. Below this is a summary row showing 'of Discharges in the Current Month' with a value of '0'. On the right side of the form is the logo for 'evidence-based associates' with the tagline 'SUPPORTING FAMILIES. STRENGTHENING COMMUNITIES.'. The main part of the form is a table with the following columns: 'First Name', 'Last Name', 'JTI #', 'DJJ Category', 'Service', 'Service Start Date', 'Service Plan Date', 'Actual Service Completion', 'Final Actual Dosage', 'Unit', 'Service Completion Status', 'Service Progress', and 'Service Never Began Reason'. The table is currently empty, showing only the header row.

SERIOUS INCIDENT REPORTING.

All serious incidents, *actual or alleged*, relating to a Youth shall be reported by the DSP.

Serious incidents include, but are not limited to:

1. Death

2. Fire;
3. Alleged child abuse or neglect;
4. Serious juvenile injury or illness;
5. Serious staff injury or illness;
6. Juvenile on juvenile assault;
7. Juvenile assault on staff;
8. Staff arrest or serious misconduct; and
9. Any other serious occurrence out of the ordinary course of operations that is likely to attract attention of the media or the general public or that could result in litigation.

The SIR Report. The Serious Incident Report (“SIR”) shall provide a factual, concise account of the incident, to include: the name of the DSP, the name of the Youth, the date and time of the actual incident, the location of the incident, the names, titles, and locations of staff who responded, a description of the incident including a clear statement of what happened including any physical evidence, nature of the response including any use of physical force, any medical treatment, any external assistance, any program sanctions, criminal charges or justification when criminal charges are not sought in instances of assault causing serious injury, the action taken, the names of any witnesses, any recommendations, the name of the individual completing the report, the date of the report, and all notifications made.

SIR Notification. Proper notification of the incident shall be made to (1) the appropriate public safety authority, as required by law and the State licensing board; (2) Verbal notification of the incident shall be provided to the youth’s parent(s)/custodian(s) and CSU/CAP Staff on the day of the incident, and (3) Written notification of the incident, shall be provided to EBA and CSU Staff within one business day of the incident.



DJJ Requires each Provider Submit an Incident Report Form to the CSU, referring staff, and RSC on the Approved Incident Report Forms.

The instructions and forms are both located on the EBA Website:

- 1) [Direct Care DSP Incident Report Form](#)
- 2) [Non-Direct Care DSP Incident Report Form](#)

The [Notification Form](#) or other SIR formats may be utilized for Incidents that do not rise to the level of reportable incidents listed on the DJJ DSP Incident Report Forms.

INSURANCE.

The DSP shall, at minimum, have the following types and amounts of insurance coverage. All insurance coverage will be provided by insurance companies authorized to sell insurance in Virginia by the Virginia State Corporation Commission. **Please send updated Insurance Policies in a timely manner.**

- **Workers’ Compensation.** Statutory requirements and benefits; coverage is compulsory for employers of three or more employees, to include the employer. DSPs who fail to notify EBA of increases in the number of employees that change their workers’ compensation requirements under the Code of Virginia during the course of the contract shall be in noncompliance with the contract.
- **Employer’s Liability.** \$100,000.
- **Commercial General Liability.** \$1,000,000 per occurrence and \$2,000,000 in the aggregate. Commercial General Liability is to include bodily injury and property damage, personal injury and advertising injury, products and completed operations coverage. The Commonwealth of Virginia and EBA must be named as an additional insured and so endorsed on the policy.

- **Automobile Liability.** \$1,000,000 combined single limit. DSP must assure that the required coverage is maintained by the DSP (or third-party owner of such motor vehicle.)
- **Professional Liability.** \$2,150,000 per occurrence, \$4,250,000 aggregate

If DSP is a government entity, Liability Certificate of Coverage (see <https://www.trsvirginia.gov/drm/state.aspx>).

NO EJECT/NO REJECT POLICY.

While the ‘no-reject’ policy is considered an essential element in the successful performance of DSPs and Service Coordinators, the following helps guide the philosophy and practice.

DJJ FAQ Response to No Reject.

DJJ, in the Responses to Questions Received Through 3-25-2016, answered the following question in response to the DJJ-16-034 Service Coordinator RFP in March 2016.

(21) Question: Will DJJ provide further clarification as what is meant by a “no-reject” policy? Will bidders be required to propose a specific plan for meeting that requirement, or to comply with a specific plan that DJJ will prescribe? If a service coordinator makes a good-faith effort to provide services for a referred young person who fails to successfully complete treatment, will the service coordinator be financially penalized; and if so, how? Will this mean that a DSP cannot reject a youth who meets their program criteria or that in order to be a DSP they must accept any kid that is referred to them?

Answer: Having a No Reject / No Eject Policy means that all referred youth must be served. The requirement is on the Service Coordinator, not necessarily on each individual DSP with whom they subcontract. It will be incumbent upon the RSC to have at least one DSP who will accept the referral. Service Coordinators are to make every effort to provide services for every referred young person, but there is a clause whereby through mutual agreement between the DSP and DJJ services could be discontinued for a juvenile. Each Offeror should respond with their plan for how they will comply with a No Reject / No Eject policy.

EBA’s Contract Language.

EBA has captured the concept DSP shall serve any and all DJJ-involved Youth who are appropriately referred and for whom the service is, in the discretion of the DSP, clinically appropriate. This includes, but is not limited to, referrals made to programs based on the admission/exclusionary criteria, program description, youth’s identified needs, program availability, and program interviews, when appropriate. A referral is appropriately referred if the DSP has indicated to EBA, through this agreement that they have the capability and desire to provide such Services in the location in which the Service is referred.

Should a youth pose an imminent safety risk, the DSP shall provide and coordinate appropriate crisis intervention and communicate closely with EBA and CSU. If the DSP elects to suspend or terminate services to the youth because of new behaviors or increased need, the DSP shall provide a written request to EBA and CSU staff with thirty (30) days’ notice. Services may be terminated only if all parties, including the Courts, parent(s)/legal guardian(s), EBA, and the DSP, agree to such termination. In the case of a residential program, group home, and/or foster care placement, the DSP shall assist EBA in transition planning and assist, if requested, in the identification of an alternative placement option for the youth.

Maintaining a continuum of services to all youth in the DJJ system is considered an essential element in the successful performance of EBA and the DSPs.

Quality Assurance Oversight

In collaboration with Virginia Department of Juvenile Justice (DJJ), the Regional Service Coordinators (RSCs) AMI and EBA, manage and monitor a provider network of Direct Service Providers (DSPs) as part of a regional service coordination model that aims to reduce reliance on the deep-end of the juvenile justice system by improving the quality and quantity of services available in the community. As much as possible, DSPs engage families as partners in the process to increase the likelihood of long-term success and sustainability. To ensure high quality services are provided to each referred youth, the Regional Service Coordinators (RSCs) will implement a quality assurance (QA) process that will:

- monitor service delivery on a range of performance metrics and key quality indicators;
- ensure that all programs and services use evidence-informed principles;
- ensure that evidence-based programs are delivered with fidelity to model standards;
- provide feedback to DSPs and introduce a QA approach and quality improvement (QI) plans;
- introduce and monitor action plans (AP) to address any noted areas of meaningful deficiency; and
- promote informative, periodic reporting on key measures to DJJ.

QA Framework

AMI and EBA adopted DJJ's strategic framework of Safety, Connection, Purpose, and Fairness for this Quality Assurance (QA) and monitoring plan to ensure alignment and to reinforce these principles throughout the regional service coordination model. In addition, the RSCs propose an overlapping framework that focuses first on the youth (safety), then on the quality services that s/he receives (connection, i.e., to the right service within the risk, need, and responsivity (RNR) framework), fairly ensuring the compliance of agencies providing services (fairness), and overall focus on the stakeholders that work together (sensing purpose) to support DJJ's Transformation Project and achieve the overarching goals of the regional service coordination model.

DJJ Principles

SAFETY

Youth and staff need to feel safe in their environment and need a sense of physical and emotional well-being.

CONNECTION

Youth and staff need to feel connected to supportive and caring adults, whether they are family, staff, or coworkers.

PURPOSE

Youth and staff need to have goals to strive toward, skills to hone, and a sense that they have a valuable role to play in the lives of people and the community around them.

FAIRNESS

Youth need to perceive their environment and interactions as fair and transparent. They need to be held accountable in a manner proportionate to their offense and offense history, and similar to other youth in their situation. Staff need to feel that they are treated fairly, compensated adequately, and supported in their efforts to meet the expectations of the department.

OVERVIEW OF EVIDENCED-BASED INTERVENTIONS

The concept of evidence-based practice was developed outside of criminal justice and is commonly used in other applied fields such as medicine, nursing, and social work. In criminal justice, this term marks a significant shift by emphasizing measurable outcomes and ensuring that services and resources are effective in promoting rehabilitation and reducing recidivism. DJJ is committed to supporting this focus on better outcomes for the entire juvenile criminal justice system and for those involved in it. Because there are numerous definitions of evidence-based practice, for the purpose of this process, evidence-based practice consists of three basic principles:

1. Evidence the intervention is likely to work, i.e. produce a desired outcome, and is considered a research based or promising practice; and/or utilizes components of research-based practices proven to be effective
2. Evidence the intervention is being carried out as intended; and
3. Evidence allowing an evaluation of whether the intervention worked.

Evidence-based practices involve using research-based and scientific studies to identify interventions that reliably produce significant reductions in recidivism, when correctly applied to offender populations through the use of the following four principles of effective intervention:

1. Risk Principle – focuses attention on the crucial question of WHO is being served and calls for targeting higher risk youth.
2. Need Principle – requires that priority be given to addressing criminogenic risk/need factors with a clear focus on WHAT programs are delivered and how services are matched to the highest potency needs of individual youth and families.
3. Treatment Principle – conveys the importance of using behavioral treatment approaches to achieve the best possible outcomes and requires attention to the question of HOW programs are delivered.
4. Fidelity Principle – draws attention to HOW WELL programs are delivered and reiterates the necessity that programs be implemented as designed.

Successful implementation of evidence-based practices also includes:

- Organizational development to create and sustain a culture accepting of best practices and evidence-based approaches;
- A commitment to initial and ongoing professional development and training;
- Use of validated risk/needs assessment tools;
- A commitment to data collection and analysis for the purposes of ongoing monitoring, reporting, and decision making;
- Use of programs grounded in evidence-based principles and known to produce positive juvenile justice outcomes;
- Quality assurance activities to ensure program fidelity;
- Performance management to improve programs and policies; and
- A “systems change approach” to develop collaborations so that tasks, functions and sub-units work effectively together and not at cross-purposes.

CONFIDENTIALITY AGREEMENT

I _____ (Receiving Party) hereby enter into this Confidentiality Agreement for the purpose of preventing the unauthorized disclosure of Confidential Information as defined below. I understand that I may learn or have access to Confidential Information and agree to protect Confidential Information against unauthorized access or disclosure.

1. **Definition of Confidential Information.** For the purpose of the Confidentiality Agreement, Confidential Information shall include but is not limited to the identifying information (e.g., name, birthdate), offense, social, medical, psychiatric, and psychological reports and records of individuals, whether identifiable or non-identifiable, who are or have been (i) before the court, (ii) under supervision, or (iii) receiving services from a Court Service Unit or who are or have been committed to DJJ (COV § 16.1-300). Confidential Information also specifically includes arrest information DJJ receives from other agencies for the purposes of evaluating recidivism of DJJ-served populations.
2. **Exclusions from Confidential Information.** Receiving Party's obligations under this Agreement do not extend to information that is:
 - (a) Publicly known at the time of disclosure or subsequently becomes publicly known through no fault of the Receiving Party; or
 - (b) Learned by the Receiving Party through legitimate means other than from AMIkids/EBA, DJJ or DJJ's representatives (Disclosing Parties).
3. **Obligations of Receiving Party.** Receiving Party shall:
 - (a) Adhere to all federal and state laws and regulations regarding Confidential Information;
 - (b) Use the Confidential Information only for the purpose of fulfilling the goals of the proposed project;
 - (c) Hold and maintain the Confidential Information in strictest confidence;
 - (d) Agree to store all data on a password-protected computer or in a secure location;
 - (e) Require any employee or any other individual associated with this project that has or potentially could have access to the Confidential Information to sign this Confidentiality Agreement;
 - (f) Agree to destroy or return to the Disclosing Party all Confidential Information or data within ten days of any request by any of the above-mentioned entities;
 - (g) Agree not to publish, copy, or otherwise disclose to others, or permit the use by others any Confidential Information (however, this does not preclude publication of aggregate data with prior permission of DJJ);
 - (h) Agree to refer any person requesting access to Confidential Information to DJJ;
 - (i) Agree not to publish, disclose, or associate DJJ's name with any publications arising from information received from DJJ without the express written permission of the Director of DJJ; and
 - (j) Agree that any publication, presentation, or disclosure of information received from DJJ will present the results or findings in aggregate form.

Time Periods. The nondisclosure provisions of this Agreement shall survive the termination of the Agreement and Receiving Party's duty to hold Confidential Information in confidence shall remain in effect until the Confidential Information is destroyed.

This Confidentiality Agreement and the Receiving Party's obligations shall be binding on the representatives, assigns, and successors for the Receiving Party.

Project Name VA DJJ Transformation Initiative

Signature: _____ **Date:** _____

ATTENTION: ALL PERSONNEL THAT HAVE CONTACT WITH INDIVIDUALS IN THE CUSTODY OF DJJ, UNDER SUPERVISION OF DJJ, OR OTHERWISE RECEIVING SERVICES UNDER THIS AGREEMENT MUST SIGN THIS CONFIDENTIALITY AGREEMENT. PROVIDER SHALL KEEP SIGNED COPIES OF THIS DOCUMENT ON FILE, AND SHALL PROVIDE SUCH COPIES TO PRIME CONTRACTOR, UPON REQUEST.