**Meeting Minutes**

CDS Family & Behavioral Health Services, Inc.

**Meeting: IYPC STAFF/TRAINING**

**Date: April 30, 2020**

**Time: 4:00PM**

**Location: 1400 NW 29TH ROAD, GAINESVILLE, FLORIDA [on site and conference call]**

**Date of Next Meeting: THE 2ND and 4TH THURSDAYS / May 14, 2020**

**Attendance/Absent:** Attendance: C. McCray, Z. Whitter, N. Thompson, B. Ross, B. Cox, A. Rowden, J. Turk,

B. Smith, J. Mattox, J. Bartley, S. Carter, S. Davis, S. Durham, D. Hooks, O. Jones, K. Lee, R. McBride,

M. McMann, S. Parker, S. Twining, S. Warmack

Absent: G. Strickland, W. Harmon, E. McCrea

**I. Business Operations:**

A. Monthly Budget (Revenue and Expenses)

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

B. Marketing and Business Development

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

C. Regulatory Issues

*May*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

**D. Human Resource Issues (Staffing and Training)**

**1. Sub-topic: Time Sheets Due, 2020**

 **Discussion:**

 **Outcome, Actions, Timeframe: Staff should submit time sheets by 12:00 noon on May 1, 2020, if any information changes after that time send an email to Mr. Whitter with details of the change. [zeke\_whitter@cdsfl.org]. Some staff are still not compliant with this request.**

**2. Sub-topic: Training Needs**

 **Discussion: Areas identified by supervisors and staff discussed**

 **Outcome, Actions, Timeframe:** What Providers for Youth Experiencing Homelessness Need to

 Know- **Coronavirus information. Staff should review the five videos provided and complete the**

 **After Training Test. Test due May 13, 2020.**

**4. Sub-topic: Hazard Pay Sustaining**

 **Discussion: The original time frame for hazard pay, it was to end at the end of April.**

 **Outcome, Actions, Timeframe: Currently the plan is for the hazard pay to continue through the first pay period in May. I’ll keep you updated as we get I learn the ongoing status. We were very fortunate to be able to provide the additional funds and to have youth in house for the time period of hazard pay being provided.**

**5. Sub-topic: CDS Benefits**

 **Discussion: The agency has changed insurance brokers.** **Owen & Associates sent our an email to those persons who currently are eligible to agency benefits. You should have received the email on or around April 9, 2020. The email was a request for you to update your Employee Navigator with Owen & Associates.**

 **Outcome, Actions, Timeframe: Please check your email and complete the request if you have not done so. Two Benefits virtual meetings will occur soon. You are asked to attend one of them. One will be at 8:00am and the other one will be at 4:00pm. Everyone currently receiving benefits should be sure to attend and complete the confirmation process. If you hoping to move to full time status or 30+ hours you should also attend.**

**6. Sub-topic: Staff Evaluations**

 **Discussion:**

 **Outcome, Actions, Timeframe: May be conducted via phone or virtual means.**

**7. Sub-topic: Pending List**

 **Discussion: We have a large number of items on the pending list.**

 **Outcome, Actions, Timeframe: Individual emails will be sent out, the beginning of next week, with the items needed. Please respond to the email with either the requested item or information as to when the pending item will be resolved.**

E. Annual Budget Planning and Process

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

# II. Health and Safety: Program/Regional Coordinators

**A. External Inspections**

**1. Sub-topic: Covid-19 and other Program Supplies**

 **Discussion: We are often searching many locations for the NEEDED items needed for the program to operate safely on the behalf of everyone. We are also finding items out of stock or purchasing limits.**

 **Outcome, Actions, Timeframe: Staff should not remove any supply items from IYPC without permission.**

B. Self-Inspections (Reports, analysis, and recommendations)

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

C. Incident Reports (Reports, analysis of trends, recommendations)

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

# III. Quality Improvement

A. File Audits and Case Record Review (reports and recommendations)

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

**B. Outcome Management (status, reports, recommendations)**

**1. Sub-topic: Follow-Up Calls**

 **Discussion: Mr. Cox**

 **Outcome, Actions, Timeframe:**

C. Accreditation and Regulatory Requirements

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

**D. Policy and Procedure Updates and/or Review**

**1. Sub-topic: Coronavirus Protocol**

 **Discussion: Want to know the concerns of staff. What ifs ???**

 **Outcome, Actions, Timeframe: Please share your thoughts and concerns with any supervisor at any time.**

E. Participant Complaint and Grievance (specific and quarterly review of trends)

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

F. Planning Documents (reports, status of goals and objectives, reformulation)

*1. Sub-topic:* Strategic Plan

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

*2. Sub-topic:* Accessibility Plan

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

*3. Sub-topic:* Cultural Competence Plan

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

*4. Sub-topic:* Input Plan

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

*5. Sub-topic:* Community Relations plan

 *Discussion:*  No discussion

#  *Outcome, Actions, Timeframe:*

# IV. Risk Management

**A. Risk Management Plan (exposure to loss)**

**1. Sub-topic: THE NEW NORMAL**

 **Discussion: What changes that have come from the Coronavirus should we continue afterwards**

 **Outcome, Actions, Timeframe: Example- Keep the front door as a non-CDS staff entrance.**

**B. Employee Concerns or Complaints**

**1. Sub-topic: Open Mic**

 **Discussion: Staff Questions, Concerns, Complaints, Requests, etc.**

 **Outcome, Actions, Timeframe:**

C. Potential regulatory audits and/or investigation of operations

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

# V. Information Technology

A. Technology Plan

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

# VI. Clinical/Program

A. Medical and Medication Issues

*1. Sub-topic:*

 *Discussion:*  No discussion

 *Outcome, Actions, Timeframe:*

**B. Counseling and Programming Issues**

**1. Sub-topic: Participant Updates/Concerns**

 **Discussion:**

 **Outcome, Actions, Timeframe:**

* **Maintaining maximum number of 8 youth for now. Encourage social distancing for ALL activities.**
* **Appropriate s supervision is always required. Continue to watch and listen.**
* **Px have journals. They were told the journal would only be considered private if they kept it private. If they share with anyone staff will not consider it private. Encourage px to keep it private.**
* **Program Schedule: Everyone needs to follow the schedule and work within the boundaries/guidelines of the schedule. Do the activities that are listed. If you do not understand what to do or how to do the activity, call Mrs. McCray. TV/Netflix should not be used as a substitute as an easy out. Monitoring of the schedule has and will occur.**
* **It is necessary to plan ahead. We have art supplies. Look in the hall closet at the front entrance (across from the employee information bulletin board). We have supplies to use, please use judgement to not let px waste material.**

**2. Sub-topic: Documentation**

**Discussion: We are using special documentation forms to record the Life Skills activity and Education/Academic activity.**

**Outcome, Actions, Timeframe: Please use these forms to help us track life skills and education activity as a funding follow-up. The forms are located in the forms drawer, identified as Progress Notes/Education and Progress Notes/Life Skills.**

**3. Sub-topic: Shift Coverage Needs**

 **Discussion: Staff are responsible to securing coverage when they would like to take time off. On the leave request staff should indicate details of the outcome for coverage.**

 **Outcome, Actions, Timeframe:**

1. **Request for coverage by co-workers-**
2. **Request for coverage by program-**

**4. Sub-topic: First Call Process**

 **Discussion: A First Call response was sent to all part-time staff. Each person was asked to respond. Everyone did not respond. Mrs. McCray is still waiting for a response from some staff.**

 **Outcome, Actions, Timeframe: Another request with an updated schedule will be sent out. PLEASE RESPOND. Indicating you are available doesn’t mean that is your assigned shift. You will be contacted that you are needed to work or not.**

**4. Sub-topic: Washable Face Masks for Staff**

 **Discussion: Washable face masks are being provide to px and staff as a response to the CDC recommendation for people to wear face masks in response to the COVID-19 pandemic. In order to save surgical masks and medical masks for health care workers, the CDC said the general public should use cloth face covering made out of household items. “That’s the most important thing to keep in mind- that the purpose of the mask is not to protect the wearer,” Dr. Dean Winslow, an infectious disease specialist at the Stanford University Medical Center, told Digital Trends. “It’s to protect others, in case [the wearer is] asymptomatic or minimally symptomatic but shedding the virus.”**

 **Outcome, Actions, Timeframe: CDS/Interface purchased Washable Face Mask for the specific purpose of staff to wear while working. If staff do not intend to work or to wear the mask at work they are asked not to accept one.**

**5. Sub-topic: Washable Face Masks for Participants**

 **Discussion: Encourage px to wear mask.**

 **Outcome, Actions, Timeframe: Collect masks as px are going to bed, put in laundry bag (make sure drawstring is tight and tucked inside of bag, dry masks. Return masks to px in the morning before breakfast.**

**6. Sub-topic: Service Satisfaction Questionnaires**

 **Discussion: Our result tallies have been low for the last year. The results are a part of our contract outcome measures.**

 **Outcome, Actions, Timeframe: The ability to complete a questionnaire has been added to the front door area. Please ask parents/guardians, when they come, to complete a Service Satisfaction Questionnaire form and place the completed form in the lock box on the wall in the entry area. It’s ok if more than one form is completed. The counselors will be increasing the times they have the px to complete the forms also. Getting the questionnaires is an outcome measure for the CINS/FINS contract.**

**7. Sub-topic: Visitor Protocol**

 **Discussion: ALL non-staff must complete the visitor process each time they come to the shelter, even when meeting with px outside on deck.**

 **Outcome, Actions, Timeframe: Each person should complete the Visitor Survey. Staff should take each person’s temperature and record it on the survey form. Completed forms should be placed in the designated binder in the Control Room. Future survey forms will have added a place for staff name. Also, ask visitors to sanitize their hands upon coming into the building. There is a container at the front sign-in area. Staff should also sanitize their hands when they enter building.**

**8. Sub-topic: Wish List/ Needs List**

 **Discussion: Items needed/desired as a result of the Coronavirus**

 **Outcome, Actions, Timeframe:**

**VII. Other Business:**

**1. Sub-topic: Staff Shout Outs**

 **Discussion: Recognizing co-workers for the “extra” they do to make the work environment better. We applaud all that you do and want to let you know we are grateful. Thank You!!!**

 **Outcome, Actions, Timeframe:**

 **Comments:**

**2. Sub-topic: Happy Birthday!**

 **Discussion:**

 **Outcome, Actions, Timeframe: April Birthdays-**

 **Bruce Cox 4/11**

 **Cassandra McCray 4/22**

**Be safe in house and out of house. What you do to keep yourself healthy will keep others healthy**

Respectfully submitted by:

|  |  |  |
| --- | --- | --- |
| Cassandra Evans-McCray |  | April 30, 2020 |

 Name Date

TRAINING ASSIGNMENT:

What Providers for Youth Experiencing Homelessness Need to Know

1. COVID-19:

<https://www.youtube.com/watch?v=t5XrltnUvuU>

# 2. Symptoms & Screening Procedures:

<https://www.youtube.com/watch?v=XNsdpZFxv1g>

# 3. Triage:

<https://www.youtube.com/watch?v=NaqaAwkGYjs>

# 4. Personal Protective Equipment:

<https://www.youtube.com/watch?v=RzX5mYD4yf0>

# 5. Hand Washing:

<https://www.youtube.com/watch?v=T0o6hkOt2OU>

**Participant School Daily Assignment Outline**

Participant Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_

**Assignments:**

|  |  |  |
| --- | --- | --- |
| Today’s Date: | Start Time: | Class: |
| End Time: | Teacher: |
| Assignment: |
|  |
| Do you need help with this assignment: \_\_\_ yes \_\_ no | Explain how we can help: |
|  |
| Due Date: | Completed Date: | Staff Confirmed: |

|  |  |  |
| --- | --- | --- |
| Today’s Date: | Start Time: | Class: |
| End Time: | Teacher: |
| Assignment: |
|  |
| Do you need help with this assignment: \_\_\_ yes \_\_ no | Explain how we can help: |
|  |
| Due Date: | Completed Date: | Staff Confirmed: |

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| --- | --- | --- |
| Today’s Date: | Start Time: | Class: |
| End Time: | Teacher: |
| Assignment: |
|  |
| Do you need help with this assignment: \_\_\_ yes \_\_ no | Explain how we can help: |
|  |
| Due Date: | Completed Date: | Staff Confirmed: |

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| --- | --- | --- |
| Today’s Date: | Start Time: | Class: |
| End Time: | Teacher: |
| Assignment: |
|  |
| Do you need help with this assignment: \_\_\_ yes \_\_ no | Explain how we can help: |
|  |
| Due Date: | Completed Date: | Staff Confirmed: |

**ON SITE EDUCATION/SCHOOL PROGRESS NOTE/**

**SERVICE TRACKING FORM**

|  |  |
| --- | --- |
| Participant Name | Service Date |
| Start Time: | End Time: |
| Documentation follows a B. I. R. P. guideline:B – Behavior, actual observations and participant statements.I – Intervention, methods use to address goals and objectives, observations, participants statements. R – Response, participant’s response to the intervention and progress made toward individual plan goals.P – Plan, what is going to happen next. |

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| --- |
| Goals for Participant: |
|  | Explore the participant’s current level of academic knowledge. |  | Increase academic knowledge of general. |
|  | Learn three (3) or more new social skills. |  | Learn relevant employment skills. |
|  | Learn to identify appropriate study skills. |  | Apply appropriated study skills. |
|  | Learn healthy classroom behavior. |  | Display healthy classroom behavior.  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Behavior** | **Intervention** | **Response** | **Plan** |
|  | Seemed interested |  | Social skills  |  | Fully participated |  | Continue services |
|  | Interacted positively  |  | Role plays |  | Somewhat participated |  | Developing plan |
|  | Interacted negatively |  | Testing/ evaluations |  | Minimally participated |  | Has a take home plan |
|  | Stayed on task |  | Teaching/ training  |  | Did not participate |  | Plan has adult support |
|  | Used Social Skills ( ) |  |  |  | Provided input |  | Interview |
|  | Expressed feelings |  |  |  | Refused services |  | Employed  |

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| Comments:  |
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PLACE FORM IN PX FILE, IN SECTION FOR SCHOOL PROGRESS NOTES (ONE PER DAY)

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wordpc/forms/onsiteschoolprogressnote

**LIFE SKILLS PROGRESS NOTE/**

**SERVICE TRACKING FORM**

|  |  |
| --- | --- |
| Participant Name | Service Date |
| Start Time: | End Time: |
| Documentation follows a B. I. R. P. guideline:B – Behavior, actual observations and participant statements.I – Intervention, methods use to address goals and objectives, observations, participants statements. R – Response, participant’s response to the intervention and progress made toward individual plan goals.P – Plan, what is going to happen next. |

|  |
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| Goals for Participant: |
|  | Explore the participant’s current level of life skill knowledge. |  | Explore career and employment skills/training options. |
|  | Explore participant’s pre-employment/job search skills. |  | Increase knowledge of general, mental and dental health. |
|  | Learn three (3) or more new social skills. |  | Learn relevant employment skills. |
|  | Learn to identify safe and healthy relationships. |  | Identify one adult to go to for advice or emotional support. |
|  | Learn healthy living behavior. |  | Become employed or looking for work at discharge  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Behavior** | **Intervention** | **Response** | **Plan** |
|  | Seemed interested |  | Social skills  |  | Fully participated |  | Continue services |
|  | Interacted positively  |  | Role plays |  | Somewhat participated |  | Developing plan |
|  | Interacted negatively |  | Testing/ evaluations |  | Minimally participated |  | Has a take home plan |
|  | Stayed on task |  | Teaching/ training  |  | Did not participate |  | Plan has adult support |
|  | Used Social Skills ( ) |  |  |  | Provided input |  | Interview |
|  | Expressed feelings |  |  |  | Refused services |  | Employed  |

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PLACE FORM IN PX FILE, DOCUMENTATION SECTION, AFTER GROUP NOTES

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wordpc/forms/lifeskillsprogressnote

**Coronavirus screening questions for youth:**

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| --- | --- | --- |
| **Questions should be asked directly to the youth.** **For yes responses provide additional information.**  | Yes | NO |
| Have you traveled to California, Washington State, New York, New Jersey and Connecticut or been on a cruise within the last 14 days? Explain:[Where, travel arrangements, level of interaction with people, amount of persons in a single gathering]  |  |  |
| Have you been in contact with anyone who has returned from international travel or been on a cruise within the last 14 days?Explain: |  |  |
| Have you been in any gathering of 10 people or more in the last 14 days?Explain: |  |  |
| Have you traveled through any airport within the past 14 days?Explain: |  |  |
| Have you had contact with anyone tested for COVID-19? Explain: |  |  |
| Have you had contact with anyone experiencing fever, cough or shortness of breath in the last 14 days?Explain: |  |  |
| Have you experienced fever, cough, sneezing, shortness of breath, diarrhea, vomiting, sore throat or any other cold/flu like symptoms in the last 14 days?Explain: |  |  |

WORDPC/COROAVIRUSCORVID19PXSCREENINGQUESITONS

