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G4S Youth Services, LLC
6302 Benjamin Road, Suite 400
Tampa, Florida 33634

Telephone: (813) 514-6275
Fax: (813) 514-6723
Email: inquiry@us.g4s.com
www.g4s.com/us

February 25, 2013

Patrick McReynolds
Texas Juvenile Justice Department
4900 North Lamar
Austin, Texas 78751

RE: TJJJ RFP 644-3-12112 Secure Residential Specialized Program Services

Dear Mr. McReynolds,

G4S Youth Services submits this proposal to the Texas Juvenile Justice Department (TJJJ) to provide secure, post-adjudication mental health and substance abuse residential treatment for male juvenile offenders, ages 10-16. The program will be located in a county-leased building located at facility 800 FM 3254 in Brownwood, Texas. G4S has the corporate infrastructure, financial resources, extensive experience and expertise to deliver quality, specialized treatment services such as alcohol and other drug dependencies (AOD) treatment, mental health (MH) treatment, and/or anger management. G4S is strongly committed to providing quality services that have a significant positive impact on the lives of each youth in our care. G4S' broad range of experience will be utilized to successfully perform the work described in this proposal, meet standards, mitigate risks and exceed customer expectations. As a company, G4S offers the following advantages to the TJJJ:

In-Depth Experience: G4S currently operates 23 detention, residential and outpatient treatment programs and 15 alternative education schools in Florida, Arkansas and Tennessee. G4S Youth Services provides employment to over 1,700 individuals and supervises over 1,500 young males and females on a daily basis. 100% of our programs are "specialized", which includes substance abuse services; mental health, intensive mental health and comprehensive mental health services; borderline developmental disability services, and sex offender services. G4S is led by a management team that has over 200 years' experience collectively in the field of juvenile justice.

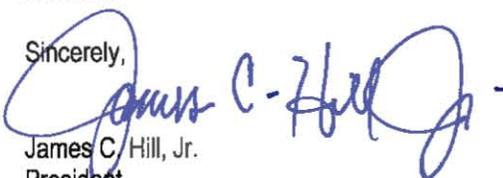
Quality of Service: G4S has a proven record of delivering quality services. This is verifiable through past Florida Department of Juvenile Justice Quality Assurance results, now referenced as Quality Improvement, in addition to past FDJJ projected mental health outcomes.

Financial Stability: As a subsidiary of one of the world's leading security solutions providers, G4S Youth Services is part of the financially strong and long-standing group of companies, G4S plc., and has qualified resources to draw upon when needed. G4S plc. employs over 657,000 staff in 125 countries and had annual revenues of \$7.5 billion in 2011.

I am the official contact for this proposal and have the authority to bind the company to any contract awarded pursuant to the solicitation. Further, I will be available by phone or in person as may be appropriate regarding this RFP. If any aspect of this proposed plan needs clarification, please do not hesitate to contact me at the address or phone number above, or by email at Jim.Hill@us.g4s.com. Federal Employee Identification Number, including the State of Florida Vendor Sequence Number, is 54-1859903-002 and the DUNS Number is 95-916-3064.

I look forward to beginning a successful partnership with the Texas Juvenile Justice Department in providing quality services.

Sincerely,


James C. Hill, Jr.
President

Securing Your World

AMENDMENT OF SOLICITATION

1. SOLICITATION NO. Secure Residential RFP # 644-3-12112	2. AMENDMENT NO. A-001	3. EFFECTIVE DATE January 14, 2013
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4. ISSUED BY

Texas Juvenile Justice Department
Central Office Building
Contracts Group – Patrick McReynolds, Contract Specialist IV
4900 North Lamar
Austin, Texas 78751

5. NAME AND ADDRESS OF CONTRACTOR

6. The above numbered solicitation is amended as set forth in Item 7. The hour and date specified for receipt of Offers is extended, is not extended.

Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods:

(a) By completing Items 5 and 8, and returning 1 copy of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

7. DESCRIPTION OF AMENDMENT

The comments listed below revise and modify RFP # 644-3-12112. Acknowledgement of receipt of this amendment should be indicated by enclosing a copy of the Amendment with your proposal.

1. Page 2 of 45, I. BACKGROUND INFORMATION, SCHEDULE OF ACTIVITIES, PRE-PROPOSAL CONFERENCE TIME CHANGE.

1.

January 23, 2013	Pre-Proposal Conference @ 9:30 am
-------------------------	--

James C Hill Jr, President

8a. NAME AND TITLE OF SIGNER (Type or Print)

G4S Youth Services, LLC

8b. OFFEROR


(Signature of Person Authorized to Sign)

02/26/2013

Date Signed

AMENDMENT OF SOLICITATION

Page 1 of 1

1. SOLICITATION NO. Secure Residential RFP # 644-3-12112	2. AMENDMENT NO. A-002	3. EFFECTIVE DATE January 18, 2013
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4. ISSUED BY

Texas Juvenile Justice Department
Central Office Building
Contracts Group – Patrick McReynolds, Contract Specialist IV
4900 North Lamar
Austin, Texas 78751

5. NAME AND ADDRESS OF CONTRACTOR

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7. DESCRIPTION OF AMENDMENT

The comments listed below revise and modify RFP # 644-3-12112. Acknowledgement of receipt of this amendment should be indicated by enclosing a copy of the Amendment with your proposal.

1. Page 8 of 45, SECTION V. RESPONDENT HISTORY, EXPERIENCE, CREDENTIALS AND REQUIREMENTS; C. 1.; Please Replace With The Following:

1. *The Respondent's staff must be fully licensed or certified to provide any treatment services being offered. Respondents must be licensed to provide residential services under:*
 - a. *Texas Department of State Health Services (DSHS) Standards (related to mental health, health care, substance abuse and family and protective services); or*
 - b. *Texas Department of Family and Protective Services (DFPS) Standards; or*
 - c. *Other licensing or certification standards deemed acceptable by TJJJ.*

Respondent must submit a copy of the license with their proposal. TJJJ will accept proposals from respondents who have begun the licensing process, provided the process will be completed and facility licensed within 6 months after award of a contract and prior to commencement of the services described herein.

James C Hill Jr, President

8a. NAME AND TITLE OF SIGNER (Type or Print)

G4S Youth Services, LLC

8b. OFFEROR


(Signature of Person Authorized to Sign)

02/26/2013

Date Signed

AMENDMENT OF SOLICITATION

Page 1 of 9

1. SOLICITATION NO. Secure Residential RFP # 644-3-12112	2. AMENDMENT NO. RFP # 644-3-12112 A-003	3. EFFECTIVE DATE 01/31/2013
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4. ISSUED BY

Texas Juvenile Justice Department
Central Office Building
Contracts Group – Patrick McReynolds, Contract Specialist IV
4900 North Lamar
Austin, Texas 78751

5. NAME AND ADDRESS OF CONTRACTOR

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Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods:

(a) By completing Items 5 and 8, and returning 1 copy of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

7. DESCRIPTION OF AMENDMENT

Respondents are specifically cautioned against relying on any oral information.

The comments listed below revise and modify RFP # 644-3-12112. Acknowledgement of receipt of this amendment should be indicated by enclosing a copy of the signed Amendment with your proposal.

James C Hill Jr, President

8a. NAME AND TITLE OF SIGNER (Type or Print)

G4S Youth Services, LLC

8b. OFFEROR


(Signature of Person Authorized to Sign)

02/26/2013

Date Signed

CLARIFICATIONS AND REVISIONS:

1. PAGE 2 OF 45, I. SECOND PARAGRAPH, HUMAN RESOURCE CODE, §61.037 PROVIDES TJJD WITH THE AUTHORITY TO CONTRACT FOR SERVICES, HAS BEEN REPLACED WITH THE FOLLOWING:

Human Resources Code, §242.057 provides TJJD with the authority to contract for services.

2. PAGE 4 OF 45, SECTION G. RESPONSE TO QUESTIONS; PRE-PROPOSAL CONFERENCE HAS BEEN CHANGED FROM 10:00 A.M. TO THE FOLLOWING:

January 23, 2013	• Pre-Proposal Conference @ 9:30 a.m.
-------------------------	--

3. PAGE 4 OF 45, SECTION H. DEADLINE FOR RECEIPT OF PROPOSALS; MAILED PROPOSALS P.O. BOX 4260 AUSTIN, TX 78765 HAS BEEN REPLACED WITH THE FOLLOWING:

Texas Juvenile Justice Department
P. O. Box 12757
Austin, TX 78711-2757
ATTN: Patrick McReynolds, Contract Specialist

4. PAGE 6 OF 45, SECTION C. TAB 5., LETTER D. 10-14 YEARS OF AGE HAS BEEN REPLACED WITH THE FOLLOWING:

D. Experience in providing programs for offenders 10-19 years of age.

5. PAGE 6 OF 45, SECTION C. TAB 8., A. (EXHIBITS E, F, G, & D) HAS BEEN REPLACED WITH THE FOLLOWING:

Tab 8. Program Components and Narrative (Exhibits E, F, G, & H)

6. PAGE 7 OF 45, SECTION C, TAB 9., (EXHIBIT H) HAS BEEN REPLACED WITH THE FOLLOWING:

Tab 9. Quality Control Plan/Measures of Performance and Quality of Services (Exhibit G)

7. PAGE 8 OF 45, IV. FINANCIAL COMPONENTS, SECTION C., 1., REPLACE C. WITH THE FOLLOWING AND ADDED D.:

c. Respondents are allowed to submit proposals for certified licensed programs by qualified licensing entities other than DSHS and DFPS.

d. Respondent must submit a copy of any licenses and/or certifications with their proposal. TJJD will accept proposals from respondents who have begun the licensing process, provided the process will be completed and facility licensed prior to commencement of the services described herein.

8. PAGE 8 OF 45, IV. FINANCIAL COMPONENTS, SECTION C., 2. SEE ATTACHED EXHIBIT I. HAS BEEN REPLACED WITH THE FOLLOWING:

See attached Exhibit H.

9. PAGE 10 OF 45, VII. PROGRAM IMPLEMENTATION AND COMMENCEMENT OF SERVICES, SECTION C., TJJJ GENERAL ADMINISTRATIVE POLICY 81.61, AND AT THE END OF THE SAME PARAGRAPH, TJJJ GENERAL ADMINISTRATIVE POLICY 81.61, HAVE BEEN REPLACED BY THE FOLLOWING:

- C. Respondent must provide documentation that state and local officials and the community have been notified and support the project as required in TJJJ General Administrative Policy 385.8161, which is included as Exhibit E. Because of the different circumstances facing Respondents, TJJJ will assist successful Respondents in complying with TJJJ General Administrative Policy 385.8161.

10. PAGE 10 OF 45, VII. PROGRAM IMPLEMENTATION AND COMMENCEMENT OF SERVICES, SECTION D., MINIMUM REQUIREMENTS: MICROSOFT OFFICE 2000 HAS BEEN REPLACED WITH THE FOLLOWING:

Respondent must include the capability to maintain a computer setup with the following minimum requirements: Microsoft Office 2003 or XP or more recent versions (for Word documents and Excel spreadsheets), a local Internet service provider (ISP), and e-mail addresses for program management, caseworkers, and healthcare staff.

11. PAGE 13 OF 45, VIII. STATEMENT OF WORK, PROGRAM REQUIREMENTS AND NARRATIVE, SECTION G. HEALTH CARE, REMOVE POINT 1. (NOT REPLACED)

- 1. Respondent agrees to provide services and training as outlined in Exhibit K, Contract Care Facility Review Tool.

12. PAGE 16 OF 45, IX., MEASURES OF PERFORMANCE AND QUALITY OF SERVICES, IN THE 4TH AND 5TH BULLET POINTS, A DESCRIPTION IS ATTACHED AS EXHIBIT H, HAVE BEEN REPLACED BY THE FOLLOWING:

TJJJ Performance Measures for Residential Contract Programs. A description is attached as Exhibit G. TJJJ Monitoring Rating for Residential Contract Programs. A description is attached as Exhibit G.

13. PAGE 16 OF 45, IX., MEASURES OF PERFORMANCE AND QUALITY OF SERVICES, SECTION E. IN THE 2ND PARAGRAPH (EXHIBIT H) HAS BEEN REPLACED WITH THE FOLLOWING:

(Exhibit G)

14. PSGE 21 OF 45, XIII. SCREENING AND EVALUATION OF PROPOSALS, EVALUATION CRITERIA, WILLINGNESS TO PROVIDE PROGRAMS; REMOVE THE FOLLOWING SENTENCE: (NOT REPLACED)

Provision of all 3 programs equals 5 points, Provision of 2 equals 3 points, Provision of 1 equals 1 point.

15. PAGE 22 OF 45, XIV., SECTION E. TJJJ GENERAL ADMINISTRATIVE POLICY 81.61 HAS BEEN REPLACED WITH THE FOLLOWING:

- E. TJJJ GENERAL ADMINISTRATIVE POLICY 385.8161, REGARDING NOTIFICATION OF FACILITY OPENING OR RELOCATING

16. PAGE 28 OF 45, TJJJ RFP 644-3-12112 EXHIBIT C, SECTION 1. EXHIBIT D HAS BEEN REPLACED BY THE FOLLOWING:

- 1. Salaries, Benefits, and Taxes (complete Exhibit C, Schedule 1)

17. PAGE 28 OF 45, TJJJ RFP 644-3-12112 EXHIBIT C, SECTION 15. ADD, SEE SAMPLE CONTRACT PAGE 10 OF 21, ATTACHMENT ARTICLE 3: LIABILITY INSURANCE, SECTION 1:

Section 1: Contractor represents and warrants that it will, within five (5) business days of executing this Contract, provide TJJJ with current certificates of insurance or other proof acceptable to TJJJ of the following insurance coverage: Standards Workers Compensation Insurance, covering all personnel who will provide services under this Contract; Commercial General Liability Insurance, personal injury and advertising injury with, at a minimum, the following limits: \$500,000.00 minimum each occurrence; \$1,000,000.00 per general aggregate. The insurance must cover injury to a youth that occurs when the youth is in Service Provider's care, custody or control.

18. PAGE 29 OF 45, HEADING TJJJ RFP 694-0-0850 HAS BEEN REPLACED BY THE FOLLOWING:

TJJJ RFP 644-3-12112

19. PAGE 42 OF 45, HEADING TJJJ 694-0-0850 HAS BEEN REPLACED BY THE FOLLOWING:

TJJJ RFP 644-3-12112

QUESTIONS AND ANSWERS

Question 1

Can a proposal opt out of providing services for youthful (age 10-13), a specific gender, or mental health services?

Response 1

Yes.

Question 2

In section 4(c) Respondent History and Experience (Pg.8) it states a requirement, that the proposed program must be licensed under DSHS or DFPS to provide residential services. Does this apply to programs that contract out for their therapeutic services with fully licensed therapist (AOD and Sex offender), and are certified for residential services by TJJJ and their local juvenile board?

Response 2

Respondents are allowed to submit a proposal for certified or licensed programs by qualified licensing entities other than DSHS or DFPS.

Question 3

In regard to Section 8(G) item number 1 (Pg.13), there is a reference to an "Exhibit K" where can that be located?

Response 3

Reference to Exhibit K has been removed.

Question 4

In the scoring section of the RFP it states, points can be deducted from proposals that do not offer all three specialized services. If the proposal contains intent to offer sex offender services, can that take the place for mental health, aggression, or AOD?

Response 4

This statement has been removed.

Question 5

How will the populations be admitted, all at once or over time?

Response 5

As youth needs dictate and agency directives require.

Question 6

Are the appendix forms available in Word, Excel or Text formats?

Response 6

Yes, but you must request them from the Contract Specialist.

Question 7

Can we propose a rate that increases over the 4 years? Rate 1st year, Different rate 2nd year etc.?

Response 7

It is up to each respondent how the rates are proposed.

Question 8

What is the total possible number of beds that might be awarded?

Response 8

The RFP states up to 60 beds. It is up to respondent to propose the number of beds.

Question 9

Can the proposal be submitted in a three ring binder?

Response 9

Yes

Question 10

Will certification by the local juvenile board and certification by TJJD meet the requirements of being "licensed to provide residential services under . . . other licensing or certification standards deemed acceptable by TJJD" (amendment to solicitation A-002).

Response 10

Yes

Question 11

Is the requirement of separating residents 14 & 15 years of age an absolute? Wouldn't it be better to use a risk assessment to determine group assignments? Some 14 year old juveniles may be more mature and more aggressive than some 15 year old juveniles.

Response 11

Referenced in the Human Resources Code that is consistent with the GAP(GAP.380.8524), Youth under 15 cannot be housed with youth 17 or older; there is no language in the code that prohibited 14 and 15 year olds being housed together.

Question 12

What is the age range to be served? In the introduction it states ages 10 to 19; however, on page 6, under Tab 5.D., it asks for information about age range 10-14. Is this difference intentional or a conflict?

Response 12

The age range is 10-19.

Question 13

On page 6 in Tab 8 there is a reference to Exhibit I, but this Exhibit form is not included in the RFP package. Can we get a copy of Exhibit I?

Response 13

Yes.

Question 14

On page 13 at G.1 there is a reference to Exhibit K. It is not included, and can we get a copy?

Response 14

Reference to Exhibit K has been deleted.

Question 15

Is it possible to get the Exhibit forms in Word, rather than PDF?

Response 15

Yes, contact the Contract Specialist listed in the RFP.

Question 16

Is there any page limit to the Proposal?

Response 16

No.

Question 17

TJJD is requesting one unbound original and five hard copies.

Response 17

Yes

Question 18

Should the copies be unbound, as well, or can they be submitted in binders?

Response 18

We prefer the copies to be bound or in binders.

Question 19

Please clarify the statement cited related to specific treatment modalities as identified on – Page 2 Background Information, “with a primary focus on specialized treatment programs such as...?”

Response 19

It is not TJJD’s intention to dictate what types of treatment programs a respondent offers. Instead a service provider can propose any type of treatment programs they would like.

Question 20

Please clarify the statements cited related to specific treatment modalities as identified on – Page 2 Background Information, “with a primary focus on specialized treatment programs such as alcohol and other drug dependency (AOD) treatment, mental health (MH) treatment, and/or anger management to facilitate...”..-“with a focus on any or all of the three main specialized program areas, Alcohol and other Drug Treatment, Mental Health Treatment, and Anger Management”.

Response 20

These are just suggestions. While TJJD has a need for these types of treatment programs, responses to the RFP are not limited to only these. A respondent may propose any type of specialized treatment program, not limited to the ones mentioned in the RFP.

Questions 21

Page 8 – C.2. – “Describe any ACA accreditation or plans to become ACA accredited”. Is it the intent to require the facility to become accredited? If so, under what ACA standards?

Response 21

TJJD does not intend to require a facility to become accredited. Respondents should include in their proposal any licenses, certifications or accreditations under which the facility currently operates or will operate in the future.

Question 22

Is it the intent to require all TJJD facilities become accredited by the American Correctional Association?

Response 22

TJJD contracted residential facilities are not required to become accredited by ACA.

Question 23

Are youth with sex offender offenses allowed to be sentenced to this facility under the contract scope of services?

Response 23

A respondent is not required to accept sex offenders. The respondent must clearly state in their proposal the types of youth their program will support and they are willing to accept.

Question 24

Page 15 J. 1. " must show proof that the treatment provided is evidence based and appropriate for the population served . . ." What level of evidence is necessary to be considered "evidence based" for each treatment modality?

Response 24

Respondents must provide evidence that their proposed treatment programs have research to support the effectiveness of the programs. We will accept whatever the respondent is able to provide. Respondents can view various types of evidence-based models on the Office of Juvenile Justice and Delinquency Prevention (OJJDP) website. Research to support the effectiveness of the rehabilitative services offered, would assist in determining if it is in fact evidence-based. Each proposal will be evaluated on the merits of the information provided.

Question 25

Page 9 Site and Facility Specifications – "Youth younger than 1 are not assigned to dorms as older juveniles". Please define in terms of age "older" Juveniles.

Response 25

TJJD accepts youth ages 10-19. Referenced in the Human Resources Code that is consistent with the GAP(GAP.380.8524), Youth under 15 cannot be housed with youth 17 or older; there is no language in the code that prohibited 14 and 15 year olds being housed together.

Question 26

I have a question regarding the TJJD RFP 644-3-12112. Tab 3 (G) states that Cornerstone Programs will have the intent to apply for all benefits to youth and to list them. Would that be benefits to the youth such as Medicaid and the USDA School Lunch program? Are there other benefits that you are looking for in this section?

Response 26

Yes, since this is for secure services; you would not enroll our youth in Medicaid; that is just for youth in our non-secure contract residential programs. TJJD pays for health care services (the vendor has to get pre-authorization from us prior to the delivery of those services). Other reimbursements include USDA and ADA through TEA.

Question 27

Can the students be placed in an Out-of-State Facility.

Response 27

No

Question 28

Pg 8 of the RFP references Exhibit I, which I could not find attached. Can we get an Exhibit I?

Response 28

Corrected, reference #8 above in Clarifications And Revisions.

Question 29

Pg 13 of the RFP states that "Respondent agrees to provide services and training as outlined in Exhibit K"...no Exhibit K was attached

Response 29

Corrected, reference #11 above in Clarifications And Revisions.

Question 30

Is there an Excel spreadsheet to be used for the budget (Exhibit C).

Response 30

No

Question 31

Exhibit C references costs for education. If it is be subcontracted to a Charter School, do we just included the daily costs in Subcontracts? If being performed at the campus, do we include the costs of the teachers, etc?

Response 31

The answer to both questions is Yes.

Question 32

Page 16 of the RFP references Exhibit H as TJJD's Contract Care Performance and Quality of Services Measures. The Exhibit H that is attached is for ACA Requirement per SB 103. Can we get a copy of the referenced Exhibit H or other documentation on what the Performance Expectations and Measures are?

Response 32

Corrected, reference #13 above in Clarifications And Revisions.

AMENDMENT OF SOLICITATION

1. SOLICITATION NO. Secure Residential RFP # 644-3-12112	2. AMENDMENT NO. A-004	3. EFFECTIVE DATE February 01, 2013
---	----------------------------------	---

4. ISSUED BY

Texas Juvenile Justice Department
 Central Office Building
 Contracts Group – Patrick McReynolds, Contract Specialist IV
 4900 North Lamar
 Austin, Texas 78751

5. NAME AND ADDRESS OF CONTRACTOR

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Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods:

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7. DESCRIPTION OF AMENDMENT

The comments listed below revise and modify RFP # 644-3-12112. Acknowledgement of receipt of this amendment should be indicated by enclosing a copy of the Amendment with your proposal.

James C Hill Jr, President

8a. NAME AND TITLE OF SIGNER (Type or Print)

G4S Youth Services, LLC

8b. OFFEROR

(Signature of Person Authorized to Sign)

02/26/2013

Date Signed

TJJJ RFP # 644-3-12112 SCHEDULE OF ACTIVITIES

January 08, 2012	<ul style="list-style-type: none">• Issue TJJJ RFP 644-3-12112
January 23, 2013	<ul style="list-style-type: none">• Pre-Proposal Conference @ 9:30 a.m.
January 30, 2013	<ul style="list-style-type: none">• Deadline for Respondents to Submit Questions
January 31, 2013	<ul style="list-style-type: none">• Answers to Respondents Questions will be Posted
February 28, 2013	<ul style="list-style-type: none">• Deadline for submitting proposals @ 10:00 a.m.
March 08, 2013	<ul style="list-style-type: none">• Phase I – Screening, Validation, and Reference Checks• Phase II – Evaluations
March 20, 2013	<ul style="list-style-type: none">• Phase III –On-Site Visits/ Oral Presentations/negotiations and best and final offers
April 01, 2013	<ul style="list-style-type: none">• Phase IV and V – Decision and Notification to Respondents
April 19, 2013	<ul style="list-style-type: none">• Execute Contract
To Be Determined	<ul style="list-style-type: none">• Program Start-up
To Be Determined	<ul style="list-style-type: none">• Commence Services, Tentative



Respondent Data Form

**EXHIBIT A
RESPONDENT DATA FORM**

1. Full Legal Name of Respondent: G4S Youth Services, LLC
Federal Employer's ID: 54-1859903
or Texas Vendor ID: 1541859903900
2. Legal Status: (Please check only one)
 Public Agency
 Private, nonprofit corporation
State of _____
Charter Number: _____
 Partnership (Attach a copy of partnership agreement and a list of the names, addresses, and social security numbers of all partners.)
 Private, for profit corporation
State of Virginia
Charter Number: S0151219
 Governmental entity (please specify) _____
 Sole Proprietorship
3. Address of Respondent

<u>6302 Benjamin Road Suite 400</u>	<u>Tampa</u>	<u>FL</u>	<u>33634</u>
Street Address	City	State	Zip
<u>6302 Benjamin Road Suite 400</u>	<u>Tampa</u>	<u>FL</u>	<u>33634</u>
Mailing Address	City	State	Zip
4. Executive Director/Chief Executive Officer/Owner
Name Jim Hill
Title President
Phone 813-514-6275
FAX 813-514-6723
Email jim.hill@us.g4s.com
5. Contact Person (person who can answer questions and take calls regarding this proposal)
Name Jim Hill
Title President
Phone 813-514-6275
FAX 813-514-6723
Email jim.hill@us.g4s.com



**Tab 2-Assurances and Certification Form
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**

Assurances and Certification Form

**TJJD RFP# 644-3-12112
Exhibit B
Assurances and Certification Form**

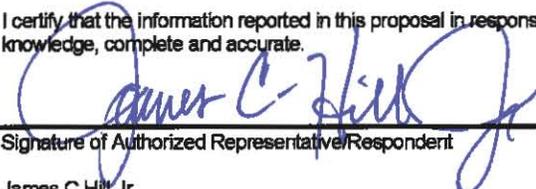
Legal Name of Respondent: G4S Youth Services, LLC

ASSURANCES: (If any of the assurances are marked "No", the Respondent will not be considered.)

- | Yes | No | |
|-------------------------------------|--------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 1. Respondent has no outstanding debts that would result in a lien(s) or levy(ies) to be placed on payments made to the Respondent by TJJD. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 2. Respondent agrees to accept training, technical assistance, and monitoring from TJJD or its monitoring contractor throughout the contract period. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 3. Respondent certifies that no one connected with the potential provider has participated in the development of specific criteria for this proposal. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 4. Respondent agrees to provide TJJD with information necessary to substantiate claims made in this application, including but not limited to on-site observation, appearance before the Proposals Evaluation Committee, third-party interviews, and inspection of records. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 5. If Respondent uses subcontractors in the provision of services under this contract, subcontractors will adhere to and comply with the main contract. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 6. Respondent has sufficient resources to operate for at least two months while waiting for initial reimbursement from TJJD. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 7. Respondent agrees to fully cooperate with TJJD in the design, implementation and evaluation of the effectiveness of services rendered. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 8. Respondent certifies that contracting with TJJD does not in any way constitute a conflict of interest. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | 9. Respondent certifies that a State or Federal agency has not terminated any contract with the Respondent in the previous 12 months for deficiencies in performance. |

CERTIFICATION:

I certify that the information reported in this proposal in response to TJJD RFP # 644-3-12112 is, to the best of my knowledge, complete and accurate.

 _____ 2/26/2013
Signature of Authorized Representative/Respondent Date

James C Hill Jr

Name of Authorized Representative/Respondent (Typed or Printed)
President

Title of Authorized Representative/Respondent



Tab 5- History, Experience, Credentials, and Requirements Texas Juvenile Justice Department Secure Residential Specialized Program Services

Tab 5. Respondent History, Experience, Credentials and Requirements

A. HISTORY, EXPERIENCE AND QUALIFICATIONS

Headquartered in Tampa, Florida, G4S Youth Services, LLC is a for-profit, Limited Liability Corporation. G4S Youth Services is a subsidiary of G4S plc., the global leader in security solutions. G4S Youth Services has 16 years of experience and partnership with the Florida Department of Juvenile Justice, eight years with the Tennessee Metropolitan Government of Nashville and Davidson County, four years with the Arkansas Division of Youth Services, 12 years with Texas Governor's Office, Criminal Justice Division and seven years with the Rhode Island Department of Public Safety.

G4S has a proven history of planning, controlling and managing juvenile offender programs, absorbing troubled programs, transitioning programs from other providers, and starting up new programs, all which have resulted in success. In 1999, G4S assumed the management of Pahokee Youth Development (later renamed Sago Palm) which was considered to be one of the worst facilities in the country. The U.S. Department of Justice was threatening intervention, and local legal advocacy groups were warning of legal action. After comprehensive planning and continuous management activity, we achieved "Deemed" status from the Florida Department of Quality Assurance Bureau.

In 2007, G4S assumed operation of the Alexander Youth Development Center, later renamed Arkansas Juvenile Assessment and Treatment Center. This included G4S providing the educational services, which were greatly in need of strengthening. At that time, the center was subject to a U.S. Department of Justice (DOJ) CRIPA Settlement Agreement with a major portion of the Settlement Agreement addressing the mental health and educational components. In November, 2012, DOJ announced that the Division of Youth Services and G4S had met or exceeded all requirements in the Agreement and that it was filing a joint motion asking a judge to release the agency from court supervision.



Tab 5- History, Experience, Credentials, and Requirements Texas Juvenile Justice Department Secure Residential Specialized Program Services

To support Florida, G4S has demonstrated the capability to respond to the Florida Department of Juvenile Justice's changing needs over the last few years by adding 16 intensive mental health beds at our Orange Youth Academy; operationalizing 16 beds at two female programs in less than two days; absorbing the deficient Spring Lake Youth Academy and overhauling the inferior conditions to what is now fully operational and effective; re-engineering the G4S Hastings Youth Academy from 165 BHOS and specialized beds to 96 Comprehensive Mental Health beds; re-engineering the G4S Hillsborough Intensive Residential Treatment program for boys and young men to the current G4S Hillsborough Girls Academy high- and maximum-risk females; and re-engineering the G4S Cypress Creek Juvenile Offender Correctional Center from high/maximum-risk to all maximum-risk males.

Within the last year, G4S has supported the Tennessee Department of Children's Services by opening the first privatized juvenile justice residential program for girls. Most recently, G4S has re-engineered the low and moderate risk G4S Pasco Girls Academy to a high-risk, intensive mental health G4S Central Pasco Girls Academy program. The success of each event has been indicative of collaborative planning, project teamwork, and implementation to achieve continuity of care and services.

Accreditation

G4S is accredited with the Commission on Accreditation of Rehabilitation Facilities (CARF) at seven program sites. Further, G4S is accredited by the American Corrections Association (ACA) at four of our programs. Three of the programs, the Okeechobee Juvenile Offender Corrections Center, Avon Park Youth Academy, and the Arkansas Juvenile Assessment & Treatment Center received first time achievement of 100% (perfect score) performance ratings on all mandatory and non-mandatory standards. Through CARF and ACA accreditation, G4S provides evidence of the provision of quality services delivered.



**Tab 5- History, Experience, Credentials, and Requirements
Texas Juvenile Justice Department
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B. PROGRAM OVERVIEW

G4S has a significant interest in partnering with the Texas Juvenile Justice Department to provide secure residential specialized mental health and substance abuse treatment program services for up to 60 male youth, ages 10-19. We are confident of our ability to efficiently operate a trauma-informed culture that is sensitive to youth needs, as evidenced by our corporate and management team having more than 200 years of combined juvenile justice experience; proven track record of assuming the operation of troubled programs and converting them into successful programs; award of seven Commission on Accreditation of Rehabilitation Facilities (CARF) accreditations, and four American Corrections Association (ACA) accreditations; current operations of 23 residential, detention, and outpatient programs in Florida, Tennessee, and Arkansas that range from low-risk to maximum risk programs; and, current operations of 15 alternative education schools in both G4S operated facilities and facilities operated by other providers.

In 2012, Florida G4S programs led the highest ratings by the Florida Department of Juvenile Justice Bureau of Quality male residential treatment programs throughout the state. We are experienced in working with juvenile issues, as 100% of G4S programs are specialized treatment and follow cultural diversity and sensitivity in our employees and the services we deliver to youth in our care. We have made a commitment to make a difference and become part of the cutting edge in implementing the most effective, gender-specific models and treatment.

Our customers and partners are important. G4S has 16 years of experience and partnership with the Florida Department of Juvenile Justice, eight years with the Tennessee Metropolitan Government of Nashville and Davidson County, four years with the Arkansas Division of Youth Services, 12 years with Texas Governor's Office, Criminal Justice Division and seven years with the Rhode Island Department of Public Safety. In 2012, we provided 6,517 volunteer youth hours and 4,552 volunteer staff hours to support our communities.



Tab 5- History, Experience, Credentials, and Requirements Texas Juvenile Justice Department Secure Residential Specialized Program Services

C. EXPERIENCE IN PROVIDING SERVICES TO JUVENILES

G4S is a trusted leader in the delivery of specialized services. Currently, 100% of G4S' programs provide specialized services that include sex offender services, mental health services, substance abuse services, Behavioral Health Overlay Services (BHOS), Mental Health Overlay Services (MHOS), Intensive Medical Overlay Services (IMOS), Intensive Mental Health (IMH), Borderline Developmental Disability Services (BDDS), Developmental Disability Services (DDS), comprehensive mental health services, and Residential Substance Abuse Services (RSAT). G4S currently serves over 1,500 male and female juveniles each day and employs over 1,700 staff in residential, detention and outpatient programs in three states.

Our experience and service outcomes set us apart from other providers. We understand the dynamics involved in creating a culture that is safe, secure and productive, and operate from a framework of evidence and outcomes. Our strengths and abilities to successfully deliver quality services are evidenced through the following:

1. G4S leads Florida in effective program operation and fidelity in providing program services (as evidenced by previous FDJJ Bureau of Quality Assurance (now FDJJ Bureau of Quality Improvement) reports;
2. G4S has developed a comprehensive, internal risk management system, resulting in ability to ensure appropriate system fidelity resulting in quality outcomes;
3. G4S has developed one of the strongest positive, behavior motivation systems that correlate behavior, treatment and accountability and which does not rely on physical force, chemical agents, or mechanical restraints;
4. G4S operates multiple training academies that provide comprehensive training to effectively work with our targeted populations. We maintain a cadre of certified trainers experienced in Thinking for a Change, Motivational Interviewing, 1st Aid/CPR/AED, Impact of Crime, Trauma Informed Care, Conflict-Resolution/Peace Keeping, and Impact of Crime;
5. G4S is research-oriented to advance the most effective models and interventions to use with young men. Examples of G4S' participation in research includes:



**Tab 5- History, Experience, Credentials, and Requirements
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**

- Georgetown study for effective programming in Florida, based on integrating a standardized protocol tool for comparing what has been effective in research;
- Florida Department of Juvenile Justice Impact of Crime curriculum pilot program intended to provide structure and direction in accepting responsibility and increasing empathy for the harm caused to victims, families, and community; and,
- Project LIBERATE collaborative research project between the Florida Department of Juvenile Justice, Georgia State University, University of Florida, and G4S Youth Services to design an intervention for improving reading curriculums for students in DJJ residential programming.

D. EXPERIENCE IN PROVIDING PROGRAMS FOR YOUNG OFFENDERS 10-19 YEARS OF AGE

G4S has provided successful management and operation of juvenile justice programs for the last 16 years, and currently operates 23 residential, detention and outpatient programs and 15 alternative education schools in three states. We have clearly demonstrated our ability to plan, control and manage diverse populations of juveniles through specialized services and successful outcomes. The following depicts our program locations, population gender, age, and specialized services:

PROGRAM	POPULATION	SERVICES
Arkansas Juvenile Assessment and Treatment Center (Alexander, Arkansas) Contracted since 2008 ** G4S Operated School	143 females & males, ages 12-18 All levels	Residential treatment for educational services, sex offender, mental health, substance abuse services
Avon Park Youth Academy (Avon Park, Florida) Contracted since 2003 ** G4S Operated School	165 males, ages 16-18 Moderate-risk (6-9 mth program)	Residential treatment for Behavioral Health Overlay Services (BHOS) and educational services
Bartow Youth Academy (Bartow, Florida) Contracted since 2012	28 males, ages 14-18 Moderate-risk (6-9 mth program)	Residential treatment for Borderline Developmental Disability
Central Pasco Girls Academy (Land O' Lakes, Florida) Contracted since 2010	32 females, ages 13-18 High-risk (6-9 mth program)	Residential treatment for intensive mental health
Columbus Juvenile Residential Facility (Tampa, Florida)	50 males, ages 10-18 Moderate-risk (12-18 mth program)	Residential treatment for sex offender services



**Tab 5- History, Experience, Credentials, and Requirements
Texas Juvenile Justice Department
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Contracted since 2004		
Cypress Creek Juvenile Offender Correctional Center (Lecanto, Florida) Contracted since 2003 ** G4S Operated School	96 males, ages 13-21 Maximum-risk (18-36 mth program)	Residential treatment for Mental Health Overlay Services (MHOS) and Residential Substance Abuse Treatment services
Dade Juvenile Residential Facility (Florida City, Florida) Contracted since 2006	56 males, ages 13-18 Moderate-risk (6-9 mth program)	Residential treatment for intensive mental health and dual diagnosis services
Davidson County Juvenile Detention Center (Nashville, Tennessee) Contracted since 2004 ** G4S Operated School	64 females & males, ages 12-17	Detention; educational services, case management services
Daytona Juvenile Residential Facility (Daytona Beach, Florida) Contracted since 2011	30 males, ages 13-18 High-risk (12-18 mth program)	Residential treatment for sex offender services
G4S Academy for Young Women (Nashville, Tennessee) ** G4S Operated School	24 females, ages 13-18 Level III Continuum	Residential treatment for mental health, substance abuse, sex offender treatment
G4S Outpatient Services (Pinellas, Pasco, Polk & Hillsborough Counties, Florida) Contracted since 2011	80 females & males, ages 13-18, outpatient services	Outpatient treatment services for sex offender treatment
Gulf and Lake Academy (Clearwater, Florida) Contracted since 2000	77 females & males, ages 12-18 Low-risk (3-6 mth program) Moderate-risk (9-12 mth program)	Residential treatment for Intensive Medical Overlay Services (IMOS), Intensive Mental Health (IMH), Borderline Developmental Disability Services (BDDS), Developmental Disability Services (DDS)
Hastings Comprehensive Mental Health Treatment Facility (Hastings, Florida) Contracted since 1999	96 males, ages 14-19 Moderate-risk (7-10 mth program)	Residential treatment for comprehensive mental health services
Hillsborough Girls Academy (formally Hillsborough Intensive Residential Treatment) (Tampa, Florida) Contracted since 2005	18 females, ages 13-21 High-risk (9-12 mth program) Maximum-risk (18-36 mth program)	Residential treatment for Mental Health Overlay Services (MHOS)
Martin Girls Academy (Stuart, Florida) Contracted since 2008 ** G4S Operated School	30 females, ages 13-18 High-risk (9-12 mth program)	Residential treatment for Intensive Mental Health Services (IMOS)
Okeechobee Girls Academy (Okeechobee, Florida) Contracted since 2010 ** G4S Operated School	32 females, ages 13-18 Low-risk (3-6 mth program) Moderate-risk (6-9 mth program)	Residential treatment for Behavioral Health Overlay Services (BHOS)
Okeechobee Juvenile Offender Correctional Center	96 males, ages 13-21 High-risk (12-18 mth program)	Residential treatment for sex offender services



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(Okeechobee, Florida) Contracted since 2003 ** G4S Operated School	Maximum-risk (18-36 mth program)	
Okeechobee Youth Development Center / Okeechobee Intensive Halfway House (Okeechobee, Florida) Contracted since 2009 ** OIHH- G4S Operated School	173 males, ages 13-18 Moderate-risk (6-9 mth program) High-risk (9-12 mth program) Maximum-risk (18-36 mth program)	Residential treatment for Mental Health Overlay Services (MHOS) and Behavioral Health Overlay Services (BHOS)
Orange Youth Academy/Orlando Intensive Youth Academy (Orlando, Florida) Contracted since 2008	64 males, ages 12-21 Moderate-risk (6-9 mth program) High-risk (9-12 mth program)	Residential treatment for Mental Health Overlay Services (MHOS) and Intensive Mental Health (IMH)
Palmetto Youth Academy (Palmetto, Florida) Contracted since 2008 ** G4S Operated School	48 males, ages 14-21 High-risk (9-12 mth program)	Residential treatment for Residential Substance Abuse Services (RSAT)
Polk Halfway House (Bartow, Florida) Contracted since 2003	24 males, ages 10-14 Moderate-risk (6-9 mth program)	Residential treatment for Behavioral Health Overlay Services (BHOS)
Riverside Academy (Tampa, Florida) Contracted since 2001	165 males, ages 14-18 Moderate-risk (6-9 mth program)	Residential treatment for Residential Substance Abuse Services (RSAT)
Spring Lake Youth Academy (Arcadia, Florida) Contracted since 2011 ** G4S Operated School	30 males, ages 15-18 Low-risk (60-90 days)	Residential treatment for Mental Health Overlay Services (MHOS)

** Additionally, G4S operates three alternative school programs in St Johns School District in Florida that are not included in the above list.

E. TYPES OF TREATMENT PROVIDED TO THIS POPULATION, INCLUDING ASSESSMENT TOOLS

As previously described in the above chart, we provide an extensive array of services that will meet the needs of TJJJ youth populations. Given our experience and successful outcomes over the years, we are committed to providing specialized treatment programs for alcohol and other drug dependency (AOD) treatment, mental health treatment, and anger management. Specific evidence-based and researched treatment models, curriculum, and delinquency interventions have been identified in Tab.8, Section M. Treatment Services. Assessment tools also referenced in Tab 8, H. Assessment Tools, will include at a minimum: Structured Assessment of Violence Risk in Youth; Reynolds Adolescent Depression Scale; Trauma Symptom Checklist for Children (TSCC) or Trauma



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Symptom Inventory; Adolescent Substance Abuse Subtle Screening Instrument (SASSI); Assessment of Suicide Risk; Skills Assessment (educational and vocational); Comprehensive bio-psychosocial evaluation. Research has shown that many juvenile offenders have been exposed to traumatic events, either as victims or witnesses, often developing into Post-Traumatic Stress Disorder (PTSD) or trauma-related symptoms. The goal is to maintain a safe and non-violent trauma-informed culture that is sensitive to youth needs. At the first signs of a potential crisis, residents will be encouraged to use the "Let's Talk" process, which is an informal process of encouraging him to communicate feelings and thoughts. As another layer of support, G4S will pursue a voluntary Chaplaincy Program that can be notified if requested by the youth. Further, G4S will operate its residential community on the principles of the Therapeutic Community (TC), where each youth is encouraged to lean on peers as a support system and to work together to resolve conflict.

F. ORGANIZATIONAL STRUCTURE

Transition Team

Through the successful operation and management of juvenile residential facilities, G4S attributes its achievements to the exceptional oversight and support to 100% of our programs from several layers of G4S hierarchy. The G4S Youth Services team is available 24-hours-a-day to address programmatic concerns and needs. Our experience has provided solutions to the numerous and unique challenges



involved in transitioning a program. For this reason, G4S is prepared to dedicate a diverse team of professionals to reduce stress for everyone involved, provide the stability and support needed in each area of operations and, most importantly, and ensure the program meets expectations of G4S. We are fully prepared to open the 60-bed program, upon award of the contract. One of the key characteristics that separate us from our competitors is our ability to not



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only successfully transition programs, but to sustain quality programs. Our team who will be deployed to ensure the new program is effectively opened will be:

Jim Hill, B.S., President: Mr. Hill joined the executive management team of G4S in April 2009. He was the founder and served as the President of Sunshine Youth Services from 2000 through 2009. Prior to starting Sunshine, Mr. Hill was the CEO of Charter Hospital of Tampa Bay and a former Board member of the Tampa Bay Hospital Association. Jim earned his Bachelor's Degree from the University of Florida. Within his role at G4S Youth Services, Mr. Hill ensures the integrity and oversight of the financial systems of the company. Mr. Hill served as President of the Florida Juvenile Justice Association (FJJA) from 2006 – 2009, where he was active in the numerous committees working closely with the Department of Juvenile Justice, i.e. Efficiencies, Contract Procurement, Medical and Legislative Affairs. He currently serves on the Executive Board of FJJA as past president. Mr. Hill has over 16 years of experience working diligently to improve the interests of juvenile justice stakeholders consisting of parents, youth, employees and organizations working with the Department.

Peter Plant, B.A., M.A., Senior Vice-President of Education and Policy Development: Mr. Plant has over 22 years of experience working with Florida DJJ. He has served on the DJJ Administrative Rule Workgroups for Residential, Quality Assurance, CCC, Training and PAR; and DJJ Policy Workgroups for QA Improvements, Contracts and Procurement, Behavior modification, Contract Performance Standards, Administrative Efficiencies, RFP Past Performance Criteria, Common Definitions, PREA Standards and Strategic Plan. Mr. Plant served as a Technical Advisor to the Blueprint Commission and drafting of the Blueprint Bill. He also drafted the legislative language authorizing DJJ to promulgate administrative rules for health care, mental health and substance abuse services, and developmental disabilities services. Mr. Plant has served as the DJJ/FJJA representative on revisions to the DCF Child Abuse Reporting Rule and the FJJA representative on revisions to the AHCA BHOS Rules.

Gene Magrini, M.B.A., Vice-President of Administration: Mr. Magrini has 11 years of experience working with Florida DJJ and over 23 years of direct Human Resources experience. He was a Regional Human Resources Director for Charter Behavioral Health Systems for five years and the Human Resources Director for the Tampa Bay



Tab 5- History, Experience, Credentials, and Requirements Texas Juvenile Justice Department Secure Residential Specialized Program Services

Buccaneers for four years. Mr. Magrini has an undergraduate degree in Business Administration, has been continuously certified as a Senior Professional in Human Resources since 2000 and received his M.B.A. from the University of Florida.

Brian Neupaver, B.A., Vice-President of Operations: Mr. Neupaver has 10 years of experience working with Florida DJJ. He is a graduate of Waynesburg University with a degree in Criminal Justice and is currently a candidate for an Executive MBA Program. As Vice-President of Operations, he is responsible for operations, business development, strategy implementation and promotion of continuous communications between the residential youth facilities and Corporate Management. In a career that reflects positions of increased responsibility within the juvenile system, Mr. Neupaver has been involved in the rehabilitation of youth for the past 13 years. For nine years, he has served in management roles including Chief Operating Officer. He has served on the Board of Directors for the Central Pasco Chamber of Commerce and involves himself in various community projects.

Rickie Grant, B.A., Director of Operations: Mr. Grant has been with G4S since 2007. He has over 30 years of experience in the juvenile justice field, is a Certified Co-Occurring Disorders Professional and a trained Conflict Resolution Mediator. Further, Mr. Grant has extensive experience in the regional management and development of therapeutic programming for at risk adolescents in the Juvenile Justice system. Mr. Grant has a Bachelor's degree in Liberal Arts, with a concentration in Behavioral science/Psychology from Clarion State College. His role is to oversee the administrative functioning of all G4S residential programs.

Melissa McBride, B.S., Director of Corporate Compliance: Ms. McBride has over 20 years of experience working with Florida DJJ and adolescents in residential settings. She has held various positions including Director of Operations, Quality Assurance Director and Executive Director. Ms. McBride holds a Bachelor's Degree in Psychology and has served on DJJ workgroups for policy and Quality Assurance, has served on the Department's R-PACT Implementation Team and is a certified Florida Quality Assurance peer reviewer. Ms. McBride's role will be to oversee risk management systems operations, contract compliance, accreditation and outcomes management.

Michelle Hinson, B.A., Regional Compliance Director: Ms. Hinson has been employed with G4S since 2009, and has worked in the juvenile justice field for 13 years. She earned her bachelor's degree in criminology from the



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University of South Florida in 1997. Past experience includes 13 years of case management with Charter Behavioral Health System; Program Director, Executive Director and risk management services for Sunshine Youth Services/G4S.

Deena Green, Ph.D., Evidence-based Trainer: Dr. Green is the G4S evidence-based trainer. She was a former training manager for the Idaho Department of Corrections Bureau of Offender Programs, and has 32 years of experience providing direct services to adult/juvenile offenders. Dr. Green is a nationally recognized speaker on topics related to motivational interviewing, substance abuse, cognitive restructuring, behavior motivation systems, and leadership. She has worked extensively as a consultant for the National Institute of Corrections, Office of Juvenile Justice and Delinquency Prevention, state and Federal juvenile and adult systems. Dr. Green received her M.A. degree in Counseling (emphasis in addictions) and Ph.D. in Forensic Psychology from the University of Utah.

Mary Frances Magan, RN, Director of Health Services: Ms. Magan has 19 years of experience with DJJ and has served on DJJ workgroups for Quality Assurance, the Department's R-PACT Implementation Team and is a trained DJJ Quality Assurance peer reviewer. She has extensive knowledge of the Department's medical standards and has 21 years of experience working as a registered nurse with adolescents in the substance abuse and mental health arena, serving as Director of Nursing for 15 of those years. She provides training in infection control, develops OSHA plans and ensures compliance with health care standards. Ms. Magan's role will be to provide oversight of health practices.

Dianne Rehtine, M.D., F.A.A.F.P., C.C.H.P.-A.: Dr. Rehtine is the G4S medical consultant, contracted to provide expert medical opinion to health needs.

Bridget Goodrich, Director of Staff Development and Training: Ms. Goodrich has over 22 years of experience. Her educational focus is in Secondary Education and Human Development. Ms. Goodrich possesses an array of certifications that include, but is not limited to, Master PAR Instructor; Motivational Interviewing Trainer; Thinking for a Change Train the Trainer; Impact of Crime; Girl Matters; SAVVY Sisters; Trauma Informed Care Sanctuary Model Trainer; and a Train-the-Trainer Instructor for the American Safety and Health Institute. Her role is to ensure the delivery of training.

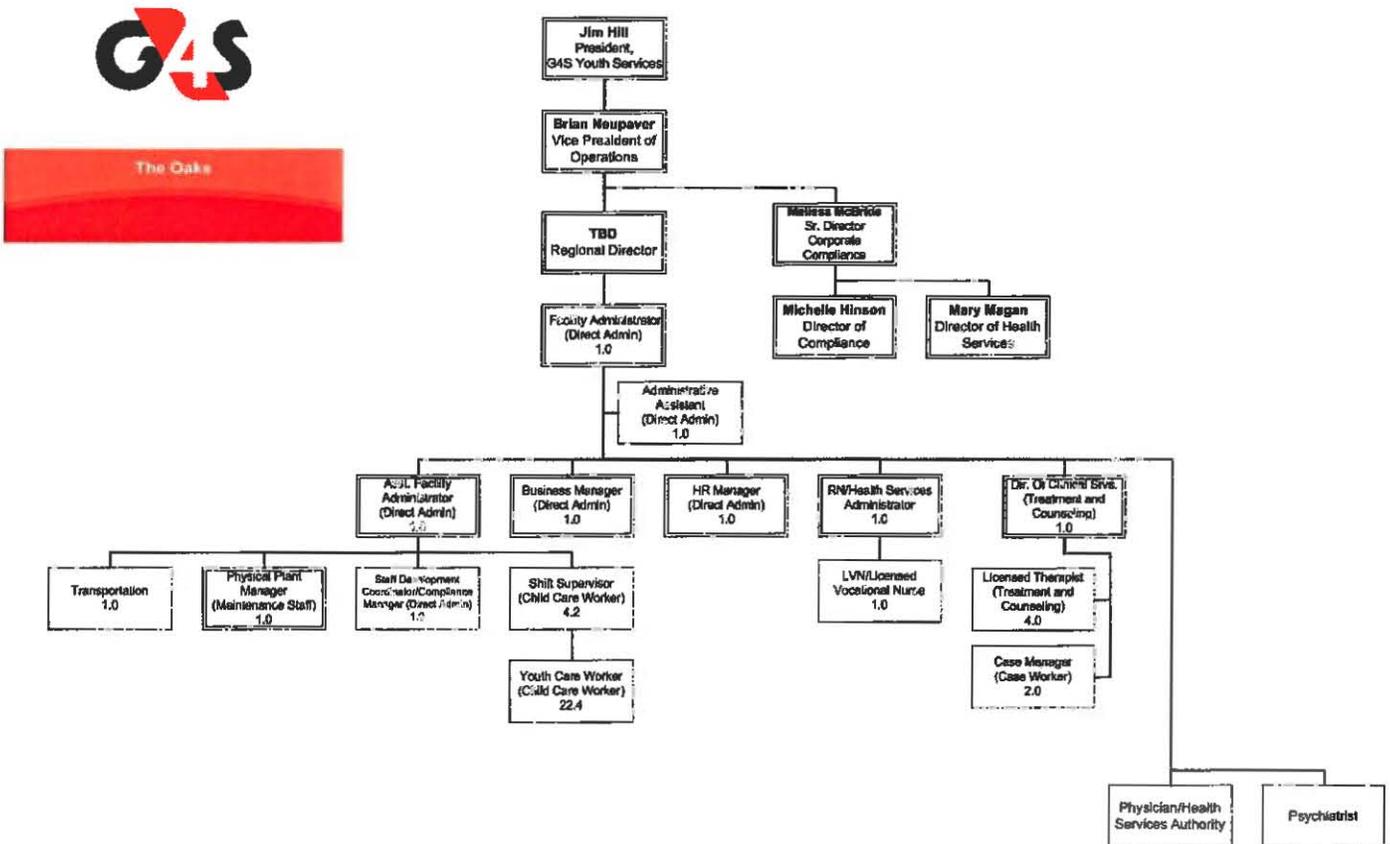


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Debbie Watts, L.M.H.C., Ph.D., Director of Business Development: Dr. Watts has over 15 years of leadership experience in the field of juvenile justice and 16 years clinical experience in the behavior health treatment with juveniles. Dr. Watts received her Ph.D. from Barry University in the field of counseling and leadership, and is a licensed therapist. Dr. Watts has diverse experience in DJJ programming, policy and procedures, quality assurance and treatment. She has been an adjunct psychology instructor, research review panelist and has provided clinical and administrative oversight to the development and operations of service delivery quality.

AJ Swick, B.S.: Mr. Swick has 15 years of progressive accounting experience at companies ranging from startups through industry leaders. His career began in staff level positions at RTG and Marriott. For the last five years, he has held Controller level positions. Mr. Swick has a Bachelor's of Science in Accounting and CMA certification from the University of Tampa. His role will be to oversee payroll, reporting, and the financial support of the program's needs.

Program Oversight





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The primary responsibility for the program management will rest at the program level and be supported by a Regional management team, corporate team, and executive levels. The Facility Administrator will conduct a mandatory, daily management meeting where critical operational information will be shared, then presented during the weekly regional meeting. There will be weekly department meetings, where staff coaching will consistently provide quality performance feedback.

Monthly financial reviews will ensure the most effective use of funds and resources, and will be communicated to the Vice-President of Operations. G4S will maintain a state of the art IT system that tracks data, generates essential, comprehensive reporting, maintains high level security monitoring, and provides the ability to immediately communicate with all levels of leadership. On a monthly basis, key performance indicator reports will be compiled and analyzed, then reviewed during corporate, regional, and program meetings. Specific required action steps will be provided directly to the Facility Administrator and Management Staff, with further involvement with the Director of Corporate Compliance if needed. Although the program will implement weekly coaching tools for quality and programming effectiveness, disciplinary action will be taken at any point where policies and procedures or the code of conduct have not been followed.

G. RELATIONSHIP OF PARENT ORGANIZATION TO RESPONDENT

Executive-Corporate Oversight

G4S has an effective and efficient organizational structure with a track record of providing strong leadership, quality assurance and improvement, and control of G4S Youth Services' programs. To maintain a steadfast presence, G4S leadership represents executive oversight, corporate, regional and program management oversight. Collectively, corporate has over 200 years of unrivalled experience in juvenile justice operations, management, and treatment.



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In 100% of G4S programs, support is provided by individuals who are available 24 hours a day to address programmatic concerns and needs, which is conducted via the most updated technology for instantaneous communication between all levels of leadership.

On a daily basis, the President has the responsibility for overall management of the company, oversees finance, is actively involved in daily communication with executive, corporate and regional leadership, facilitates planning processes, participates on the starting up of new programs, and ensures that quality and compliance is of utmost importance. On a weekly basis, the Vice-President of Operations chairs a regional management meeting for a myriad of communication regarding program data, activities, human resource issues, compliance issues, operational issues, education and policy issues, and to establish goals that provide the highest quality to manage and control. This information is communicated to the President.

On a monthly basis, executive and corporate leadership attend standing meetings that include Jim Hill, G4S Youth Services President; G4S North America Secure Solutions President; Chief Financial Officer at G4S Americas; Chief Operating Officer of G4S plc.; and Chief Financial Officer for G4S Secure Solutions, to review key data, actions, and divisional needs. On a corporate level, the President will facilitate meetings with Facility Administrators as needed.

H. LIST OF REFERENCES

G4S has been fortunate to sustain contracts over lengthy periods of time; therefore, we are unable to provide references for "closed" projects. References have been obtained from customers of authority who can speak for G4S' residential and education service delivery, thereby providing an overall view of G4S' capability to deliver quality programs, while maintaining professionalism and integrity.

The following lists provide contact information for thorough review of G4S' capability to provide quality management and operations of numerous residential, outpatient and educational programs.



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Customer Reference	
Customer Reference 1:	Laura K. Moneyham, Assistant Secretary Florida Department of Juvenile Justice 2737 Centerview Drive, Suite 2219 Tallahassee, FL 32399-3100 Phone: (850) 921-4188 Email: laura.moneyham@djj.state.fl.us
Services provided by G4S:	G4S provides residential services to the Florida Department of Juvenile Justice at the following programs: <ol style="list-style-type: none">1. Avon Park Youth Academy2. Bartow Youth Academy3. Columbus Juvenile Residential Facility4. Central Pasco Girls Academy5. Cypress Creek Juvenile Offender Correctional Center6. Dade Juvenile Residential Facility7. Daytona Juvenile Residential Facility8. Gulf and Lake Academy9. Hastings Comprehensive Mental Health Treatment Facility10. Hillsborough Girls Academy11. Martin Girls Academy12. Okeechobee Girls Academy13. Okeechobee Juvenile Offender Correctional Center14. Okeechobee Youth Development Center / Okeechobee Intensive Halfway House15. Orange Youth Academy / Orlando Intensive Youth Academy16. Palmetto Youth Academy17. Polk Halfway House18. Riverside Academy19. Spring Lake Youth Academy

Customer Reference	
Customer Reference 2:	Ken Kenworthy, Superintendent Okeechobee County School Board 700 SW 2 nd Avenue Okeechobee, FL 34974 Phone: (863) 801-9002 Email: kenworthyk@okee.k12.fl.us
Services provided by G4S:	G4S provides education services to the Okeechobee County School Board at the Okeechobee Intensive Halfway House, Tantie (Okeechobee Juvenile Offender Correctional Center) and Okeechobee Girls Academy



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Customer Reference	
Customer Reference 3:	Sandra "Sam" Himmel, Superintendent Citrus County School Board 1007 West Main Street Building 100 Inverness, FL 34450 Phone: (352) 726-1931 Email: himmels@citrus.k12.fl.us
Services provided by G4S:	G4S provides education services to the Citrus County School Board at the Cypress Creek Juvenile Offender Correctional Center.

Customer Reference	
Customer Reference 4:	Dr. Joseph G. Joyner, Superintendent St. John's County School District 40 Orange Street St. Augustine, FL 32084 Phone: 904-547-7502 Email: joynerj@stjohns.k12.fl.us
Services provided by G4S:	G4S provides education services for alternative school programs in St. Johns School District.

Reference Letter

In addition to the above four references, G4S humbly submits the following letter from Paul Abbatozzi, Director for school services for the St. Johns County School District.

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**Tab 5- History, Experience, Credentials, and Requirements
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**

St. Johns County School District
 40 Orange Street
 St. Augustine, Florida 32084
 (904) 547-7500
 www.stjohns.k12.fl.us
 Joseph Joyner, Ed. D.
 Superintendent



January 17, 2013

To Whom It May Concern:

The St. Johns County School District is fortunate to have G4S Youth Services as our contracted partner in delivering educational programs and services at our Florida DJJ facilities. We have worked together since July 1, 2008 to consistently improve these programs in the face of diminishing resources. Rather than retreat from this financial challenge, G4S has embraced it. They have a total commitment to delivering quality services to youth who too often are written off as uneducable. The numbers of youth who earn high school diplomas and GEDs are evidence of this commitment.

The teaching and administrative staff G4S hires is highly qualified and committed to the youth they serve. Their quality assurance process and methods ensure that State and District requirements and policies are closely followed and often exceeded.

We highly recommend G4S Youth Services to any agency who is seeking a top quality and committed provider of services for youth.

Sincerely,

Paul Abbatinuzzi
 Director for School Services

cc: Tim Forson, Deputy Superintendent for Operations

The St. Johns County School District will inspire good character and a passion for lifelong learning in all students, creating educated and caring contributors to the world.

School Board	Beverly Slough District 1	Tommy Allen District 2	Bill Mignon District 3	Bill Fehling District 4	Patrick Canan District 5
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I. LIST OF CONTRACTS TERMINATED WITHIN THE PREVIOUS 36 MONTHS

There have been no terminated contracts within the last 36 months.

J. AFFIRMATIVE ACTION POLICY OR PLAN

No such plan or policy is required as we are not a federal contractor. Respondent has a comprehensive EEOC policy and will not discriminate against any employee or person seeking employment because of race, religion, sex, color, national origin or non-job-related disability.

K. LIST OF MEMBERS OF GOVERNING BODY AND/OR ADVISORY GROUP

Active Officers of G4S Youth Services include James C. Hill, Jr., President; Susanne Jorgensen, Chief Financial Officer and Treasurer; and Fiona Walters, Secretary. Active Directors include Susanne Jorgensen, Drew Levine and Fiona Walters.

L. LITIGATION INVOLVEMENT WITHIN THE PAST FIVE YEARS

- Toni Bone v G4S Youth Services (case won on Summary Judgment, former employee)
- Shanique Harris (estate) v G4S Youth Services (Settled 2012, Estate of employee sued over death of employee who was shot by ex-boyfriend in parking lot)
- Anthony Vessels v G4S Youth Services (Settled 2012, Youth Injury)
- Abdulgander Noroly v G4S Youth Services (Settled 2009, youth injury)
- Kaelib Clever v G4S Youth Services (Settled 2012, Youth Injury)
- Helen Hayes v G4S Youth Services (discovery, former employee)
- Alan Robison v G4S Youth Services (discovery, former employee)



TAB 6. SITE AND FACILITY SPECIFICATIONS

RESPONDENT MUST CHECK ONE BELOW

YES _____ NO Proposed facility is within 1,000 feet of a residential area, a primary or secondary school, property designated as a public park or public recreation area by the state or political subdivision of the state, or a church, synagogue, or other place of worship.

YES _____ NO Proposed facility is an existing fully licensed and operational facility currently in use by the Respondent.

A. FACILITY DESCRIPTION

G4S has entered into a leased agreement with Brown County, Texas, to operate a secure juvenile justice, post-adjudication treatment program in the facility formerly known as Ron Jackson II (TYC). The facility address is 800 FM 3254 in Brownwood, Texas. Brownwood is a city and county seat in Brown County, Texas, with a population of approximately 20,000 people. The city and facility lie within the Brownwood Independent School District. The facility is located on approximately 50 acres of land, which provides a vast amount of area for outside activities.

The facility, Ron Jackson II, was closed in August 2011, in accordance with the requirements in Senate Bill 653, which created the TJJD. That law also contained a provision allowing closed TYC facilities to be conveyed to cities or counties for local use. In January 2012, the Brown County Commissioners Court approved a resolution to acquire the facility, which was subsequently approved by the State.

B. DEFINE OTHER AGENCIES/GROUPS UNDER OR ANTICIPATED CONTRACTS IN THE SAME FACILITY

At this time we do not have, nor do we anticipate having, any other contracts with agencies or groups, except for the Brown County Juvenile Board and Juvenile Court.



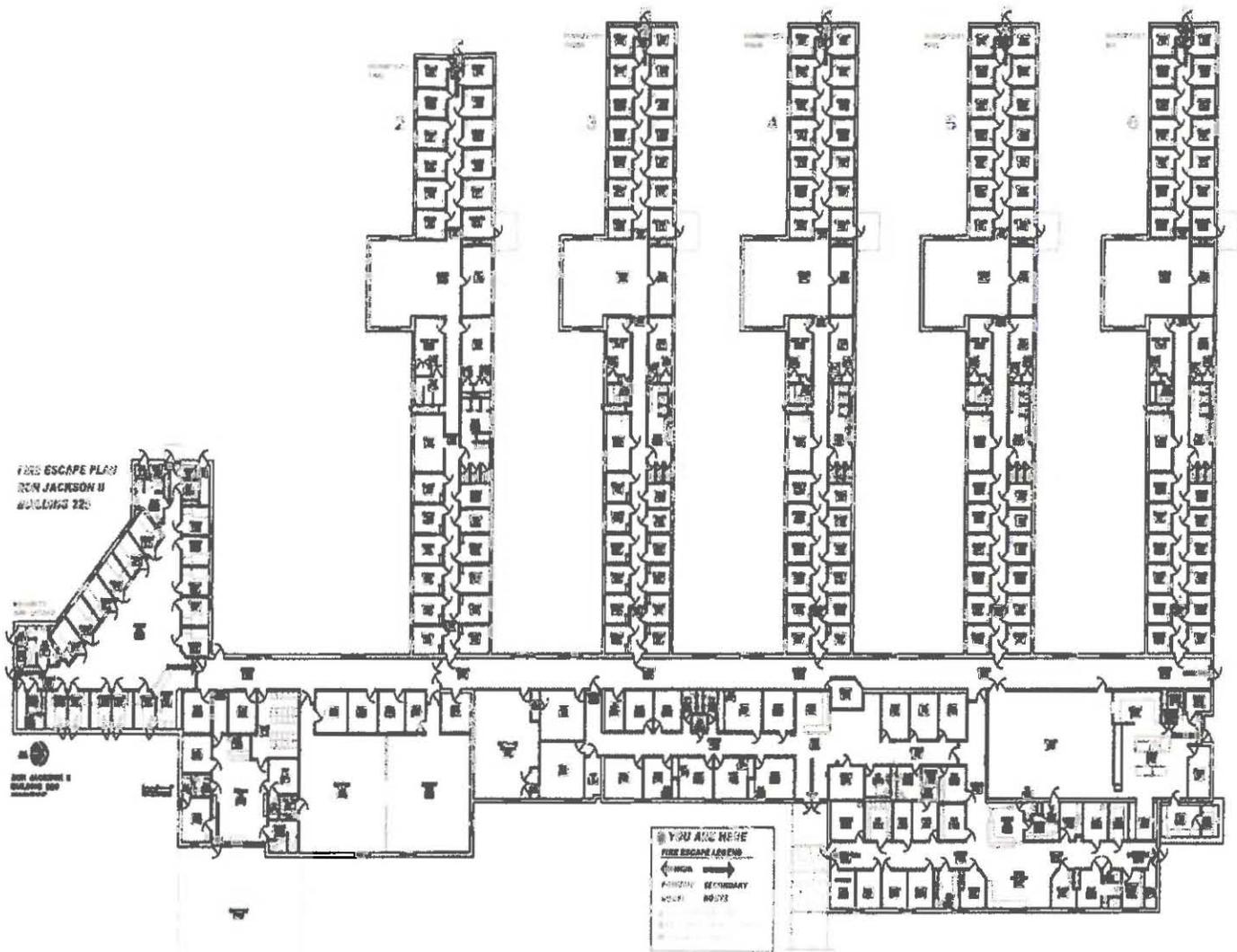
C. TYPE OF PROGRAM/SECURE OR NON-SECURE

We intend to operate a secure, post-adjudication treatment program under the provisions of Chapters 341, 343, and 344, Title 37, Part II.

D. DORM ROOMS FOR MALES

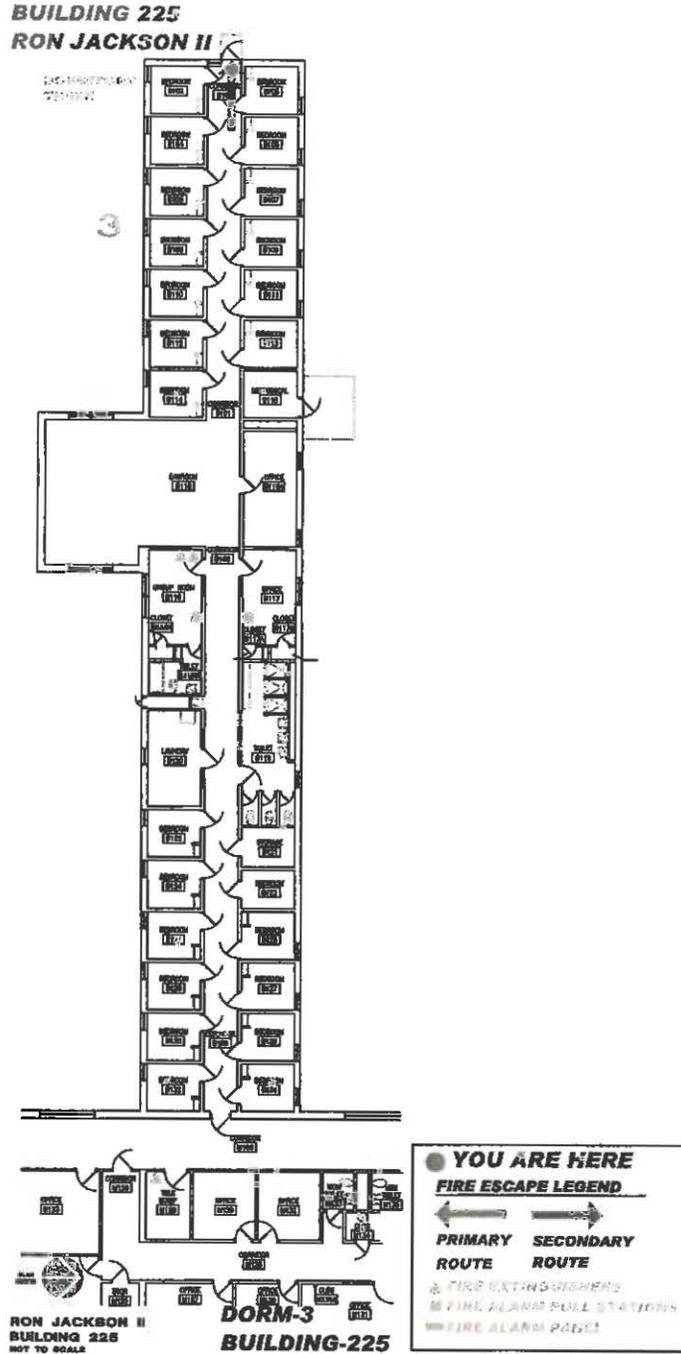
As reflected in the attached floor plans, there are five independent dorms, each containing 24 individual bedrooms.

Facility Floor Plan





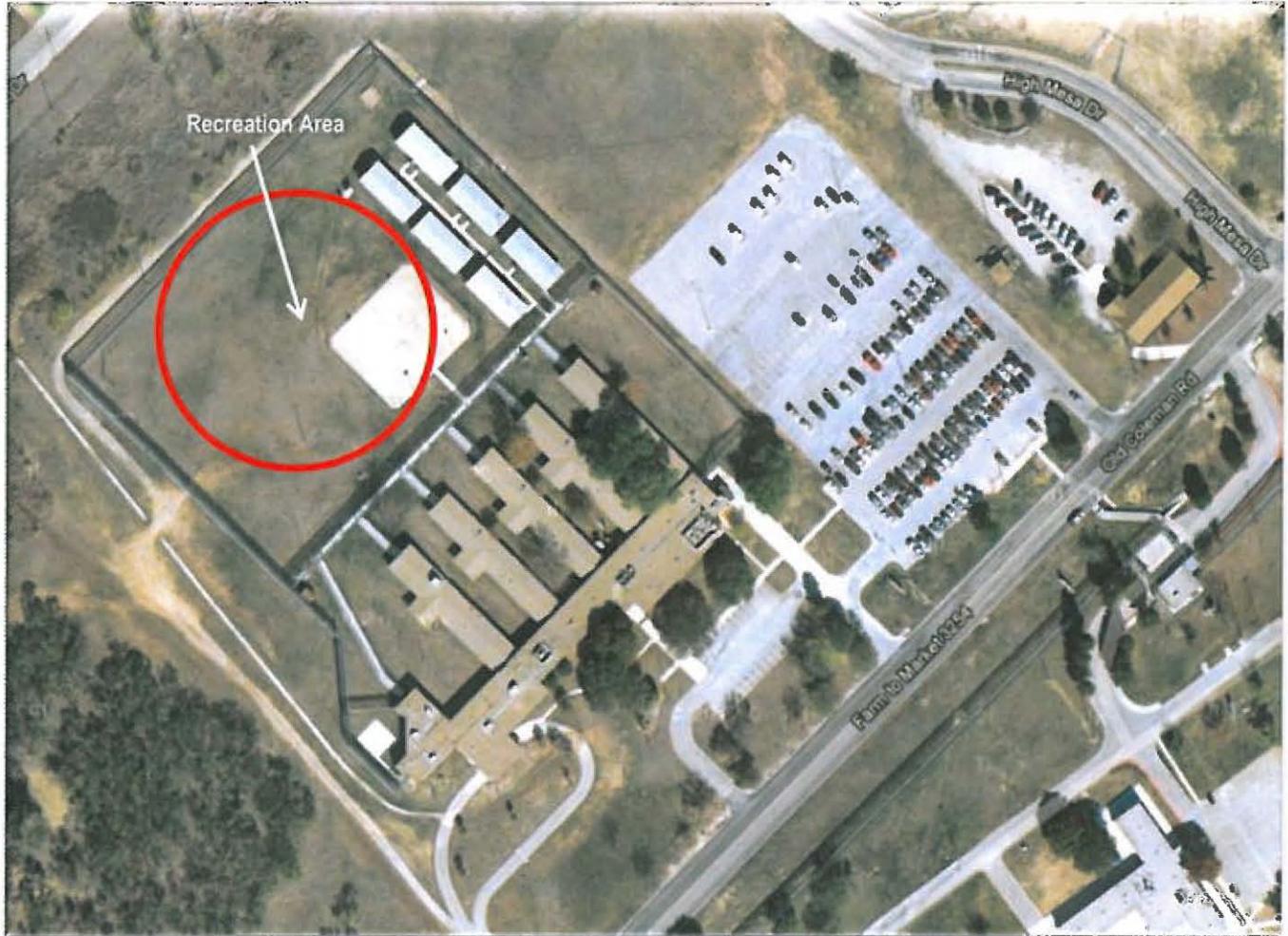
Dormitory Floor Plan





E. RECREATIONAL SPACE FOR MALE JUVENILE OFFENDERS

As reflected in the attached satellite image of the facility, there are basketball/volleyball courts and ample space to conduct a variety of outdoor recreational activities, including kickball, soccer, and softball.



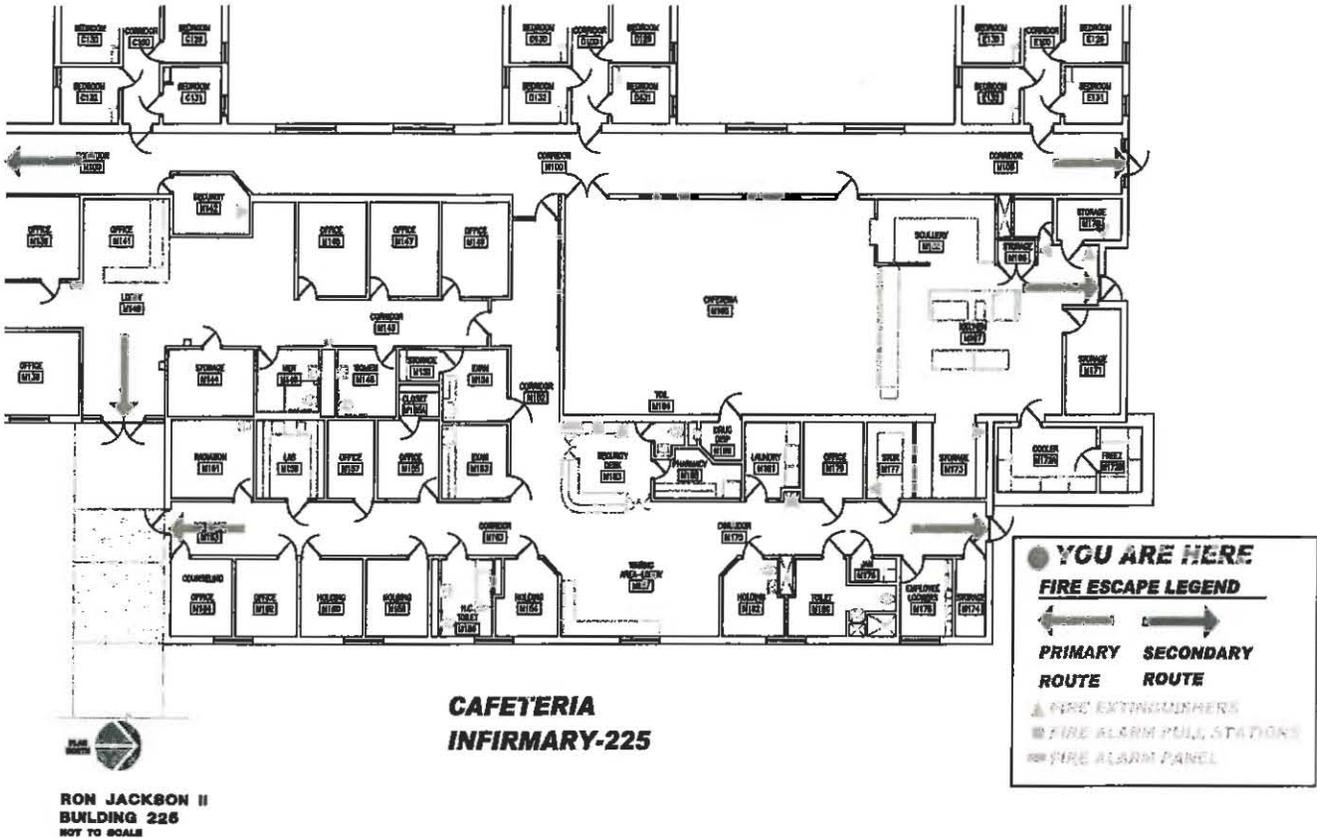
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F. MEDICAL ROOM

As reflected in the attached floor plan, the facility contains ample infirmary space to meet the health needs of youth in the program. When the facility was a TYC facility, the infirmary often served the needs of over 100 youth.

**BUILDING 225
 RON JACKSON II**



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G. LOCATION AND SPACE FOR EDUCATIONAL SERVICES

Referring to the satellite image below, there are six buildings immediately behind the living units that will be used for educational services provided by the Brownwood ISD, as was the case when the facility operated under TYC.



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Tab 7-Program Implementation and Commencement Texas Juvenile Justice Department Secure Residential Specialized Program Services

TAB 7. PROGRAM IMPLEMENTATION AND COMMENCEMENT

A. ABILITY, RESOURCES AND COMMITMENT TO COMMENCE SERVICES

G4S Youth Services is a subsidiary of one of the world's leading security solutions providers, G4S plc. As a financially strong and long-standing group of companies, we have access to operating capital necessary to for all program needs. G4S is fully functional, financially solvent, and has the ability, resources and commitment necessary to acct TJJJ youth and commence services described in the RFP on May 1, 2013.

G4S is vested in maintaining a comprehensive balance of systems that result in professional, ethical and healthy program operations. At a minimum, it will be the responsibility of Human Resources to actively engage program planning; activate the transition team; analyze performance of existing program staff; expedite timely recruiting and retention strategy; implement effective gender specific and job specific training; ensure understanding of the G4S Core Values, mission and philosophy; monitor key performance indicator data; review performance evaluations; and, implement personnel corrective actions as needed to ensure G4S vision for reputation, relationships, services, and operations. Our management is committed to competence and will continue to hire team players with the highest competency abilities to meet the needs of our boys and young men and the demands of our jobs.

A formal code of conduct, established by top leaders, will address appropriate ethical and moral behavior as an expected standard in which all employees will receive training. ***Management fosters and encourages an agency culture that emphasizes the importance of integrity and ethical values. This culture is not a choice; it is an expectation.*** G4S will maintain internal control and conscientious management that interfaces with our fidelity and compliance processes, wrapped around our internal risk management system, to achieve the Department's objectives and provide accountability for its operations. The internal program control structure will be continually assessed, evaluated and appropriately updated to meet changing conditions of the population.

On a daily basis, the Vice President of Administration, overseeing the Human Resources department, will



**Tab 7-Program Implementation and Commencement
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**

communicate with the President and/or VP of Operations to converse on events, issues and needs for program and/or staff continuity. Further, this department will ensure a complete policy and procedures manual will be developed specific to moderate-risk offenders, incorporating Department policies and procedures as appropriate.

B. START-UP PLAN/SCHEDULE

G4S understands the challenges involved in successfully opening a program, and is committed and motivated to dedicate staff and resources needed. Upon notice of intent to award, G4S will implement a pre-operational implementation plan that includes initial start-up, administration, support services, human resources, case management, accounting services, food services, physical plan and maintenance, training and staff development, safety and security, medical services, treatment services, educational services, and operational services and vendor services. There will be a focus on quality and compliance from the beginning, and essential employees will be available for incoming staff.

C. TIME TABLE OF ACTIVITIES

The initial implementation plan (shown below) will activate processes immediately following the signing of the contract. G4S will deploy its experienced transition team, consisting of corporate, regional, and management personnel, to implement an internal, comprehensive checklist customized to monitor all tasks accomplished, status of unfinished tasks, and any barriers and solutions.

AREA	TASK	ANTICIPATED TIMELINE
Signing of Contract	<ul style="list-style-type: none">It is anticipated the contract will be fully executed by April 19, 2013. All subsequent timelines will follow that date.Administration to meet with TJJD to review implementation plan, review lease agreement, and resolve any outstanding issues	April 19, 2013



**Tab 7-Program Implementation and Commencement
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**

AREA	TASK	ANTICIPATED TIMELINE
Initial Start-Up	<ul style="list-style-type: none"> ▪ Kick off meeting with Transition Team to finalize transition plan ▪ Kick off meeting of Implementation Plan to activate actions ▪ Begin staff analysis; interviewing; references; drug testing; and make offers contingent upon criminal history record check ▪ Finalize staff training plan ▪ Identify medical, clinical and case management services ▪ Daily review of tasks, goals and observe on-going operations 	April 19, 2013 through May 3, 2013
Human Resources	<ul style="list-style-type: none"> ▪ Activate the multi-pronged, HR recruitment strategy to efficiently screen experienced job applicants and select qualified personnel ▪ Implement staff retention plan ▪ Make internal and external announcement for G4S positions ▪ Check references / backgrounds 	Job Fair to be held following signing of contract Plan to fill positions by May 3, 2013
Administration	<ul style="list-style-type: none"> ▪ Secure appropriate insurances and licenses ▪ Establish accounts with local businesses ▪ Establish IT support ▪ Assess current healthcare services ▪ Promulgate policies, procedures, emergency plans ▪ Set up delivery and storage of supplies and materials ▪ Develop sanitation / preventative maintenance plan ▪ Develop plan to incorporate community support services ▪ Review current practice & request training of educators ▪ Plan and prepare environment to meet youth needs 	May 1, 2013 through May 30, 2013
Physical Plant and Maintenance	<ul style="list-style-type: none"> ▪ Resolve safety and/or security concerns ▪ Ensure the physical plant, equipment and environment are in compliance with the preventive maintenance plan 	Completed by May 1, 2013
Support Services	<ul style="list-style-type: none"> ▪ Meet with law enforcement and related community agencies ▪ Develop community relationships for support to program ▪ Recruit Community Advisory Board 	May 1, 2013 through May 31, 2013
Training and Staff Development	<ul style="list-style-type: none"> ▪ G4S certified trainers to begin comprehensive training 	Weekly, beginning May 6, 2013 Training anticipated to be completed by May 31, 2013
Food Services	<ul style="list-style-type: none"> ▪ Ensure food is ordered, planned, and meal preparation/menu compliance meets national nutritional standards. 	May 8, 2013
Accounting Services	<ul style="list-style-type: none"> ▪ Ensure effective accounting operations, budget and fiscal reporting systems are in accordance with Corporate policies and systems ▪ order equipment, supplies (radios, log books, etc.) and materials 	May 10, 2013



**Tab 7-Program Implementation and Commencement
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**

AREA	TASK	ANTICIPATED TIMELINE
Medical Services	<ul style="list-style-type: none"> ▪ Ensure all agreements are in place ▪ Set up medical equipment, filing system, locked box, etc. in designated area ▪ Ensure medical personnel are trained and prepared to begin services 	May 10, 2013
Case Management	<ul style="list-style-type: none"> ▪ Set up case management files ▪ Ensure staff are efficiently trained for job specific duties ▪ Work collaboratively with current provider to review files 	May 17, 2013
Treatment Services	<ul style="list-style-type: none"> ▪ Ensure all treatment curriculum and treatment modalities are in place; set up file location, group room(s), positive performance system, and environment; ensure clinical personnel are trained and prepared to begin services 	May 17, 2013
Certification for Residential Services	<ul style="list-style-type: none"> ▪ Verification of completion for certification process 	May 31, 2013
Anticipated contract start date	<ul style="list-style-type: none"> ▪ Begin operations of the secure residential specialized program services 	June 1, 2013
Admission of Males Youth	<ul style="list-style-type: none"> ▪ Begin accepting referrals from TJJD and begin intake 	June 1, 2013

D. NOTIFICATION OF STATE AND LOCAL OFFICIALS IN THE COMMUNITY

It is our understanding that the Brown County Commissioners' Court, itself, initiated the proposal to obtain the facility from the state and to operate or contract for operation a secure juvenile residential treatment program for adjudicated delinquents, thus obviating the need for notice to itself. It is also our understanding that county officials have posted or provided the required notice under GAP 385.8161 to other parties.

E. RESUMES OF KEY PERSONNEL

Resumes for all staff positions are located in Tab 8. However, examples of key personnel resume/job expectations are identified as the following:

- **Facility Administrator:** This position is expected to have a resume that includes at least a bachelor's degree from an accredited college. However, G4S makes exceptions to this, based on extraordinary experience of individuals who are committed to G4S and the Department, and committed to pursuing a degree while employed by G4S. This position is preferred to have at least five years of experience in secure



Tab 7-Program Implementation and Commencement Texas Juvenile Justice Department Secure Residential Specialized Program Services

residential placement, with most of those years in management. This position will provide leadership in direct administration, program operations, and adherence to contract requirements, budgets, TJJJ Administrative Rules and develop relationships with TJJJ, community, and family.

- **Assistant Facility Administrator:** This position is expected to have at least a bachelor's degree in business, psychology or nursing. However, G4S makes exceptions to this, based on extraordinary experience of individuals who are committed to G4S and the Department, and committed to pursuing a degree while employed by G4S. This position is preferred to have at least five years of experience in secure residential placement, with at least two years supervisory experience. This position will be responsible for programming, implementing and monitoring daily operations; staff and program scheduling; financial management; disciplinary procedures; incident reporting; CCC reporting; risk management; behavior management; emergency preparedness; and facility operational procedures.
- **Health Services Administrator:** This position will be a licensed Registered Nurse in the state of Texas and is preferred to have at least five years of experience in secure residential placement. This position is expected to ensure 40 hours a week of medical services; be on-call 24 hours a day; facilitate triages in medical and non-medical situations; provide nurse supervision and training; and, oversee the daily operations of the medical department.
- **Director of Clinical Services** is preferred to be a Texas licensed Psychologist that meets professional standards of the Texas Occupations Code, Title 3, Chapter 501, and Psychologists' Licensing Act. This position is preferred to have at least five years of experience in secure residential placement. The role will be to ensure there is a direct line of communication with the mental health professionals; oversee the mental health evaluation and treatment process; provide clinical services when needed; ensure clinicians are qualified to provide services, based on their education, training and experience, and implement effective, evidence-based and researched interventions. This position will provide 24/7 emergency on-call coverage and provide oversight to the therapists delivering services.



F. COMPUTER SET-UP

G4S has the capability to maintain a computer setup to include, but not limited to, Microsoft Office 2003 or XP or more recent versions (for Word documents and Excel spreadsheets), a local Internet service provider (ISP), and e-mail addresses for program management, caseworkers, and healthcare staff. G4S is prepared to ensure sufficient numbers of computers will be provided for normal business communication. G4S is experienced in maintaining youth and facility incident information into state required information centers, and will fully comply with the TJJ's Correctional Care System, Youth Grievance System, and Incident Reporting Center.

G. STAFF TRAINING

G4S maintains a comprehensive training module that includes, at a minimum, the behavior motivation system that is interwoven into the behavior management system. We refer to this as our Positive Performance System (PPS). It will be our preference to provide training to all staff, educators, and volunteers on the introduction to the positive performance system, the use of rewards and consequences, verbal crisis intervention, and de-escalation skills. Each staff member will be appropriately trained and certified in Handle with Care, a non-violent crisis intervention, prior to working with residents. G4S will ensure each staff follows our vision and expectations for a healthy environment. Seclusion and chemical agents will not be used. Only staff who have been trained and certified in Handle With Care will restrain a youth and only as a last effort. Further, it is G4S' preference to provide motivational interviewing training for all staff and educators to teach skills to set boundaries without engaging in power struggles that can potentially progress to physical interventions. G4S will ensure each staff is efficiently trained in all areas required by the RFP.

G4S' strength in training is evidenced by past Florida Department of Juvenile Justice (FDJJ) Quality Assurance reports (now known as FDJJ Quality Improvement), showing "Exceptional" ratings for training in G4S programs reviewed over the last year. G4S has reviewed and will comply with all core standards set forth by the Texas Juvenile Justice Department and Texas Administrative Code. Training will demonstrate the importance of core building blocks



Tab 7-Program Implementation and Commencement Texas Juvenile Justice Department Secure Residential Specialized Program Services

that create and sustain a trauma-informed culture that is safe, builds healthy relationships, addresses trauma and victimization, and teaches appropriate, communication styles. Staff training will include a framework to confront and address the more difficult “acting out” behaviors that often place males at further risk of aggression and self-harming behaviors, including self-mutilation and suicidal ideation. It will be the G4S expectation to provide reliable and consistent care and development needs on a daily basis to overcome physical, emotional, behavioral barriers.

With over 32 years of combined training and juvenile justice experience, the G4S cadre of gender-specific and gender-responsive, certified trainers are experienced in Motivational Interviewing, Trauma Informed Care, CPR/1st Aid, Handle With Care, Boy’s Council, Conflict Resolution-Peace Keeping, Impact of Crime, Thinking For a Change, Juvenile Assessment and Information System, and Skillstreaming, Evidence-based or researched curriculum training will be conducted by Dr. Deena Greene (G4S evidence-based trainer), a licensed mental health professional, or a professional that is certified or qualified for that curriculum.

To ensure each newly hired employee receives training that is detailed and specific, G4S will use a job-specific training plan that is designed to guide and monitor the training each employee receives, while allowing the program to test the competencies of the employee post-training. Job specific training hours will vary according to each position; however, the minimum number of hours devoted to job-specific training for support staff will ensure each fully understands the importance of his/her position.

On an annual basis, a Training Needs Assessment will be conducted, followed by the development of a Staff Development Plan. This will be done for all full-time, part-time and volunteer positions to continually measure and strengthen skills. Volunteers will receive sufficient orientation, training and supervision for knowledge of the program’s purpose and services, the needs of youth and families, and the role/responsibilities to be assumed.



Monitoring Fidelity of Training Design

All training and oversight will be provided by trainers that are highly qualified for the area of discipline. Both internal and external fidelity monitoring processes will be established to ensure delivery of the designed training curricula. All training modules will be developed in accordance with accreditation compliance and TJJD requirements. The certified trainer will be responsible for developing and maintaining the pre-service and annual training program schedules, in addition to the maintenance of staff records. The Training Coordinator will maintain a comprehensive tracker to monitor compliance to all staff trainings and will be communicated to the Facility Administrator on a monthly basis.

Pre-Service Training

G4S is dedicated to providing comprehensive and quality driven training to all youth services employees. Pre-service training will be provided consistent with TJJD rules and will be revised to meet any additional training(s) not identified below. The training modules will be cognitive behavioral in structure, which means they are experiential and require active demonstration of skills learned. In addition, an extensive on-the-job training (OJT) plan will be implemented for specific work-related responsibilities to ensure the transfer of training from the classroom setting to the field of operations within the facility. G4S will exceed the required 80 hours of pre-service training to include standard G4S components, with the inclusion of any TJJD requirements not included in our comprehensive training plan. All pre- and in-service training will be scheduled and provided by trainers that are highly qualified for their area of discipline. Both internal and external fidelity monitoring processes will ensure the delivery of the training curricula as designed.

PRE-SERVICE TRAINING	
<p>Identity</p> <ul style="list-style-type: none"> ▪ The Texas juvenile justice system ▪ TJJD rules and regulations, including those concerning the use of force ▪ The Prison Rape Elimination Act of 2003 ▪ Rights and responsibilities of program youth ▪ G4S program philosophy and culture ▪ Professionalism & ethics within the correctional environment to include conduct standards ▪ Policies and procedures ▪ Employee rights, employment discrimination, sexual harassment; equal employment opportunity ▪ American Disability Act; confidentiality; HIPAA 	<p>Development and Emotion</p> <ul style="list-style-type: none"> ▪ Cultural competence and trauma informed care; adolescent behavior of boys ▪ Risk factors and triggers relating to the youth with history of victimization ▪ Social & cultural lifestyles of delinquent males ▪ Signs and symptoms of abuse, assault, neglect and exploitation of a child, including sexual abuse and sexual assault, and procedures for reporting ▪ Mental health issues ▪ Neurological, physical and psychological developmental milestones of adolescents ▪ Signs of suicide risks & precautions



Tab 7-Program Implementation and Commencement Texas Juvenile Justice Department Secure Residential Specialized Program Services

- Security and treatment of information
- Human and cultural diversity
- Health**
 - First Aid, CPR and AED; kits; use of knife for life
 - Sexual education
 - Standard precautions: biohazard waste
 - Medical alerts; updated health issues
 - Sick call
 - Emergency evac. procedures for med alert youth
 - Standard precautions and blood borne pathogens to meet Federal Rule CFR 1910.1030 (OSHA Standard)
 - Medication pass and alerts; common side effects
 - Medical emergencies; 9-1-1
 - Physical development/common health issues of adolescent males
 - HIV/Aids; prevention & transmission of communicable diseases
 - Documentation requirements for non-licensed health professionals
- Living Environment**
 - Fire safety and awareness
 - Emergency & evacuation procedures; tool management
 - Daily program schedule
 - Strategies for positive learning environments
- Skills- Building**
 - Interpersonal relationship skills
 - Building healthy relationships
 - Promoting team building
 - Strategies for channeling excessive energy
 - Life skills
- Risk factors for delinquency and treatment
- Behavior Modification**
 - Behavior management and modification/positive performance system; Positive performance & adolescent behavior
 - Managing disruptive behavior; de-escalation
 - Promoting positive behavior; positive reinforcement techniques and strategies/effective principles of intervention
- Safety and Security**
 - Immediate access to emergency medical, mental health, substance abuse services
 - Strategies for responding to aggressiveness
 - Appropriate restraint techniques
 - Incident reporting
 - Youth supervision, safety and security procedures
 - Reducing risks
 - Competency training
 - Gang awareness
- Communication**
 - Child abuse reporting, youth rights, grievances
 - Counseling Techniques/Motivational Interviewing
 - Conflict resolution, dispute mediation, de-escalation techniques
- Gender-Specific Model**

Staff Training for Behavioral Modification and Correctional / Clinical Treatment Program

G4S has developed a comprehensive pre-service training module on the implementation of the behavior modification system. This will be provided to all staff, subcontractors, educators, and volunteers on the introduction to the behavior modification system, the use of rewards and consequences, verbal crisis intervention, and de-escalation skills. Only staff who have been trained on and certified in "Handle With Care" will restrain a youth and only as a last effort. Staff will complete the required training and meet all requirements of the curriculum, in addition to the principles and philosophical orientation of the behavior modification system (referred by G4S as the Positive Performance System-PPS), the use of rewards and consequences, verbal crisis intervention, de-escalation skills,



**Tab 7-Program Implementation and Commencement
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**

appropriate use of physical restraint holds, monitoring of the breathing, and motor control. On an annual basis, staff will complete required hours of annual behavior modification training each year that will include techniques for de-escalating problem behavior.

Gender-Specific Treatment Program Models

Pre-service training will also include training on evidence-based programming that includes, but not limited to, treatment and delinquency intervention models that are gender-specific and effective for the male population. Specifically, **The Council for Young Boys and Men/Boys Council**, a strength-based group approach for boys and young men, will be the effective, gender-specific model for males. This training module integrates the behavior modification system into the gender-specific Boys Council model, which strengthens its application and value.

Annual In-Service Training

G4S will provide at least 40 hours of in-service training to ensure staff members meet all requirements for annual training. Management will additionally receive sixteen (16) hours of training in the areas of management, leadership, personal accountability, employee relations, communication skills or fiscal training. Training will be diverse to meet the needs of all job positions, such as:

IN-SERVICE TRAINING	
<p>Identity Professionalism/ethics; Confidentiality; HIPAA; cultural competence/trauma informed care; sexual harassment; human and cultural diversity; program culture</p> <p>Health Health care and socialization; infection control; HIV/Aids; Health and safety; identification of unsafe environmental factors; physical development of boys; common health issues; staff stress management</p> <p>Living Environment Fire safety; emergency procedures; evacuation procedures; tool management ; strategies for fostering positive learning environments</p> <p>Gender-Specific Services</p>	<p>Development and Emotion Mental health and substance abuse; suicide prevention; trauma informed care</p> <p>Positive Performance System/Behavior Motivation Positive reinforcement techniques & preferred discipline techniques</p> <p>Safety First Aid, CPR, AED re-certification (as required); competency-based training, identification and reporting of critical incidents; Handle with care update; safety, supervision and security, reducing physical risks; gang awareness</p> <p>Communication Child abuse reporting; youth rights; grievances;</p>



**Tab 7-Program Implementation and Commencement
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**

Treatment model Skills-building	Motivational Interviewing/communication
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H. LICENSES HELD BY STAFF AND FACULTY

Staff Licenses: All counseling or treatment services will be provided by fully Licensed or Certified Professionals such as Chemical Dependency Counselors, Licensed Professional Counselors, or Qualified Credentialed Counselors.

G4S will provide copies of licenses to the Department upon the hiring of professional personnel.

Facility Certification: G4S will be in the process of obtaining Juvenile Board of Brown County certification at the time of proposal submission. The request for certification is shown as follows:

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**Tab 7-Program Implementation and Commencement
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**

Request for Certification Letter



G4S Youth Services, LLC
6302 Benjamin Road
Suite 400
Tampa, Florida 33634

Telephone: 813 514 6275
Fax: 813 514 6723
Email: inquiry@us.g4s.com
www.g4s.com/us

February 17, 2013

Hon. E. Ray West, Chairman
Brown County Juvenile Board
45 Oak Hill Circle
Brownwood, TX 76801

Dear Judge West:

This is to request that the Brown County Juvenile Board enter into an agreement with G4S Youth Services to operate a secure, post adjudication, residential treatment program at the former Ron Jackson II facility in Brownwood, as required by §51.125(a)(2), TEX FA. CODE. Upon certification by the Board, we will annually register the facility with the Texas Juvenile Justice Department.

If you need any additional information, please let me know.

Sincerely,

Peter Plant
Senior Vice President

Securing Your World



Tab 8. Program Components and Narrative

A. CLINICAL FOCUS NARRATIVE

G4S is committed to providing a successful secure residential treatment program that addresses the comprehensive mental health and substance abuse needs of youth in the program. G4S utilizes evidenced-based and researched curriculum and approaches to increase the likelihood of making healthy decisions and choices—ultimately increasing protective factors and reducing risk factors that lead to recidivism. G4S commits to maintaining a rich environment that values safety as the primary basis for growth and change. We are also committed to an environment that provides effective communication that is mutual, empowering and honoring; ensures healthy relationships that are respectful, supportive and demonstrate unconditional positive regard; and encourages unique qualities of each individual that support his right to personal growth and identity. Boys are provided diverse opportunities to become emotionally and behaviorally stable through innovative programming based on the principles of effective intervention.

B. LICENSE AND CERTIFICATIONS OF PROGRAM STAFF

G4S will hire fully licensed or certified professionals to provide mental health and substance abuse services. The clinical staff will include a minimum of one Masters level therapist for every 24 youth. G4S will submit each professional's license to the TJJD, if requested by TJJD. Each clinician will be in good standing with the State of Texas and will provide services within the scope of the license. Positions will meet Texas requirements, such as:

- **Licensed professional counselor** (LPC) must be in good standing with the State of Texas and meet provisions of Title 22, Chapter 681 of the Texas Administrative Code. This position is qualified to provide mental health, psychotherapeutic and human development principles to facilitate adjustment and development. Services may include individual counseling, group counseling, marriage counseling, family counseling, chemical dependency counseling, rehabilitation counseling, education counseling, career development counseling, sexual issues counseling, psychotherapy, play therapy, diagnostic assessment, hypnotherapy, expressive therapies, biofeedback, and related services.



Tab 8-Program Components and Narrative Texas Juvenile Justice Department Secure Residential Specialized Program Services

- **Licensed Social Worker** (LSW) must be in good standing with Title 22, Chapter 781, TAC. This position is qualified to provide services that include interviewing, assessment, planning, intervention, evaluation, case management, mediation, counseling, supportive counseling, direct practice, information and referral, problem solving, supervision, consultation, education, advocacy, community organization and the development, implementation, and administration of policies, programs and activities. A licensed master social worker (LMSW) or licensed clinical social worker (LCSW) may include the application of specialized clinical knowledge and advanced clinical skills in the areas of assessment, diagnosis, and treatment of mental, emotional, and behavioral disorders, conditions, and addictions, including severe mental illness in adults and serious emotional disturbances in children.
- **Licensed chemical dependency counselor** (LCDC) must be in good standing with Title 25, Chapter 140, TAC. Individual, groups and family counseling may be provided only as it involves chemical dependency issues. Services may include the diagnosis of a substance abuse disorder, development of action plans to target chemical dependency problems. This clinician may not provide services outside this scope of practice.
- **Licensed psychiatrist** will be a medical doctor in good standing with Title 3, Chapter 155, Texas Occupations Code, and will prescribe and monitor the psychotropic medication process.
- **Licensed psychologist** will meet professional standards of the state of Texas and meet requirements of Occupations Code, Title 3, Chapter 501, the Psychologists' Licensing Act in the State of Texas. Individual or group services may include providing computerized procedures, that include the application of established principles, methods, and procedures of describing, explaining, and ameliorating behavior. Services may include evaluating normal behavior that includes evaluating, preventing, and remediating psychological, emotional, mental, interpersonal, learning, and behavioral disorders of individuals or groups, as well as the psychological disorders that accompany medical problems, organizational structures, stress, and health, providing treatment through the use of projective techniques, neuropsychological testing, counseling, career counseling, psychotherapy, hypnosis for health care purposes, hypnotherapy, and biofeedback.



C. CLINICAL PROGRAM POLICIES AND PROCEDURES

G4S is willing and able to comply with all TJJJ Rules and all related Standards, in addition to any subsequent amendments to these policies and standards which apply to residential programs. The program Policies and Procedures also incorporate many elements of ACA and CARF accreditation standards. Our Health Care Policies and Procedures substantially incorporate the National Commission on Correctional Health Care Standards for Health Services in Juvenile detention and Confinement Facilities. G4S understands that TJJJ is required to follow the Federal Prison Rape Elimination Act (PREA) Standards and is prepared to be in compliance with the Act.

D. TARGET POPULATION

G4S will provide secure residential specialized program services for up to 60 male juveniles ages 10-16 referred by the Texas Juvenile Justice Department (TJJJ) who are in need of specialized mental health and substance abuse treatment services.

E. TRANSPORTATION

G4S Youth Services understands and accepts responsibility for providing local transportation services for program related purposes to youth in the program, including but not limited to, medical and dental appointments, emergency transportation, and other transportation necessities to meet the needs of the youth. Only staff that have valid driver's licenses and successfully complete the appropriate and required vehicle training will be authorized to provide transportation. Whenever youth are transported, a secure vehicle will be used and the appropriate staff-to-youth ratio will be followed. Requirements regarding searches and the use of restraints for transportation will be followed. At no time will a youth be left unsupervised in a vehicle or permitted to drive. During transportation, each youth and staff will be required to wear seatbelts, and horseplay will be prohibited. When facility vehicles are not in use, they will be locked and the keys placed in the facility's secure lock box provided for key storage.



F. STAFF REQUIREMENTS AND TRAINING

G4S is experienced in providing a safe and secure environment through resilient systems that elicit respect for personal boundaries. Supervision will be provided twenty-four (24) hours a day that follows a minimum of 1 staff to 10 youth (1:10 ratio) during the day, which exceeds RFP ratio requirement of 1:12. During youth sleep hours, G4S will provide 1 staff to 15 youth (1:15 ratio), which exceeds RFP ratio requirement of 1:16. Supervision staff will be inclusive of those who are providing direct supervision to youth and will not include supervisors, case workers, and educators. Each FTE will represent a 40-hour work week. To meet staffing needs seven days a week and exceed required ratios, G4S will schedule direct care staff as follows:

- Monday – Sunday: 8.4 youth care workers on 1st shift
- Monday – Sunday: 8.4 youth care workers on 1st shift
- Monday – Sunday: 5.6 youth care workers on overnight shift

G4S takes seriously its role and responsibility in the classroom, regardless of whether the education program is provided by the School District or G4S. As required, youth care staff will be assigned to classrooms as required to provide care, custody and supervision and respond to the everyday needs of the youth. In all of our programs, we have been very successful in training youth care workers to become a member of the classroom team where they provide proper supervision and control in the classroom and assist with the education process.

G4S will provide one master's degree therapist for every 15 youth, which exceeds the RFP requirement of 24 youth. G4S will provide two licensed nurses who will each provide (40) hours a week, which exceeds RFP requirements of 40 hours of nursing services per week. Designated medical and clinical personnel will be available on-call 24 hours, seven days a week.

The Facility Administrator will post advanced schedules to provide adequate staffing coverage for all activities throughout the week that includes, but not limited to treatment groups, meals, transports, staff training, school,



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recreation, and other events to ensure 80% of activities are structured activities during awake hours, and ratios are maintained. During on-campus family day activities, staffing ratios will be increased to accommodate the activity. These staffing ratios will provide appropriate supervision, suitable and timely response to the youth's everyday needs, safety and security issues as they arise, and immediate response to emergencies.

The staffing plan is designed to provide 24 hours awake supervision each day of the year and maintain appropriate levels of staff to effectively supervise and maintain safety and security. G4S utilizes a weekly FTE monitoring strategy to ensure proper staff ratios are maintained, while tracking staffing patterns through the position control system. A shift relief factor (SRF) of 1.4 has been incorporated into the below staffing plan for youth care workers, master control and shift supervisors that provides for training, vacations, holidays, sick time, and other absences.

G4S will use a structured system to allow for staff to make advance time-off requests, and granted approvals will be under the authority of the Facility Administrator to cover staff absences, position vacancies, and to ensure staffing ratios are continuously maintained. As previously mentioned, HR maintains an active list of both PRN and part-time employees that not only supplement full-time workforce on an as-needed basis, but is a source to fill full-time vacancies with a fully trained employee. If further needed on an emergency basis, G4S can deploy clinical, case management and administrative staff to be scheduled to work weekends and holidays. Staffing levels will provide active supervision of youth, suitable and timely response to the youth's everyday needs, and immediate response to emergencies.

Hiring Process

G4S has strength in recruitment abilities, and maintains a comprehensive, multi-pronged recruitment and retention strategy hire qualified, diverse employees. Currently, G4S provides employment to over 1,734 individuals who are well trained and diverse in job specific skills. G4S maintains a plan to hire qualified staff and provide salaries based on G4S' experience in recruiting and satisfying for the specific position consistent in G4S programs, in addition to the



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current labor market conditions. The G4S Human Resources Department has the ability to expedite job offers the same day as TDDJ background screening clearance, which is accomplished through a comprehensive tracking system that triggers the ability to proceed with offers upon notification of clearance. As a result, G4S has been effective in maintaining sufficient number of staff to meet required ratios.

The recruitment strategy includes a comprehensive network of internet and print media outlets including: usajobs.g4s.com, G4S.com, Career Center, Jobing.com, Careerbuilder.com, The Brownwood Bulletin and the Brownwood News. In addition, HR will maintain an active list of both PRN and part-time employees, which will not only supplement full-time workforce on an as-needed basis, but will be a source to fill full-time vacancies with a fully trained employee. Volunteers will be pursued and screened in accordance with TJJD requirements, as another level of support and mentoring.

The hiring design embodies G4S corporate values and ensures compliance with our Drug-Free Workplace requirements. G4S utilizes a candidate vetting system that pre-screens for suitability within our industry and establishes employment eligibility. Careful scrutiny of criminal checks, personal and professional references, education verification and school accreditation has proven vital for pre-screening applicants that are an appropriate match for the position.

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Staffing Plan

EMPLOYEE	FTE	HOURS PER WEEK
Direct Administrative/Facility Administrator	1.0	40 hours per week
Direct Administrative/Asst. Facility Administrator	1.0	40 hours per week
Child Care Worker/Shift Supervisor	4.2	40 hours per week
Child Care Worker/Youth Care Worker	(22.4 Total)	
1 st Shift	8.4	40 hours per week per FTE
2 nd Shift	8.4	40 hours per week per FTE
Night	5.6	40 hours per week per FTE
Treatment & Counseling/Director of Clinical Svs	1.0	40 hours per week
Treatment & Counseling/Licensed Therapist	4.0	40 hours per week per FTE
RN/Health Services Administrator	1.0	40 hours per week
LVN/Licensed Vocational Nurse	1.0	40 hours per week
Case Worker/Case Manager	2.0	40 hours per week per FTE
Direct Administrative/Administrative Assistant	1.0	40 hours per week
Direct Administrative/HR Manager	1.0	40 hours per week
Direct Administrative/Business Manager	1.0	40 hours per week
Direct Administrative/Staff Development Coordinator/Compliance Manager	1.0	40 hours per week
Maintenance Staff/ Physical Plant Manager	1.0	40 hours per week
Transportation	1.0	40 hours per week
Physician/Health Services Authority		Weekly
Psychiatrist		As scheduled



JOB DESCRIPTIONS

G4S has 16 years of experience in working with some of the toughest juvenile populations, ranging from low-risk to maximum risk males. We are confident of our ability to hire the right employees to mirror our vision, values and practices. It will be our preference to hire degreed and experienced employees who are at least 21 years of age, understand gender-specific populations, and are motivated to follow our required specialized treatment and care model.

Facility Administrator (Direct Administrative) is expected to have a resume that includes at least a bachelor's degree from an accredited college, and preferred to have at least five years of experience in management of juvenile programming. However, G4S makes exceptions to this, based on extraordinary experience of individuals who are committed to G4S and the Department, and committed to pursuing a degree while employed by G4S. The resume will support the person's ability to provide leadership in direct administration, program operations, adherence to contract requirements, budgets, TJJJ Administrative Rules and develop relationships with TJJJ, community, and family.

Assistant Facility Administrator (Direct Administrative) is expected to have at least a bachelor's degree in business, psychology or nursing; at least five years of experience working with specialized youth, with at least two years supervisory experience. However, G4S makes exceptions to this, based on extraordinary experience of individuals who are committed to G4S and the Department, and committed to pursuing a degree while employed by G4S. This position will be responsible for programming, implementing and monitoring daily operations; staff and program scheduling; financial management; disciplinary procedures; incident reporting; CCC reporting; risk management; behavior management; emergency preparedness; and facility operational procedures.

Health Services Administrator (RN) will be a Licensed Registered Nurse in the State of Texas and will facilitate triages in medical and non-medical situations; provide nurse supervision and training; oversee the daily operations of the health department.



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LVN/Nurse will be either a Licensed Vocational Nurse or Registered Nurse in the State of Texas; provide documentation in records; provide health education; provide required parental notifications; provide shift relief and secondary coverage, as needed, to provide health services 40 hours a week.

Director of Clinical Services (Treatment and Counseling) is preferred to be a licensed psychologist that meets professional standards of the Texas Occupations Code, Title 3, Chapter 501, Psychologists' Licensing Act. This person will ensure there is a direct line of communication with the mental health professionals; oversee the mental health evaluation and treatment process; provide clinical services when needed; ensure clinicians are qualified to provide services, based on their education, training and experience, and implement effective, evidence-based and researched interventions. The Director of Clinical Services will provide 24/7 emergency on-call coverage and provide oversight to the mental health professionals delivering mental health services.

Licensed Therapist (Treatment and Counseling) will be a fully licensed or certified professional in the State of Texas to meet the services needs of the population. Each professional will be experienced in working with adolescents; responsible to provide mental health, substance abuse, within the scope of license abilities, as detailed in Section B, "License and Certifications" above. The preferred licenses include:

- Licensed professional counselor (LPC) or licenced clinical social worker (LCSW) will hold a master's degree from an accredited university/college in the field of counseling, social work, psychology, or related human services field; qualified to provide services that include interviewing, assessment, planning, intervention, evaluation, case management, mediation, counseling, supportive counseling, direct practice, information and referral, problem solving, supervision, consultation, education, advocacy, community organization and the development, implementation, and administration of policies, programs and activities.
- Licensed Social Worker (LSW) will hold a master's degree from an accredited university/college in the field of social work qualified to provide services that include interviewing, assessment, planning, intervention, evaluation, case management, mediation, counseling, supportive counseling, direct practice, information



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and referral, problem solving, supervision, consultation, education, advocacy, community organization and the development, implementation, and administration of policies, programs and activities. A licensed master social worker (LMSW) or licensed clinical social worker (LCSW) may include the application of specialized clinical knowledge and advanced clinical skills in the areas of assessment, diagnosis, and treatment of mental, emotional, and behavioral disorders, conditions, and addictions, including severe mental illness in adults and serious emotional disturbances in children.

- Licensed Chemical Dependency Counselor (LCDC) for specifically addressing chemical dependency. This position must hold at least a two-year associate's degree with a course of study in human behavior/development and service delivery and must complete 4,000 hours of supervised experience working with chemically dependent persons.

Shift Supervisor (Child Care Worker) will have a high school diploma or GED, two years of direct care experience working with youth, one year of supervisory experience; will provide direct supervision to ensure shift-to-shift procedures are followed; oversee staff and campus schedules, incident reporting, volunteer/ visitor events, and behavior management procedures; and, proactively identify and correct any safety/security potentials.

Youth Care Worker (Child Care Worker) will be at least 21 years of age and have at least a high school diploma or equivalent and successful completion of a required training program; responsible to manage the general behavior of youth, serve as pro-social role models; provide custodial duties and housekeeping functions; monitor daily activities; demonstrate the ability to effectively work with adolescents; provide trauma-focused care; maintain a safe, healthy and structured environment; provide proper supervision at all times; and, provide unwavering interventions to shape youth behavior. Youth Care Worker I and II are differentiated by the YCW II being trained as backup to the Shift Supervisor.



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Case Manager (Case Worker) will have at least a bachelor's degree in criminology or related field and at least one year experience working with adolescents who have experienced emotional/mental health issues; responsible to provide a seamless connection and transition for the youth and community networks; will implement the G4S Faith and Community Based Delinquency Treatment Initiative Program model.

Human Resources Manager (Direct Administrative) will have bachelor's degree in business, human resources or related field or the equivalent amount of work experience in human resources. Prefer prior health care facility experience in human resources. The position will provide HR services to the corporate HR Department; provide the liaison, advisory, service, policy, and audit relationships and functions essential to the effective management of the staff; ensure that an effective staff development curriculum is established and implemented.

Physical Plant Manager (Maintenance Staff) will have at least a high school diploma or equivalent and successful completion of a required training program; three years of experience in work involving the inspection, repair, and maintenance, of household, office, and buildings, including equipment, appliances, machinery, and furnishings; provide routine and preventative maintenance/repairs.

Administrative Assistant will have at least a high school diploma or equivalent and successful completion of a required training program to provide administrative and human resource support needed to maintain continuity.

Business Manager will have a bachelor's degree in business, public or hospital administration, accounting, finance or economics. A valid certificate as a Certified Public Accountant (CPA) may substitute for the bachelor's degree. Job expectations will be to participate in policy development, programs, procedures and plans for the management of business activities at the facility; carry out plans for utilization of available facility funds, equipment, materials and supplies; complete functions relating to employment, payroll and time records; prepare statistical, financial, personnel, budget and other reports containing findings, conclusion and recommendations.



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Staff Development / Compliance Manager is preferred to have a bachelor's degree from an accredited college, university in business or resource management. This position will be trained in TJJJ staff development standards; oversee the staff development process for compliance with training guidelines; ensure compliance with TJJJ guidelines through establishment of training calendars and record management in connection with Human Resources Manager.

Transportation will be at least 21 years of age, possess a valid Texas driver's license and will complete specialized training; responsible for all youth transportations as assigned by program.

Health Service Authority will be a Texas Board Certified, licensed physician, preferably trained in Pediatrics, Family Practice or Internal Medicine to provide medical services and oversight of the health department.

Psychiatrist will be a Texas Board Certified, preferably certified in Child and/or Adolescent Psychiatry, to provide psychiatric services that include, but are not limited to, evaluations, medication management and monitoring, and treatment team involvement.

Training

Immediately being awarded the contract, G4S will begin training employees as quickly as the hiring and background screening processes are completed. Our goal is to have all training completed prior to receiving admissions. G4S is committed to providing comprehensive, high quality training as described in Tab 7. Training that incurs after youth are admitted to the program will guard shift ratios through the use of a 1.4 shift relief factor (SRF).

G4S understands that its success in working with juvenile justice male adolescents is directly related to how well we train and manage staff, in addition to the culture we establish in the environment. G4S' strength in training is evidenced by past Florida Department of Juvenile Justice Quality Assurance reports showing "Exceptional" ratings



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for training over the last year. G4S has reviewed and will comply with all core standards set forth by the Texas Juvenile Justice Department and Texas Administrative Code, Chapter 448.603.

All gender-specific, pre-service training will be provided within the first 30 days of hire. G4S will provide comprehensive training to ensure each staff understands how to respond to gender topics. The training modules will be cognitive behavioral in structure, which means they are experiential and require active demonstration of skills learned. In addition, an extensive on-the-job training (OJT) plan will be implemented for specific work-related responsibilities (i.e. youth care worker) to ensure the transfer of training from the classroom setting to the field of operations within the facility.

Job specific training will be implemented to meet the needs of specific position requirements. For example, case management staff will receive specialized training to work effectively with families, such as building trusting relationships, family-centered planning, competency assessment, and fostering positive behaviors. Mental health professions will receive training in working with youth with significant issues and lack of coping mechanism, group dynamics, suicide prevention, service delivery and documentation, evidence-based practices, gender-specific models and treatment, administration of screening and assessment tools, diagnosing, and techniques. Intake screening staff conducting intake/admission and screening will complete training applicable to the job responsibilities. Volunteers will receive sufficient orientation, training and supervision to enable knowledge of the program's purpose and services, the needs of youth and families, behavior motivation and the role and responsibilities to be assumed.

G. HOURS OF OPERATION AND PROGRAM SCHEDULE

G4S will provide supervision and required staffing ratios 24 hours a day, seven days a week, in a physically and emotionally safe and secure environment. Recognizing the need for admission flexibility, G4S will coordinate with the Department to provide admission services outside the regular business hours of Monday through Friday, 8:00 am to 5:00 pm. when the Department deems it necessary. Admissions will be coordinated in advance with the Department.



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G4S will carefully plan activities designed to maximize the probability that youth learn appropriate and pro-social behavior through regular practice and consistent staff role modeling. All youth will have basic requirements they must meet (e.g., hygiene, chores, treatment, recreation, homework, religious/spiritual opportunities and community service) that are a part of the daily routine of activities. The routine will require accountability for decisions made every day. G4S recognizes that education is an extremely important component of the youth's rehabilitation process and will include structured time for youth to complete and seek needed help with homework. The activity schedule will be posted in the program, provided to each youth during orientation, and provided to parents as part of the admission process.

Staff will be trained to proactively engage the youth in all scheduled therapeutic activities that are gender-specific and structured, such as the following samples that will be modified to ensure compliance with TJJD requirements:

Male Programming Sample Schedule

Time	Monday-Friday
5:30-5:45 am	Wake-up/Hygiene
5:45-6:30 am	Breakfast/Meds/Sick Call
6:30-7:30 am	Break/Hygiene/Goals Group
7:30-11:15 am	School
11:15-12:00 pm	Lunch Meds/Sick Call
12:00-1:00 pm	Physical Education
1:00-2:30 pm	School
2:30-2:45 pm	Break/Rest Period
2:45-3:45 pm	Group Time/Recreation
3:45-4:45 pm	Recreation/Group Time
4:45-5:30 pm	Dinner/Meds
5:30-6:00 pm	Showers
6:00-7:00 pm	Group (self-help recovery)
7:00-8:00 pm	Incentive activity/phone/letters Treatment work/homework
8:00-8:45 pm	Reading/Special Events
8:45-9:00 pm	Reflections Group Prepare for Bed
9:00 pm	Bedtime

Time	Saturday-Sunday
7:00-7:15 am	Wake-up/Hygiene
7:15-7:30 am	Goals Group
7:30-8:15 am	Breakfast/Meds
8:15-8:30 am	Restroom Break
8:30-10:00 am	Power Clean/Linen Exchange (Saturday) Power Clean/Spirituality (Sunday)
10:00-11:00 am	Outside Recreation
11:00-11:15 am	Hygiene
11:15-12:00 pm	Lunch/Meds
12:00-2:00 pm	Group Time: Boys Council (Saturday)
2:00-4:00 pm	Visitation/Indoor activities
4:00-4:30 pm	Outside Recreation
4:30-4:45 pm	Hygiene
4:45-5:30 pm	Dinner/ Meds
5:30-6:00 pm	Showers Phone/Letters
6:00-7:00 pm	Group (self-help recovery)
7:30-8:45 pm	Incentive activity/phone/letters/snacks Treatment work/homework
8:45-9:30 pm	Clean up Detail/Reflections group
9:30 pm	Bedtime

- On a monthly basis, health education will be provided by the licensed health care staff to all youth.



Tracking System to Monitor Compliance to Program Schedule

G4S will maintain a comprehensive tracking system that has proven to yield compliance to activities designed to meet the educational and behavioral treatment needs of the youth. Adherence to structured activities will include specific checks and balances, mentioned below, to ensure activities occupy over 80% of the awake hours, seven days per week. The Assistant Facility Administrator will have the ultimate responsibility for ensuring the schedule is followed throughout the day. The G4S comprehensive tracking techniques to ensure adherence to the schedules will be as follows:

TRACKING MECHANISMS
<p>Daily Monitoring</p> <ul style="list-style-type: none">▪ Shift Reports, completed by supervisors and staff, then reviewed each morning by the FA and AFA during management meetings▪ Behavior Cards, reviewed daily by the case manager and AFA▪ Activity Tracking System reviewed by direct care, with notification to the Director of Clinical Services if there is a breach in schedule events▪ Group Check Sheet signed by the youth, reviewed by the Director of Clinical Services and communicated to the Facility Administrator to ensure youth receive daily therapeutic services and psychosocial activities▪ Daily Points incorporate the allocation of daily points that are earned based upon the youth's performance and adherence to scheduled activities. The total points are evaluated by the Facility Administrator weekly then sent to the Treatment Team and parents for review.▪ Monitoring effectiveness of services is done by the Director of Clinical Services, with follow-up communication to the management team during daily management meeting
<p>Weekly Monitoring</p> <ul style="list-style-type: none">▪ Trends are reviewed during weekly management meeting to improve services / interventions▪ Compliance of daily schedules is reviewed by the Quality Assurance Specialist and relayed to the Compliance Manager▪ Group Monitoring by the Director of Clinical Services to ensure adherence to schedule, and quality of services▪ Review of above by corporate support personnel
<p>Monthly Monitoring</p> <ul style="list-style-type: none">▪ Adherence to activity schedule, points, progress, and adherence is reviewed by the multidisciplinary Treatment Team during formal monthly staffing to determine how the youth is responding to treatment▪ Adherence to activity schedule is monitored and evaluated by the Quality Assurance Manager as part of the "Scorecard process" and reviewed in the monthly facility verification and regional meetings.▪ Monthly Facility Systems Review Sheet is completed by the Facility Department Director to "keep score" of compliance



H. ASSESSMENT TOOLS

In order to identify the youth's risk factors and needs, it is necessary to assess each youth to determine strengths and weaknesses. Assessment instruments, more fully described later in this tab, will be at a minimum:

- Structured Assessment of Violence Risk in Youth
- Reynolds Adolescent Depression Scale
- Trauma Symptom Checklist for Children (TSCC) or Trauma Symptom Inventory
- Adolescent Substance Abuse Subtle Screening Instrument (SASSI)
- Assessment of Suicide Risk
- Skills Assessment (education and vocational)
- Comprehensive Bio-psychosocial Evaluation: The bio-psychosocial evaluation identifies physical health, mental health, substance abuse, academic, educational, or vocational problems that will be integrated into the treatment planning process.

I. HEALTH CARE/MEDICAL SERVICES

G4S is committed to providing quality, gender-specific, health care services in accordance with the Texas Juvenile Justice Department Administrative Rules. Evidence of our commitment to excellence is verifiable by past 2012 reports of 14-G4S residential programs earning "Commendable" or "Exceptional" health services ratings by the Florida Department of Juvenile Justice Bureau of Quality Assurance, now known as the FJDD Bureau of Quality Improvement. We commit to complying with all TDDJ annual reviews. G4S has developed policy in preparation of providing health care on a daily basis that exceeds requirements.

Health care services and training will be provided to the male population within a trauma informed care context. Our experience has shown that individuals suffering from traumatic events are often seen in sick call and express themselves through psychosomatic complaints. It will be the role of health care providers to incorporate evidence-based Motivational Interviewing to encourage youth communication and help distinguish between physical and emotional complaints, while providing an environment that encourages trust and safety. With consistency in



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motivating the youth toward progress, medical personnel will work in concert with all G4S staff to provide a healthy, family-like environment that continuously stabilizes and refocuses the developmental challenged adolescent.

Comprehensive On-Site Medical Services

The provision of health care services will be available seven days a week with on-call availability 24 hours a day, seven days a week. The Medical Department will be fully equipped to provide comprehensive, on-site, routine care to provide accountability and rapid response to the specialized health needs of adolescent boys. The on-site medical and nursing capabilities will include the capacity to provide:

- Primary medical care for acute and chronic health issues and follow up;
- Psychiatric services for pre-existing and newly diagnosed disorders;
- Preventive health care (immunizations, health education, accident prevention, dental screening;
- Sick call process that is accessible daily;
- Comprehensive system for monitoring on-going health conditions, follow-up for sick call encounters, community medical and dental consultations, emergency department visits and other hospitalizations (episodic care); and,
- Structured system of care for on-site assessment and management of acute and chronic health conditions, as well as preventive health care.

A physician will serve as the Health Service Authority, and provides basic, primary medical care, and will be available by telephone for medical, mental health emergencies, and consultations 24 hours a day, seven days a week. The Health Service Authority will provide oversight of the program's health and medical care, and will be responsible for the overall clinical direction, policies and protocols, and supervision of all medical personnel. The physician's agreement will define the role of the Health Service Authority and will include services and frequency, extent of available emergency and on-call services, and specification of other duties. Final clinical judgments will rest with the Health Service Authority who will meet the clinical needs of the population. The Health Service Authority will perform



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all necessary comprehensive physical assessments, periodic evaluation, chronic care services, medication management, sick call referrals and other services.

G4S is committed to a comprehensive plan of care to meet each youth's needs. Over the counter medications, medical supplies, First Aid care, in addition to detailed services described below are standing practices of G4S. We will provide local transportation to and from health care appointments and other appointments that are deemed necessary for his welfare. In the event it is necessary for a youth to be hospitalized, G4S commits to providing a staff to supervise him during the hospital stay. We understand that TJJD will directly reimburse for care and treatment, and we commit to efforts to obtain authorizations and an encumbrance number from TJJD prior to the delivery of services, except in the case of an emergency.

Staff and Ancillary Service Agreements

In addition to the contracted Health Service Authority, 80 hours of on-site nursing coverage will be provided by two full-time nurses, which exceeds the required 40 hours. These positions will include a Health Services Administrator (Licensed Registered Nurse), in addition to a second licensed Vocational Nurse (LVN) or Registered Nurse (RN). The Health Services Administrator will be responsible for the oversight of health services and as the liaison between the facility and local health agencies. The LVN or RN will be responsible for health services and support to the Health Services Administrator. Mary Frances Magan, G4S Corporate Director of Health Services/RN, will provide on-going training and support to health care medical staff. If necessary, G4S will utilize the G4S Correctional Health Care Consultant, Dr. Dianne Rehtine, MD, FAAFP, CCHP-A, for expert medical opinion. G4S will provide 24 hours/day response to health needs. G4S will ensure that uninterrupted physician and nursing services will be provided in the event of absences by authorizing overtime hours for available staff or having part-time medical staff on-call as needed. A licensed psychiatrist will provide medication management services for youth on psychotropic medication.



Health Care Staff Training

G4S maintains numerous specialized training academies and corporate training staff to ensure comprehensive training is provided to all employees in all programs. Required First Aid, Basic Cardiopulmonary Resuscitation (CPR) and Automated External Defibrillator (AED) training will be provided to new employees having direct contact with the youth. In addition, comprehensive health training for pre-service and in-service training will be facilitated by licensed medical staff or certified trainers. Licensed health care staff will maintain current certification in Basic Cardiopulmonary Resuscitation (with AED training, as applicable). Further, G4S will post visuals for immediate information and training, and most importantly, provide an environment where youth will feel their health is important.

Monitoring Continuity of Care

In order to ensure continuity of care, the management team will conduct a daily meeting to review any medical/medication management issues, mental health and substance abuse issues, gang related activities and security concerns. Additionally, the members of the multidisciplinary Treatment Team, including the Psychiatrist, will conduct a clinical meeting to discuss individual youth cases regarding medication management issues, issues/changes regarding DSM-IV TR diagnoses, mental health/substance abuse issues, mental health alerts, and safety/security concerns.

Health Care Services

1. Screening and Evaluation: The admission health screening will be completed by medical staff or trained non-licensed health care staff at the time of admission to the program. The Health Service Authority will be notified of all admissions, regardless of medical conditions. All youth entering the program will receive health care services and evaluations for health related conditions. The screening will not take the place of the required medical evaluations completed upon admission, but will include at a minimum:

- Initial Health Screening
- Thorough assessment of all body systems and an assessment of nutritional status, growth and development;



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- Implement Body Mass Index Protocol designed by the Health Service Authority specifically for adolescents;
- Screening for sexually transmitted diseases;
- HIV Risk Assessment;
- Assessment for chronic conditions and medical concerns requiring immediate medical attention;
- Assessment of tuberculosis status;
- Assessment of immunization status and subsequent inoculations as required;
- Assessment of dental health with a referral to the dentist as necessary; and vision screening;
- Health Service Authority notification for new admissions and orders obtained, as applicable (i.e. routine standing orders, medication continuance).

2. Health Assessments: Every youth entering the facility will receive a new Health Assessment completed within twenty (20) calendar days of admission, regardless if one had been completed within the year or not, and annually thereafter regardless of the assigned medical grade. This Health Assessment will be placed in the youth's medical file and will establish a clinical database for each youth. Referrals to the physician as indicated.

3. Sick Call Care: The Health Services Administrator will schedule sick call times and post the schedule in public and common locations. Youth may submit a sick call request seven days per week. The licensed health care staff will ensure Sick Call Request forms are collected from the secured sick call drop boxes on the units daily. A nurse will triage nursing, medical, dental, and mental health sick call requests daily. Youth with non-emergency medical complaints will be seen at the next scheduled nursing sick call. Youth with urgent complaints will be seen as soon as possible and referred to the appropriate health care professional as indicated. A nurse conducts sick call at least once per day, seven days per week, to evaluate and treat non-emergency illnesses or injuries. A nurse will triage the complaint and provide appropriate care and/or refer the youth to the physician if indicated. If indicated, the youth will be evaluated by a provider within seven days of referral. If the youth complaint is recurrent (three or more times over



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a 14-day period) and the youth has not seen the physician, the youth will be scheduled for an appointment with the physician.

When a health care staff is not on-site, all sick requests are turned into the Shift Manager/designee for review within two hours, which exceeds requirements. The Shift Manager/designee determines when a sick call request requires immediate attention. If he/she cannot determine the need, the healthcare staff will be notified and consulted via telephone to determine if the sick call requires immediate attention and/or for instructions. Any youth complaining of severe pain (including dental), which a staff member is unfamiliar and cannot determine the severity, will be treated as an emergency and require immediate referrals to a licensed health care professional. If the symptoms appear life threatening, the staff is required to call 9-1-1, and then notify the manager on duty and the healthcare provider on call. Procedures will be developed for off-site referral when the complaint warrants evaluation beyond the scope of on-site personnel.

4. Emergency Response Preparedness: The Health Services Administrator will maintain an annual medical drills calendar outlining monthly drills to be conducted by the health care staff. These drills will include, but not limited to: cardiopulmonary arrest, unconsciousness, choking, bleeding, seizures, dental trauma, first aid, sudden mental status changes, chest pain, shortness of breath, open head injury, fractures or potential fractures, and suicide attempt. In addition, health care staff and management team will plan the drills, critique its effectiveness, determine if further training if deemed necessary, and maintain related records, which exceeds requirements. The Facility Administrator and health care staff facilitating the drills will critique the effectiveness of the drill and determine if further training is deemed necessary. To ensure emergency and first aid equipment and supplies are always available to staff, daily inspections of the first aid kits will be conducted by staff, with weekly inspections by health care staff. Any kits that are found to be open will be immediately refilled and sealed. These, in addition to the Automated External Defibrillator (AED), Knife-for Life, and safety/security tools will be stored in centralized, specific locations.



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5. Acute and Chronic Conditions: The frequency of the periodic evaluation will be determined by the youth's condition, clinical needs and clinically appropriate medical standards. For those having a chronic condition or communicable disease and are receiving prescription medications, excluding anti-tuberculosis medications and psychotropic medications, a periodic evaluation will be conducted at least every three months by the licensed physician. Healthcare staff will utilize a medical services tracking system to document the list of youth with chronic medical conditions and track and schedule follow up/periodic evaluations. Additionally, the Health Services Administrator will perform regular chart and system audits to determine if the youth's health care needs are met within required timeframes. If lapses are identified, the Health Services Administrator re-evaluates the system and implements a corrective action plan for identified deficiencies. These periodic evaluations will be documented.

6. Immunizations: Immunization records must be obtained on each juvenile prior to their admission into the post-adjudicated program. A review for needed immunizations will be conducted to determine if he has received all appropriate immunizations, with follow up documentation of findings. For youth lacking immunizations, parents will be notified to obtain consents, with follow-up administering of immunizations.

7. Transitional Health Care Planning: If requested, Upon discharge from the program, G4S will provide the parent/guardian with the youth's current medication(s), a 30-day prescription for psychotropic medication(s), and all non-psychotropic medication currently prescribed. Transitional health care planning will target the last 45-60 days prior to the youth's anticipated release to the community, and include the youth, parents, and any other parties that will provide supervision or services when the youth returns to the community. Health care staff will ensure communication is relayed at the transition and exit conferences about pending health related issues and when applicable facilitate linkages, scheduling appointments with community providers, summary of health-related needs (pending scheduled appointments, the need for medication, information about community resources and the links), and the enrollment of eligible youth in the Medicaid System. Documentation will be maintained in the medical file. Any statutorily protected



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health information will be reviewed with the youth, unless consent has been given to release the information to the parent/guardian.

8. Infection Control Measures: A site-specific Exposure Control Plan will follow guidelines and recommendations of the Center for Disease Control and Prevention (CDC), Occupational Safety and Health Administration and State and Federal Standards recommendations related to infection control. This includes, but not limited to, the Occupational Exposure to Blood borne Pathogens Compliance Manual, OSHA Rule 29 CFR Part 1910.1030 and guidelines from the CDC for testing, decontamination, sterilization and proper disposal of sharps and bio-hazardous wastes. Personal Protective Equipment, such as specialized clothing or equipment, will be readily available and worn by an employee for protection against a hazard material. G4S will maintain a contract for the removal of biomedical waste. Exposure/infection control matters will be regular agenda items in administrative meetings, continuous program planning and evaluation meetings. Health care staff will complete and file all reports regarding infectious diseases consistent with local, state and federal laws and regulations. All youth admitted to the facility will be screened by the facility health care staff. During the initial evaluation, the youth will be screened via facility entry physical health screening for symptoms of Tuberculosis. If the youth has been tested in the last year and exhibits no signs and/or symptoms of Tuberculosis, he will not be re-tested. All other youth receive a Tuberculin Skin Test unless contraindicated by the Health Service Authority. Any youth with communicable diseases will be isolated, as clinically indicated.

9. Medication Administration: Medication administration protocols will ensure the oversight by the Health Service Authority and by outside consultation when deemed necessary, as described below. A local pharmacy will be used to fulfill new or existing medications.

Medication Management: Prescription medication will be administered per direction of the Health Service Authority pursuant to Physician, PA or ARNP order, and/or Dentist order or per instruction on a youth's current prescription



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container with a current patient specific label. The written prescription is copied and placed in the youth's IHCR prior to filling at the pharmacy. A youth may arrive with a current prescription; if the medication(s) are administered from a current individual prescription container/bubble pack with a current patient-specific label. All prescribed medications (including insulin) will be ordered in a timely manner with no lapses occurring between ordering and administering. All prescribed non- psychotropic medications for chronic conditions will be integrated into the youth's medical treatment plan via the physician progress notes, treatment orders and medication orders by the Health Service Authority through the periodic evaluation process. The licensed nurses will be primarily responsible for medication administration, and will perform and document medication administration, and maintain strict accountability and inventory of all medications.

During hours when no nurse is on-site and ordered doses of medication are required to be taken by the youth, trained staff will monitor the self-administration of medication. Annual training of applicable staff in medication observation and documentation will be completed by the RN, utilizing a curriculum developed by the Director of Health Services and approved by the Health Service Authority. All training will be documented in the applicable employee training files. If audits of medication records reveal error patterns, retraining will take place until competency is achieved. All trained staff will follow the restricted key control procedure to ensure security. The nurse will be responsible for maintaining the inventory of required medications and for following procedures to maintain accountability for controlled substances.

Health Education Programming

G4S health department will provide a monthly health education program that may include topics such as the emotional, physiological, physical development of males; prevention of accidents; eating disorders and body image; self-esteem; seat belt usage; transitional health care planning for applicable youth with chronic health problems that require arrangements to ensure continuity of care upon discharge; Alcohol and drug related problems; HIV/AIDS infection; sexually transmitted diseases and prevention of STDs; smoking effects and cessation; tobacco use



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products; dental hygiene and preventative dental care; basic personal hygiene; immunizations; nutrition; prevention of sexual and other physical violence; infection control: hand-washing, understanding Hepatitis and TB; physical fitness; breast and testicle self-exams; family planning: contraception, exercise, and parenting skills. Further, child care workers/youth care workers will provide additional, daily support to teach boys basic cleanliness, in order to combat the common lack of understanding simple, basic skills for daily hygiene.

J. EDUCATIONAL SERVICES

It is currently anticipated that the education program will be provided by the local independent school district (ISD), as was the case when the facility was operated by TYC. We will work collaboratively with school personnel to build a daily schedule that provides the required 360 minutes of instructional time and structured study hours for homework and out of class assignments, year round. This will include ensuring that the education program is fully integrated into the operational components of the G4S program, including treatment, interventions, and behavior management. We will also ensure that all staff will support each youth's individualized goal of obtaining a high school diploma or GED, as appropriate.

Collaboration

We have considerable experience in working under agreements with School Districts and Local Education Agencies (LEAs) and will develop a strong relationship with the ISD. These collaborative relationships with local School Districts have consistently presented a seamless transition for the youth. At all of our juvenile justice programs, we have built an effective partnership with the local School District and/or LEA by:

- meeting regularly with school personnel, both those assigned to the program, as well as the central office
- including school staff as part of the management team for planning and monitoring
- encouraging school personnel's participation in Treatment Team meetings
- opening all program staff training sessions to school staff
- coordinating assemblies, parent days, etc. to support education and program goals



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- ensuring classroom supervision scheduling
- ensuring crisis intervention practices

Most importantly, we have found that frequent discussions and meetings to ensure there are no conflicts in program and bell schedules, school holidays, and program activities are critical to success. Of equal importance, and further mentioned below, is the development of and daily adherence to a joint behavior management plan that includes consistent reinforcers and logical consequences. We will work with ISD to develop a single behavior management system, based on Social Learning Theory, at the program that will be used throughout the day, including school.

Working together with the ISD, G4S will ensure that reading materials will be provided to youth outside of the educational program with appropriately approved newspapers, magazines and books, and other approved media materials. Youth care workers will be encouraged to promote reading and other educational pursuits for youth during non-school hours. G4S programs and schools typically honor and celebrate numerous calendar dates of historical and political importance throughout the year. In collaboration with the school program, celebrations and special events will be thematic so that core learning concepts are shared across program and school activities for special and historical events. These thematic events typically include youth sponsored contests, e.g., an essay or poster contest that requires reading and research outside the classroom.

Staff Assignment

G4S takes seriously its role and responsibility in the classroom, regardless of whether the education program is provided by G4S and the ISD. Youth care staff will be assigned to classrooms to provide care, custody and supervision and respond to the everyday needs of the youth. In all of our programs, we have been very successful in training youth care workers to become a member of the classroom team where they provide proper supervision and control in the classroom and assist with the education process. Youth care workers who are involved in the



educational process, under the direction of the teacher, have proven that they provide better supervision than if their only assignment is to supervise and control the youth.

G4S staff and school staff are most effective when they participate in joint trainings that emphasize the behavior management and motivation system mutually agreed to by G4S and the ISD. Youth who are disruptive in the classroom will be immediately removed and counseled by the youth care worker, regarding their behavior. When the youth accepts accountability for his behavior and commits to remaining orderly, he will be allowed by the teacher to return to the classroom. Either the teacher or the youth care worker can prompt a youth, award a reinforcer for good behavior, or sanction a negative behavior.

K. CLOTHING, NUTRITION AND HYGIENE ITEMS

G4S has developed policy to ensure hygiene, clean facility clothing shall be issued to all residents upon admission into the facility. The clothing will be climate-appropriate, clean, in good repair, fit properly, not threadbare and provide easy identification to meet security, treatment and programming systems. The uniform will have a professional appearance similar to khaki pants and polo shirts, and will not be an impediment to the developmental progress of the youth. The clothing supply will exceed requirements so immediate replacement may occur when necessary. Although clothing may rotate, each youth will be assigned his own underwear and socks. Upon discharge, youth will be provided clothing to wear from the program that includes their personal underwear and socks accumulated during their program stay. The clothing supply will consist of:

▪ Socks	▪ Underwear	▪ Shirts and Pants
▪ Shoes	▪ Recreational Clothing	▪ Sweatshirts/jackets (seasonally appropriate)



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Clean and disinfected undergarments and socks shall be issued daily. All other clothing, such as uniforms, will be issued to all residents at a minimum of twice a week. Climate appropriate clothing shall be provided to all residents in the facility for any outdoor programming or activities. Should a resident be placed on any suicide supervision/watch and are in a solitary room, clothing may be modified to include a suicide smock, however, no resident at any time, shall be left in unnecessary state of undress.

To maintain good personal hygiene, youth will be provided personal gender-specific care items. Boys receive items such as bath soap/body wash, shampoo, toothpaste (crest/colgate), toothbrush, soap (dial, ivory), deodorant (secret, old spice), lotion (cocoa butter, Vaseline, Axe), ethnic hair and skin products, mouthwash, deodorant, hair brush, deodorant, and toilet paper. Basic supplies will be distributed during admission. In addition, the program will designate item replacement at least bi-weekly. It is customary for the youth to provide empty containers in exchange for a new item container.

G4S requires daily showers unless medically contraindicated and requires youth to maintain clean and clipped fingernails. Shaving equipment will be available, distributed and monitored under strict staff supervision. Youth will be encouraged and permitted to brush their teeth in the morning when they wake up and prior to going to bed. Youth will be allowed to shampoo their hair each day and prompted to groom themselves after strenuous activity and prior to meals, court, visitation, etc. Instruction in personal hygiene and general sanitation habits will be part of the youth's healthy living program that will be developed under the supervision of the Facility Administrator. Youth will receive clean bed linens at least once weekly, towels at least daily and clean blankets as appropriate to the season. Laundry will be done on a daily basis for clothing and towels. Clothing and bedding laundry will be done on the weekend.

G4S will ensure each youth is provided nutritional meals that meet all licensing standards (discussed under "food services" in the next section).



L. FOOD SERVICES

G4S will provide meals that are nutritious and well balanced, served at the proper temperature, presented in a caring manner and in a pleasant atmosphere. Meals will meet or exceed dietary standards required under the U.S. Department of Agriculture's National School Lunch Program (NSLP) guidelines. Menus for Breakfast, Lunch and Snack will be planned according to the Food Based Menu Planning Packet from the Florida Department of Agriculture and Consumer Services. G4S will ensure meals are nutritional and meet licensing standards and the TJJJ Nutrition and Food Services policies and procedures. The program will maintain a food establishment permit (if applicable) and will follow all applicable state and local sanitation and health standards. Menus will be prepared by a Registered and Licensed Dietitian, and approved on an annual basis. Approved menus will be posted in conspicuous places. Calorie ranges will be as follows:

- Breakfast: 500-600 calories
- Lunch: 770-860 calories
- Dinner: 780-960 calories
- Snack: 190-360 calories

Food production records will be completed for each meal and snack and portions of food served will follow those indicated on the menu. Any food substitutions will be recorded and kept on file for three years. Temperature records for food storage, preparation and service will be maintained. At least two health department inspections will occur during the school year or as required by NSLP/SBP.

Each day, youth will receive three meals (a minimum of two hot meals), in addition to a nutritious evening snack. All meals will be served at reasonable times with no more than 14 hours between the evening meal and breakfast. Special arrangements will be made to provide youth with meals when events outside their control prevent them from eating at normal meal times (e.g., court appearances, admissions). Youth preferences, nutritional needs, and the



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flavor, texture, temperature, appearance and palatability of the food will meet the requirements of TJJD youth according to age, gender, and activity level.

Special diets will be provided for youth with physical or medical needs as prescribed by the treating physician or dentist, and under the consultation of the registered dietician. Provisions will also be made to meet religious dietary requirements. All special diet prescriptions will be in writing and kept on file. On occasion, the program will provide special event meals such as incentives, special events and family fun days.

Quality food service is essential to the care, treatment and custody of youth at the facility and youth participate more fully in the total program when they are satisfied with the food. Youth will be encouraged to participate in the development of menu planning. One single menu will be available, and staff will be encouraged to eat the same meals as the youth. This will provide an opportunity to interact, model and reinforce positive social skill development to the youth. During mealtime, staff will serve as role models for proper mealtime etiquette and behavior. Youth will not be permitted to trade or give away food, and food will never be withheld as punishment. The menu will not be modified as a result of behavior.

Kitchen staff will be required to sign kitchen tools and knives in and out, which will be inventoried three times daily, after breakfast, lunch and dinner, as per G4S procedures. Tool and chemical control procedures will be monitored daily via the chemical inventory form to ensure food safety and maintain compliance. The G4S Food Safety Manual and policies are available upon request.

M. TREATMENT SERVICES AND QUALIFICATIONS OF PROVIDER

G4S will provide an environment that is conducive to effective learning, supports treatment and presents trauma-informed care throughout all components of the program. It will be individualized in services to meet the special needs of the youth, staffing patterns for continuity of safety, security, and support, and will provide 24-hour response



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capability with access to an acute care setting and emergency management services. Treatment services will be provided by G4S professionals and will include mental health, substance abuse, and co-occurring disorders. Treatment will be evidence-based and appropriate for the population, and all facilitators will be effectively trained by Dr. Deena Green (G4S trainer and implementation specialist for evidence-based programming practices); a licensed mental health professional who is trained in the curriculum; or, a professional that is certified or qualified to train that curriculum.

We are committed to providing a learning environment to help boys and their families understand the importance of healthy communication and relationships, the importance of education, and the importance of learning how to effectively respond to trauma, violence and delinquency. We will provide the tools to influence risk factors associated with accepting responsibility for behaviors, victim empathy, understanding precursors and influences that allowed deviant behavior, and thinking errors. Mental health and substance abuse services will utilize trauma-informed practices. through cognitive and behavioral perspectives to address issues, such as addiction, co-occurring disorders and effects, depression, post-traumatic stress disorder, and physical or sexual abuse, neglect or domestic violence. Additionally, residents will learn the importance of setting personal boundaries, focus on gender identity development, and target appropriate communication skills and response to anger.

We will comply with TJJD's Quality Assurance and Monitoring Standards, and welcome TJJD staff to observe clinical services at any time. All records will be maintained by the facility and produced upon request.

Approach to Treatment Motivation

Motivational Interviewing (MI) is an evidence-based approach that employs strategies and techniques designed to engage and encourage motivation for change in hostile and resistant males. Staff will be trained and coached by Certified MI trainers to effectively communicate and interact with the intensive population. Effective use of MI techniques will provide a safe and non-confrontational environment to explore and resolve ambivalence toward



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changing behavior. Its responsivity approach inherently considers factors that can block ability to respond to treatment, such as age, intelligence, mental health, learning styles, temperament, and other relevant characteristics. Further, MI skills will be used by all levels of personnel, in addition to being used by the Treatment Team, to motivate change rather than persuade or coerce change. Consistent daily use of MI techniques by all staff will help youth resolve ambivalence and increase their ability to progress through the stages of change therefore reducing the likelihood of recidivating back to negative behaviors.

Evidence-Based Theory and Treatment

Cognitive Behavioral Therapy (CBT) will be utilized as the G4S evidence-based course of treatment and intertwined in the numerous intervention styles to help identify and change dysfunctional beliefs, thoughts and patterns of behavior contributing to problems. The goals of CBT are to develop and teach cognitive restructuring skills and impart social learning interventions for re-socialization. CBT objectives are diverse in the ability to identify "risk" thinking males have experienced, employ new techniques to change past thinking and behavior, teach new thinking skills that support new behavior, and provide ways to practice new pro-social behaviors through training and role plays. Additional treatments that come from a cognitive framework and found to be effective for this population:

Trauma Focused Cognitive Behavioral Therapy (TF-CBT) (Cohen, Mannarino, and Deblinger, 2003) is a psychosocial treatment model recognized by SAMHSA's National Registry of Evidence-Based Programs and Practices, and is designed to treat posttraumatic stress and related emotional and behavioral problems with children and adolescents. For those with a history of trauma, cognitive behavioral strategies and psychoeducational interventions address stress management; affect expression, cognitive coping, cognitive processing, behavior management, emotion identification, anxiety management, interpersonal communication, identification and change of maladaptive cognition. TF-CBT is recommended for 12-16 sessions of individual and parent-child therapy; however, this will be modified by the Director of Clinical Services/psychologist to meet the needs of the youth and will be delivered by the therapist.



Evidence-Based and Researched Mental Health and Substance Abuse Treatment Curricula

Our experience has demonstrated to provide specific tracks of service to ensure the mental health and substance abuse needs of residents are met. G4S has developed three comprehensive tracks to be delivered, based on each youth's plan of need: substance abuse track, co-occurring track and mental health track. Regardless of the track, substance abuse treatment will be included in each as the common underlying course of action for this population. Described in detail below are the curricula for each track, with the matching table description that depicts our plan for group frequency, size, duration and delivery.

G4S will use curriculum specifically as "core" programs that all youth will receive, based on their specific risk/need evaluation. Additionally, supplementary curriculum will be available to support additional programmatic needs of youth, based on duration of stay, intensity needs, and risk level of the youth. Core and supplementary curriculum are described in the following Track 1 (substance abuse disorder) and Track 2 (co-occurring disorder).

Track 1: Substance Abuse Disorder

Alcohol or drug abuse can easily interfere with a youth's functioning at work, school, and in social relationships, and often creates or worsens a medical condition. A more severe condition than alcohol/drug abuse is the detection of alcohol or drug dependence. Common characteristics of dependence are failure to abstain from or control the use of substances, existence of physiological dependence that exacerbates the needs for more of a substance to get the same effect, and withdrawals such as tremors or nausea when substance use has stopped. G4S has developed a menu of interventions for male adolescents who meet criteria for Track #1 Substance Abuse:

1. **The Council for Boys and Young Men** (One Circle Foundation, a Project of the Tides Center) will be the gender-specific model for males. It will be integrated into group sessions one day a week to address inner conflict, including gender-identity development. The Council is a strength-based group approach for boys and young men, ages 9-18. The Council strengthens boys' emotional, social and cultural literacy by engaging them in activities, dialogue, and self-expression to question and explore stereotypical concepts,



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both healthy and unhealthy, regarding “what it means to be male.” Gender Role Strain is a term used to describe the extensive stress that males undergo as their internal experiences and needs conflict with the social pressures defining traditional masculinity characteristics. This curriculum strives to help those that may have been victims of violence, racism, sexual identity, poverty, or emotional neglect, and helps develop self-acceptance and appropriate self-expression. At its core, The Council is based on Relational-Cultural Theory and Resiliency principles. Repeated or chronic disconnections lead to problems in development that affect all aspects of an individual's life and typically manifest in failure of empathy, bullying, aggression and violence, oppression, restrictive emotionality resulting in highly conflicted families and relationships, educational and economic under achievement, racism, addiction or substance abuse, anger, fear or hatred of homosexuals and sexual identity/orientation abuse or confusion, and extreme self-reliance (Bergman, 1991; Spencer, 2002). Through use of cognitive behavioral techniques that include reflections, dialogue, group challenges, games, skits, role plays, arts, and worksheets, the youth will explore healthy relationship expectations, conflict resolution, anger and emotions management, acceptance and discrimination, healthy leadership, male messages and media, role models and heroes.

- 2. Pathways to Self-Discovery and Change: Criminal Conduct and Substance Abuse Treatment for Adolescents** (Milkman, H. and Wangerb) will be provided two days a week. The curriculum provides a comprehensive and developmentally appropriate program that identifies psychological, biological, and social factors that contribute to the onset of adolescent substance abuse and deviance. The 32-session treatment curriculum is designed to rehabilitate adolescents with co-occurring substance abuse and criminal conduct.
- 3. Skillstreaming the Adolescent** (Ellen McGinnis and Arnold P. Goldstein) will be integrated in group sessions one day a week, as an intervention for aggression, anger, anxiety, impulsivity, and skills. The training curriculum has shown effective results with chronically aggressive, mentally retarded, and autism spectrum disorders of children and adolescents. Results from the Lerner and Mikami research (July 9, 2012)



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showed an increase in peer liking, interaction and social skills. Due to emotional or behavioral issues, such as aggression, anxiety or impulsivity, the curriculum effectively employs a four-art training approach through modeling, role-playing, performance feedback, and generalization, and targets criminogenic needs of antisocial attitudes, values and beliefs.

4. **Anger Management for Substance Abuse and Mental Health Clients: A Cognitive Behavioral Therapy**

Manual (Reilly and Shopshire) is a manual recognized by SAMHSA's National Registry of Evidence-Based Programs and Practices. This is a 12-session cognitive behavioral anger management group treatment curriculum that will be delivered one day per week. The treatment model is a combined cognitive behavioral therapy approach that employs relaxation, cognitive, and communication skills interventions, and presents the participant with options to develop individualized anger control plans, using different interventions and techniques. Post-treatment studies have shown significant reductions in self-reported anger and violence, as well as decreased substance use. Further, it has been used successfully with non-substance abusing clients.

5. **Seeking Safety** (Lisa Najavits) is listed on SAMHSA's National Registry of Evidence-based Programs and

Practices, and has been in residential, inpatient and outpatient environments, within individual and group formats, with males and females. It will be integrated in group and individual sessions at least one day a week to address substance abuse and trauma issues. Seeking Safety is a present-focused therapy to help attain safety as a first priority. The expected outcome will decrease substance use, decrease PTSD symptoms, improve social adjustment, improve general psychiatric symptoms, decrease suicidal plans and ideations, improve problem-solving skills, and improve the overall quality of life.

6. **Young Men's Work** (Allen Creighton and Paul Kivel) will be provided one day a week. This is a program for

young men, ages 14 to 19, and teaches how to work together and solve problems without violence. This curriculum was specifically developed to address young male issues within the male socialization process.



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The 26-session curriculum addresses a myriad of gender-identify topics ranging from power, violence, bullying, anger, fear, frustration, women and the interpersonal relationships between men, dealing with loss, creating family, and planning for future.

7. **The Teen Relationships Workbook** (Kerry Moles) will be provided one day a week. The activity-based workbook helps guide the development and understanding of healthy boundaries and relationships. The group work is divided into sections of: evaluating your relationships, understanding abuse, social influences, building healthy relationships, and making good decisions.

Track #1 Substance Abuse Disorder Curriculum Delivery

Curriculum and Method of Delivery	Pathways to Self-Discovery and Change	SkillStreaming the Adolescent	Anger Management for Substance Abuse and Mental Health Clients	Seeking Safety
Frequency of group per week	Two days per week	One day per week	One day per week	Two days per week
Group size	Up to 10 youth	Up to 10 youth	Up to 10 youth	Up to 10 youth
Length of group	60 minutes	60 minutes	60 minutes	60 minutes
Group Delivery	32 treatment sessions	50 pro social skills with individual lessons (six blocks to be delivered within clinical plan)	12 sessions (number of weeks and pace vary based on youth progression)	25 lessons
Notes	Open Group <u>Specialty Substance Abuse Curricula</u> Developmentally appropriate treatment program for substance abuse. Pathways is geared toward a range of reading and conceptual abilities, and guides through three discrete phases of resiliency and success.	Open Group <u>Skills Development</u> A four-part pro-social approach to skills-building through modeling, role playing, performance feedback and generalization. Youth empowerment to self-identify strengths and weaknesses, then use patience and motivation when a skill does not bring about a desired outcome.	Open Group <u>Anger Management</u> SAMHSA's National Registry of Evidenced Based Programs and Practices. The group is a combined CBT approach that employs relaxation, cognitive and communication skills interventions, as well as use of individualized anger control plans, using different interventions and techniques.	Open Group <u>Substance Abuse and Trauma</u> SAMHSA's National Registry of Evidenced Based Programs and Practices. Seven lessons on interpersonal, behavioral and cognitive topics, with four additional lessons on combination topics. The curriculum teaches healthy success skills and healing techniques.
Curriculum and Method of Delivery	Boys Council	Young Men's Work	Teen Relationships	
Frequency of group per week	One day per week	One day per week	One day per week	
Group size	Up to 10 youth	Up to 10 youth	Up to 10 youth	
Length of group	120 minutes	60 minutes	60 minutes	
Group Delivery	10 sessions (10-12 weeks)	26 sessions, 38 exercises	12 sessions (number of weeks and pace vary based on youth progression)	



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Notes	Closed Group <u>Gender-specific</u>	Open Group <u>Gender-specific</u>	Open Group <u>Gender-specific</u>
	This program strengthens emotional, social and cultural literacy by engaging boys in activities, dialogue, and self-expression to question and explore healthy and unhealthy stereotypical concepts regarding "what it means to be male." It addresses inner conflict gender-identity development.	A program for young men, ages 14-19, which teaches how to work together and solve problems without violence. This curriculum was specifically developed to address young male issues taking into consideration the male socialization process.	An activity-based curriculum designed to develop healthy, intimate relationships and prevent dating abuse and domestic violence. This offers both educational and experimental components pertaining to teen relationships

Track #2: Co-Occurring Disorders

Adolescents with mental health disorders often become involved with use of substances to feel better. This may be to reduce anxiety, improve depression, reduce inhibition, or numb psychological pain. As a result, this worsens the mental health disorder and prevents the youth developing effective coping skills, having satisfying relationships, and self-satisfaction. G4S will deliver an array of interventions that treat both the substance abuse/dependence and mental health problem. The continuity in delivery of treatment by the same team and environment will expedite the process of treatment. For those youth best fitting Track #2, the treatment curriculum consists of:

1. **Adolescent Coping with Depression Course** (Clarke, G., Lewinsohn, P., and Hops, H., 1990) will be provided one day a week. This is a manual recognized by SAMHSA's National Registry of Evidence-Based Programs and Practices and a psychoeducational, cognitive-behavioral intervention for adolescent depression, closely modeled after the Adult coping with Depression Course (Lewinsohn, Antonuccio, Steinmetz-Breckenridge, and Teri, 1984). It consists of 16 sessions and it can be modified for use on an individual basis. Treatment sessions include teaching adolescents skills for controlling depression; areas covered include relaxation, pleasant events, communication, negative thoughts, social skills, and problem solving. The curriculum has been researched on the efficacy of the treatment program has demonstrated that more than 70% of the adolescents who have participated in the course have significantly improved one month after termination, and that gains are maintained up to 12 months after treatment.



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2. **Coping with Stress (CWS) Course** (Clarke & Lewinsohn, 1995) is a promising practice, but limited on independent research to reach the classification as an evidence-based practice. CWS is a psychoeducational, cognitive-behavioral intervention for the prevention of unipolar depression in high school adolescents who have an increased risk of depression. The course consists of 15 sessions, including an overview of depression, its relationship to stressful situations, and cognitive-restructuring skills and techniques for modifying irrational or negative self-statements. The curriculum will be delivered one day per week, following the cycle completion of the Adolescent Coping with Depression Course.
3. **The Council for Boys and Young Men/Boys Council:** Previously described in Track 1
4. **Pathways to Self-Discovery and Change:** Previously described in Track 1
5. **Anger Management and Addiction for Substance Abuse and Mental Health:** Described in Track 1
6. **Seeking Safety:** Previously described in Track 1
7. **Young Men's Work:** Previously described in Track 1
8. **Teen Relationships:** Previously described in Track 1
9. **SkillStreaming the Adolescent:** Previously described in Track 1

Track #2 Co-Occurring Disorders Curriculum Delivery

Curriculum and Method of Delivery	Adolescent Coping With Depression	Adolescent Coping With Stress	Pathways to Self-Discovery and Change	Anger Mgmt for Substance Abuse and Mental Health	Seeking Safety
Frequency of group per week	One day per week	One day per week	Two days per week	One day per week	Two days per week
Group size	Up to 10 youth	Up to 10 youth	Up to 10 youth	Up to 10 youth	Up to 10 youth
Length of group	60 minutes	60 minutes	60 minutes	60 minutes	60 minutes
Group Delivery	16 sessions	15 sessions	32 sessions	12 sessions	25 lessons
Notes	Open Group <u>Evidence-based Practice for Depression</u> SAMHSA's National Registry of EVP. Treatment areas covered include relaxation, pleasant events, communication, negative thoughts, social skills and problem solving.	Open Group <u>Depression</u> A psycho-educational, cognitive-behavioral intervention for the prevention of unipolar depression and at increased risk of depression. Techniques for modifying irrational or negative self-statements.	Open Group <u>Specialty Substance Abuse Curricula</u> Developmentally appropriate treatment for substance abuse. Geared toward a range of reading and conceptual abilities, and guides through three discrete phases of resiliency and success.	Open Group <u>Anger Management</u> SAMHSA's National Registry of EBP. The group employs relaxation, cognitive and communication skills interventions, anger control plans.	Open Group <u>Substance Abuse and Trauma</u> SAMHSA's National Registry of Evidenced Based Programs and Practices. Lessons on interpersonal, behavioral, cognitive and combination topics for healthy success skills and healing techniques.



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Curriculum and Method of Delivery	Boys Council	Young Men's Work	Teen Relationships	SkillStreaming the Adolescent	
Frequency of group per week	One day per week	One day per week	One day per week	One day per week	
Group size	Up to 10 youth	Up to 10 youth	Up to 10 youth	Up to 10 youth	
Length of group	120 minutes	60 minutes	60 minutes	60 minutes	
Group Delivery	10 sessions (10-12 weeks)	26 sessions, 38 exercises	12 sessions (number of weeks and pace vary based on youth progression)	50 pro social skills with individual lessons (six blocks to be delivered within clinical plan)	
Notes	<p><u>Closed Group</u> <u>Gender-specific</u></p> <p>Strengthens emotional, social and cultural literacy through activities, dialogue, and self-expression to explore healthy and unhealthy stereotypical concepts, inner conflict, and gender-identity development.</p>	<p><u>Open Group</u> <u>Gender-specific</u></p> <p>A program for age 14-19 males, teaching how to work together to solve problems without violence. This curriculum takes into consideration the male socialization process.</p>	<p><u>Open Group</u> <u>Gender-specific</u></p> <p>An activity-based curriculum designed to develop healthy, intimate relationships and prevent dating abuse and domestic violence. This offers both educational and experimental components pertaining to teen relationships.</p>	<p><u>Open Group</u> <u>Skills Development</u></p> <p>A four-part pro-social approach to skills-building through modeling, role playing, performance feedback and generalization.</p>	

Treatment Counselors

Counseling or treatment services will be provided by fully licensed or certified professionals such as a licensed psychologist, licensed professional counselor, licensed clinical social worker, or licensed chemical dependency counselor. Masters level therapists will maintain less than the RFP required 24 youth caseload; thus, providing increased focus and attention on youth needs.

Mental Health and Substance Abuse Screening and Assessment

Screening and Assessment: The purpose of screening is to identify mental health and substance abuse risk factors to determine if further evaluation or immediate attention is needed. Thorough screening will be conducted on each youth at admission. The screening process will include a review of the youth's prior documented history, administration of current screening tools, conducting of interviews, and assignment of the primary counselor to identify needs or risk factors for mental health and/or substance abuse inpatient or outpatient history; self-injurious



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behaviors; suicide attempt, behavior or risk; emergency room evaluations for mental health or substance abuse-related needs; significant trauma history; drug/alcohol use or possession; emotional instability; psychotropic medication treatment; and, history of family mental illness. Administration of the screening tool(s) will be conducted by a trained and licensed professional. Screening will be administered in a private and confidential manner to each admitted youth, minimizing his anxiety to the program.

Given the concern for the severe behavioral status of a youth resorting to suicidal behavior, he will be screened for potential suicide by the licensed professional. When a youth is identified as a suicide risk, this will trigger protocols to be followed that include notifications to program and treatment leaders, parents, staff, and TJJD, in addition to activating the program's alert system. Screening results will be discussed with Treatment Team members as a collaborated effort to ensure that potentially critical areas are addressed.

The licensed professional will be responsible for the gathering of information that provides a thorough description of each youth's mental health and substance abuse history, cultural background, and ethnic background through standardized screening and assessments, clinical interviews, file reviews, and information relayed by TJJD and other entities involved with the youth. G4S will assess using, at a minimum, the following tools (also addressed in Tab 8, H., Assessment Tools):

- Structured Assessment of Violence Risk in Youth
- Reynolds Adolescent Depression Scale
- Trauma Symptom Checklist for Children (TSCC) or Trauma Symptom Inventory
- Adolescent Substance Abuse Subtle Screening Instrument (SASSI)
- Assessment of Suicide Risk
- Skills Assessment (educational and vocational)



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- Comprehensive bio-psychosocial evaluation: The bio-psychosocial evaluation identifies physical health, mental health, substance abuse, academic, educational, or vocational problems that will be integrated into the treatment planning process.

Initial Treatment Planning Process: Following each youth's admission screening and assessment, results of findings will be processed by the multidisciplinary team to determine and formulate an initial mental health or initial substance abuse treatment plan to expedite services. This will identify preliminary goals and objectives and the initial course of



treatment prior to the individualized, formal plan being activated within 30 days of admission. The initial treatment plan will include at a minimum, the reason for the referral for mental health and/or substance abuse treatment; initial treatment methods; psychiatric services (if applicable), initial treatment goals and objectives and the initial DSM-IV-TR diagnosis or presenting symptoms.

Comprehensive Evaluation: A comprehensive mental health/substance abuse evaluation will be conducted by a licensed professional and will reflect on areas such as identifying information; reason for evaluation; relevant background information; behavioral observations/mental status examination; interview or procedures administered; discussion of findings; diagnostic impression/formulation; and recommendations that will guide treatment. This information will be derived from screening, assessment, review of risk and protective factors, interviews, prior history, and other sources to determine service levels needed for the youth's risk, needs and problems.

The comprehensive mental health and/or substance abuse evaluation will be completed within 30 days of admission or referral, and the licensed professional will review, sign and date within five days of its completion. To ensure timely completion, the Director of Clinical Services will monitor progress via daily tracker, review deadlines at daily Management Meetings, monthly coaching sessions with the Facility Administrator, weekly clinical supervision



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sessions, and weekly verification report submission to the Facility Administrator. The Director of Clinical Services will provide consistent communication to all licensed professionals.

Treatment Planning: Once all assessments and evaluations are completed, the multidisciplinary Treatment Team members will meet with the youth, his JSO and family, as available, to discuss the findings and to prioritize needs for the development of the individualized treatment plan. Special consideration will be given to his stage of development, gender, culture, family issues, mental health, and substance abuse treatment needs. The prioritized needs will form the basis for the development of his treatment plan and goals will be a result of the youth's problems/needs, strengths and preferences.

Objectives will be individualized, realistic to the youth's cognitive abilities, measurable, time specific, appropriate to the level of treatment, and clearly stated in behavioral terms. Targeted dates for treatment objectives to be completed will be closely monitored. Strategies will target the type and frequency of services and interventions and will be driven by the level of severity of need. The plan for services will be developed with the input of the Treatment Team members within 30 days of admission and will be signed by the youth and treatment team members within five days of admission. In the event parents are uninvolved in the development, documented efforts will be made to obtain signatures.

Monitoring Progress: At least monthly, the Director of Clinical Services will ensure that the youth's treatment team will evaluate the youth's progress toward treatment goals and objectives and determine whether modifications of services are necessary. Progress will be reported to TJJD every 90 days.

Psychotherapy or Professional Counseling

G4S is committed to providing quality, gender-specific treatment services to decrease future criminal acts; increase community safety; learn new coping skills to deal with stress and anxiety; show a decrease in criminal thinking and



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cognitive distortions; demonstrate an increase in ability to engage in healthy interpersonal relationships, social competencies and confidence; show an increase in assertive behaviors and ability to self-regulate negative emotions; and show an increase in empathy for the victims of past abusive acts. G4S will provide a high level of quality treatment services, including the following:

- **Individual Therapy:** Each youth will be provided individual therapy at a minimum of one session every other week. There are occasions that a youth may require additional time with his therapist as unexpected needs may arise. All individual therapy sessions are customized to meet the needs of the individual youth because their issues may vary. Sessions will address mental health as well as substance abuse needs of the youth as indicated.
- **Family Therapy:** Each youth will be offered family therapy at a minimum of one session per month. Since many of the problems that arise in the youth's life may, in part, be connected to an unstable family life, bringing the family together while the youth is in the program is important to the youth's progress and future. The parent or guardian are encouraged to come on-site to participate in family therapy. If the family is unable to participate in on-site sessions, teleconference family sessions are introduced. Issues that were present before the youth was placed at the program and/or issues that arise while in placement may be discussed during monthly meetings. Successful family therapy and participation by all parties increases the youth's probability for success following transition from the program.
- **Group Therapy:** Services will include five hours of group chemical dependency counseling per week and meet group requirements. The clinically focused groups will be meet the specialized needs including, but not limited to, alcohol and drug abuse, mental health and/or sex offending treatment. The licensed professionals will provide group therapy within the scope of their specific license, as discussed at the beginning of this section tab under Section B., "licensed and certification of program staff". The focus of group counseling will



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be to obtain relief from distressing symptoms, modify behaviors, and acquire new knowledge and skills that generalize from the group to the residential community and home environment. The program will use a variety of group counseling methods including process, didactic, psycho-educational, experiential and multi-sensory. The focus of group will be to obtain relief from distressing symptoms, modify behaviors, and acquire new knowledge and skills for targeted areas, including, but not limited to, chemical dependency, trauma, violence, delinquency, alcohol and drug abuse, anger, fear, frustration, self-destructive behaviors, and self-esteem.

Life Skills Training/Substance Abuse Education Program: Services will include ten (10) hours of alcohol and other drug (AOD) counseling per week within a life skills and substance abuse context. Groups will follow a written curriculum and meet all required guidelines. Youth will be expected to demonstrate proficiency in goal attainment by demonstrating the ability to learn cognitive restructuring techniques, develop problem-solving skills and enhance basic and critical social skills, all which are components of the practice model. Delinquency interventions will target anti-social behaviors and will be delivered in a culturally competent manner. This will include the use of active learning through demonstration, role-play and rehearsal, modeling of pro-social behaviors, guiding and re-directing toward pro-social and positive choices, and engaging in constructive dialogue to resolve conflict.

SUPPORT RESOURCES

- **Relapse Prevention Education** will be provided through relapse prevention planning, community volunteers and mentors, substance abuse groups, individual sessions, family therapy, speakers, and special events that address substance abuse.
- **Family Involvement:** G4S places emphasis on relationships between youth, family, staff and peers. This begins with honesty, authenticity, and respect for each other. G4S is successful in the ability to integrate parent-guardian connection during scheduled times that provide the greatest benefit to the youth. G4S will



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provide opportunities to teach families how to identify problems, communicate healthy resolution, and develop relationships. Parents will be integrated into the program, for their extent possible, from orientation through release. One of strengths of G4S is the ability to target family involvement as a priority of juvenile programming. Many families experience similar difficulty having their sons and daughters away from home. G4S approaches the “wholeness of family” that encompasses the family into all aspects of the treatment component, so there are continual opportunities to be involved in discussions, planning sessions, and activities. Embracing a family environment, G4S focuses on creating a setting that feels like a family unit, communicates in healthy manner, provides family activities, and engages all members to be part of the family nucleus.

- **Self Help Recovery Programming:** G4S will engage the community in activities that encourage, support, and teach accountability. These will include participation with volunteer organizations such as Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) that will provide support and encouragement. G4S will provide opportunities for youth to build relationships of trust and interdependence with volunteers through special projects and events in partnership with the community.
- **Recreational and leisure activities** will contribute to the health, social skills development and mental health needs seven days a week. They will be challenging, educational and constructive, and promote health and social skills development conducive to interests, ages, and emotional, mental or physical abilities. Physical and mental wellness will increase the ability to think more constructively than pathological through balancing healthy cortisol levels to strengthen sleep and better manage weight control, stress management, and impulsive behavior, which are common problems with the population. Youths will be involved in suggestions for activity enhancement, and daily schedules will include physically challenging activities that teach healthy ways to maintain physical well-being, in addition to alternative, pro-social ways of spending leisure time.



N. HANDLING YOUTH RIGHTS, COMPLAINTS AND RESOLUTION SYSTEM, AND PERSONAL FUNDS

G4S is committed to developing, implementing and managing services based on the highest ethical and performance standards to ensure a desirable quality environment for youth and staff. By maintaining high standards, staff and youth are more likely to contribute to achieving the goals of the therapeutic community in a genuine manner, and the safety of staff and youth is greatly enhanced. All residents under the care of the facility shall be granted personal, programmatic and environmental rights as mandated by TJJD standards, state and federal laws.

Residents and staff will become familiar with youth rights and complaints of abridgment shall be subject to the grievance process. These rights are not to be diminished or denied for any disciplinary reason. G4S will ensure that not only will each resident be afforded certain basic rights, residents will have unimpeded access to a confidential complaint with guarantees against reprisals.

Within 24 hours of admission, residents will be informed of their basic rights and the process to grieve concerning any complaint about their treatment and facility services. The system will be available to each youth and will serve as an administrative means for the expression and resolution of a youth's problems and concerns. There will be at least one staff designed as the Grievance Officer, with a backup staff in the event of absence. G4S will follow a thorough process that includes a system for collecting the grievances, logging the information in the grievance log, responding to the resident in a timely manner, providing written resolution to the resident, and forwarding all appeals to the administrative staff for determining the appeals.

All grievances will be reviewed daily by facility management, weekly by corporate personnel and responded to within 24 hours. Grievances not resolved at the first level will progress through a system of formal resolution, which allows for investigations and at least one level of appeal. The Facility Administrator/designee and program Management Team will review all grievances on a weekly basis for patterns and trends. G4S agrees to participate in the TJJD Youth Complaint automated system as described in TJJD General Administrative Policy.



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In 16 years of operating juvenile justice residential programs, we have never had a need to hold personal funds. It has always been an ACA Standard that has been found to be inapplicable in our ACA accredited programs. However, G4S will ensure that any funds and/or personal items in the youth's possession at admission that are not permitted in the program will be inventoried and returned to the youth's home.

O. BEHAVIORAL MANAGEMENT – MOTIVATION SYSTEM

G4S has developed comprehensive, gender-specific, positive performance models that set us apart from other providers. The behavior management system will be referred to as the positive performance system (PPS). Our experience has resulted in youth responding well to our positive performance system in our low, moderate, high and maximum-risk programs. Our positive performance system was designed with careful attention to documented research in the area of operant conditioning. Motivating, engaging and sustaining adjudicated adolescent males in a positive change process can be one of the most daunting challenges. Although, to date, there is no documented research on a specific adolescent Behavior Modification System, the research of many Behavior Analysts, including B.F. Skinner, is very clear regarding the specific components, variety and delivery that are necessary to effect behavior change.

Evidence-based practices strongly indicate a responsivity approach is essential for success in both treatment practices and in increasing internally motivated behavior change. The G4S system is responsive to the unique needs, characteristics and motivations, and fosters accountability for behavior and compliance with the rules and expectations. Assessment of the motivational factors begins with the intake process and is re-evaluated during monthly treatment team meetings. An effective behavior modification system teaches self-control needed for future success; therefore, our goals for the population are to develop self-monitoring and self-regulation skills, improve emotional and behavioral functioning, address and eliminate criminogenic behaviors/risks, and promote pro-social behavior competencies.



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Commitment to Innovative Programming

G4S espouses the Department's vision to reform the juvenile justice system by preventing youth from penetrating deeper into the juvenile justice system; but instead, providing the right treatment and intensity to positively impact the risk to offend. Further, we concur with the Department's goal to create a trauma-focused, restraint-free environment that is sensitive to past histories of abuse and trauma. We are continually exploring effective ways to maximize the course of treatment and progress within the time limitations, and are committed to an innovative environment that focuses on behavior and accountability, such as:



- Pre-service training of all levels of staff for understanding how to use appropriate interventions and positive incentives to minimize potential triggering of abuse histories or victimization;
- Utilizing researched color combinations and posters that display themes of positive messages to increase responsiveness and decrease stress, anxiety and tension;
- Utilizing trained volunteers, mentors and other members from the community to provide positive modeling, experiences and relationships with the youth;
- Including youth input on rules governing community living, program design, implementation and evaluation;
- Providing opportunities to develop relationships of trust and interdependence with people already present in their lives (such as friends, relatives, and church members);
- Promoting cultural diversity and positive identity, self-esteem, self-respect and respect for others; and,
- Inclusion of the youth community meeting or "Let's Talk" meetings, which are innovative, yet proven process, where youth and staff can discuss any unresolved issues or potential conflict that can impact the community. This powerful communication style controls for defensiveness and strengthens problem-solving and team work skills.



Behavior Modification/Motivation

Behavior modification (we prefer to refer to “motivation”) is accomplished through the delivery of positive reinforcers (award of points and privileges). The PPS utilizes reinforcers that motivate males to achieve goals and accomplish tasks. Rewards that are both tangible and intangible are administered at scheduled, intermittent, and random intervals. A variety of reinforcers are provided based on input from the individual youth. Individual youth responsivity factors are considered in tailoring consequences and design to match appropriately with the level of severity of behavior displayed to modify or extinguish undesirable behavior. Providing continuity in structure, treatment, accountability and intermittent reinforcement increases probability of changing behavior, reducing recidivism and victimization.

Using Restorative Justice principles, consequences are intended to address the harm caused to victim(s) and other community members, and will provide boys the opportunity for reparations. Each staff is trained to understand that trauma may be the driving force of behavior and intensity of needs, rather than viewing behavior in an unacceptable manner. This understanding allows staff to effectively interrupt unacceptable behaviors, teach healthy alternatives for self-expression and getting needs met, while praising the youth to encourage appropriate decisions. The positive performance system includes fundamental gender-specific tenets that are linked to the treatment plan, such as:

- Trauma drives behavior; therefore, G4S focuses on the trauma first, before the behavior;
- Behavior is indicative of the intensity of needs for safety, structuring, and acceptance;
- Adolescents often use inappropriate actions to express their emotions and needs; therefore, G4S maintains a level of patience and encouragement to verbally self-express;
- Strong emotions and behaviors often mask the true pain, confusion, embarrassment and fear adolescents are feeling; therefore, G4S addresses the underlying feeling, rather than the behavior;
- G4S disciplines as a means of teaching healthier ways of self-expression when needs are not met; and,



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- Provision for positive reinforcements each day, following the G4S vision to provide four positive reinforcements to each one "redirection" given, consisting, but not limited to, verbal praises, positive write-ups, notes/awards of congratulations, and celebrations.

Level System

Upon program admission, each youth receives a Resident Handbook that describes the PPS and includes the program rules, expectations and consequences for both positive and negative behaviors. The handbook also provides a description of privileges according to the level/tier system. G4S uses a multi-level tier system with graduated responsibilities that result in privileges and rewards when a youth completes the level. As a youth meets requirements to request a level promotion, he will be provided a level/tier packet, specific to each level, that contains assignments that describe and discuss concepts he will be expected to learn, as it relates to the philosophy of restorative justice, victim impact, acceptance of responsibility, and identifying how delinquent behaviors have resulted in harm to victims. Once the packet is completed, the youth will present it to the treatment team to determine if he earns advancement to the next level. As the youth increases in level, he can earn opportunities for special projects that are meaningful to repairing damage caused by criminal behavior, while constantly building on daily life and social skills.

Behavioral Accountability

The PPS fosters accountability for behavior and compliance within the residential community's rules and expectations. Standards for behavior are reasonable and developmentally appropriate. Infractions are designed to model society's rules and the youth are expected to reside in an environment that is safe and free of victimization. The Treatment Team determines consequences for violations of community rules, taking into account motivational factors, determined by assessment, and the severity of the infraction. Each youth will be notified of reasons for disciplinary action prior to implementing the specific action, and will be permitted to explain the behavior leading up to the disciplinary action.



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Youth will not be violated for an event that is a potential crisis resulting in subsequent placement on Precautionary Observation or Mental Health Status. G4S will not allow any type of discipline that violates youth rights, which includes corporal and physical punishment; cruel, severe, or humiliating actions; discipline of one child by another child; denial of food, sleep, clothing, shelter, healthcare, accommodation of religious needs, or staff assistance; denial of family contact; assignment of extremely strenuous exercise or work; verbal abuse or ridicule; mechanical restraints; a drug or chemical agent used as a restraint; seclusion or isolation time-out; and, behavior management unit or use controlled observation.

Youth in Crisis

Research has shown that many juvenile offenders have been exposed to traumatic events, either as victims or witnesses, often developing into Post-Traumatic Stress Disorder (PTSD) or trauma-related symptoms. The goal is to maintain a safe and non-violent trauma-informed culture that is sensitive to youth needs. At the first signs of a potential crisis, residents will be encouraged to use the "Let's Talk" process, which is an informal process of encouraging him to communicate feelings and thoughts. As another layer of support, G4S will pursue a voluntary Chaplaincy Program that can be notified if requested by the youth. Further, G4S will operate its residential community on the principles of the Therapeutic Community (TC), where each youth is encouraged to lean on peers as a support system and to work together to resolve conflict.

G4S has established a Crisis Prevention / Intervention Plan that prepares youth and staff for situations that can evolve into a crisis. Training provides prevention strategies and intervention techniques by recognizing the signs of potential crisis, applying response techniques, and refocusing the youth. Quality monitoring of the crisis prevention ensures consequences are not because of a potential crisis event; rather, staff understand the reason for the crisis, and make a referral to master's degree clinicians for further assessment. The assessment will be reviewed and signed by the licensed professional. G4S will prepare for crisis prevention through the following measures:



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- Conduct risk assessments to identify youth with histories of trauma, violence and/or behavior management issues;
- Conduct mental health crisis assessments of youth when indicated;
- Employ crisis intervention techniques to resolve acute emotional or behavioral problems;
- Help youth identify precipitating events, learn how to alleviate distressing symptoms and regain normal functioning;
- Implement mental health alert status for one-to-one or constant supervision when indicated;
- Develop safety plans for youth with identified trauma, violence and/or behavior issues and include the youth's triggers, high-risk situations, coping skills and staff support strategies into treatment; and, share the safety plan with parent/guardian, JPO and external professionals when indicated;
- Develop a behavior management plan for youth with severe, chronic behavior problems;
- Utilize effective treatments of evidence-based, Trauma-Focused Cognitive Behavioral Therapy; and,
- Conduct community meetings to address and resolve problems within the residential community

Monitoring for Consistency

G4S operates effective behavior modification systems that have resulted in numerous programs receiving accolades for past Florida QA/QI reviews in the majority of our programs. The Facility Administrator serves as the youth advocate and oversees the motivational system. Key management staff will conduct daily facility inspections to observe the treatment of residents. The Facility Administrator and management team maintain close communication with the youth at weekly community meetings, bi-weekly performance reviews, monthly Treatment Team meetings, and Youth Council meetings.

The management team reviews data correlated with the behavior motivation system. The Licensed Mental Health Professional/Director of Clinical Services observes the provision of clinical and delinquency intervention services and



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conducts weekly clinical supervision with the mental health counselors and delinquency intervention facilitators. The management team facilitates the monthly Scorecard process; mock QA audit and comprehensive reviews of management, operations, mental health, medical and case management practices, processes and services; sample chart reviews; youth and staff interviews and surveys; and conducts monthly campus-wide meetings for all staff members and teachers to disseminate information related to the positive performance system.

Behavior Modification / Motivation Training

G4S maintains a behavioral management and positive behavior reinforcement system that fosters accountability. G4S has developed a comprehensive pre-service training module on the implementation of the behavior modification system that is in accordance with Rule and will be provided to all staff, subcontractors, educators and volunteers during the first month of new employment or volunteering. It includes, but not limited to, introduction to the principles and philosophical orientation of the behavior motivation system, the use of rewards and consequences, verbal crisis intervention, de-escalation skills, appropriate use of physical restraint holds, monitoring of the youth's breathing and motor control, and the use of safety plans.

Continuous training on the positive performance system will be provided to all staff on a monthly basis, during campus-wide and departmental meetings. Additionally, G4S will continue to work collaboratively with the School District to provide joint training sessions to the educational and program staff that includes, but not limited to, classroom management, implementation and enforcement of the common discipline plan. Only staff who are certified in Handle With Care will restrain a youth and *only* as a last effort. On an annual basis, staff will complete required hours of annual behavior modification training that includes techniques for de-escalating problem behavior.

G4S will prepare the staff for crisis prevention through pre-service training to understand the development and emotion of adolescents, the role that past trauma plays in behavior, and proper response to crisis situations. Annual



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in-service training will reiterate technique and procedures to ensure each staff consistently supports a trauma-focused environment.

Inclusion of Education and Direct Care Staff

G4S takes seriously its role and responsibility in the classroom, regardless of whether the education program is provided by the School District or G4S. Youth care staff are assigned to classrooms to provide care, custody and supervision and respond to the everyday needs. In all G4S programs, we have been very successful in training youth care workers to become a member of the classroom team. In addition to supervision, youth care workers who are involved in the educational process, under the direction of the teacher, have proven that they provide better supervision. G4S and School District staff are most effective when they participate in joint trainings that emphasize the behavior management and motivation system mutually agreed upon by G4S and the School District. Disruptive youth will be immediately removed from the classroom and counseled by the youth care worker. When he accepts accountability for behavior and commits to remaining orderly, he will be allowed by the teacher to return to the classroom. Either the teacher or the staff can prompt a youth, award reinforcement for good behavior, or sanction for negative behavior.

Plan to Promote Mentoring, Positive Role-Modeling and Staff-to-Youth Interactions

The foundation of a successful program lies with a gender specific culture that celebrates and values males. G4S promotes dynamic interaction between staff and residents, fostering appropriate healthy relationships that lay a foundation for positive future interactions. Regardless of past experiences, youth need to feel a sense of belonging to a family environment, which G4S will provide. The environment will be one that is safe and respectful. Posters and artwork will represent male artists, role models, G4S leaders, quotes, G4S success posters, career postings, food pyramid posters, youth artwork, in addition to other ways to promote gender-specific role-models and cultural diversity. G4S staff will serve as role models to teach the importance of respect, and the program will hold special activities to celebrate and honor successes. Social and life skills will promote positive identity, self-esteem and



respect for self and others. Our team will be involved in teaching appropriate ways to resolve conflict, and promote cultural values. Further, trained volunteers, mentors and other members from the community will be utilized to provide positive modeling and experiences with the youth.

P. PRIVILEGE SYSTEM

Positive Behavior Reinforcement- Motivational Factors

Exemplary behaviors are consistently reinforced when they exceed minimum compliance standards. The behavior modification system, positive performance system, is responsive to the unique needs, characteristics and motivations. G4S awards at least four positive reinforcements to each one "redirection" (4:1). Because immediacy is critical to feedback effectiveness, the G4S system provides multiple opportunities to receive performance feedback throughout the course of the day. A daily incentive activity can be earned by successfully maintaining appropriate pro-social behavior. To teach delayed gratification, the system also provides a weekly and monthly incentive for those earning an accumulation of positive days. Canteen purchasing privileges may be awarded for obtaining required points and may be increased in options, based on the level and standing of the youth. Further, celebrations acknowledge and award level advancement, honoring each youth's courage, resiliency and ability to grow and succeed.

A sample example of reinforcement of motivation toward improving performance and progress is as follows:

Pro-Social Behaviors	Daily Reinforcers	Weekly Reinforcers	Monthly Reinforcers
<ul style="list-style-type: none"> ▪ Comply with schedule ▪ Follow bedtime rules without prompts ▪ Participate in groups ▪ Participate in school ▪ Help peers with schoolwork ▪ Maintain a positive attitude ▪ Develop positive relationships with staff ▪ Develop positive relationships with peers ▪ Praise & compliment others ▪ Work on performance or 	<ul style="list-style-type: none"> ▪ Verbal praise ▪ Smiles ▪ Thumbs Up ▪ Pat on back ▪ Certificates ▪ Announcements ▪ Stars ▪ Stickers ▪ Unit jobs ▪ Points ▪ Level Privileges ▪ Photographs ▪ Morning 	<ul style="list-style-type: none"> ▪ Extra recreation time ▪ Extra phone call ▪ Arts and Crafts ▪ Music and Poetry Events ▪ Trivia Contests ▪ Spelling B's ▪ Points / token ▪ Level Privileges ▪ Pizza and Wings ▪ McDonalds ▪ Family Feud ▪ Video Game Night ▪ Chinese Food Night 	<ul style="list-style-type: none"> ▪ Resident Council ▪ Dorm of the Month Party ▪ Special Activity Day ▪ Unit Birthday Party ▪ Facility Activity Theme Day ▪ Points ▪ Level Advancement ▪ Monthly Treatment Team Meeting



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<p>treatment plan</p> <ul style="list-style-type: none">▪ Exemplify a pillar of character & leadership▪ Follow directions without prompts▪ Encourage a peer to follow directions▪ Redirect bullying▪ Maintain hygiene, dress code, clean room▪ Walk away from a verbal or physical altercation▪ Maintain line movement▪ Display good manners	<p>Expectations Groups</p> <ul style="list-style-type: none">▪ Evening Reflections Groups▪ Special activities	<ul style="list-style-type: none">▪ Bar-b-q▪ Check-checker club▪ Special sports activity▪ Arts and crafts	
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Q. SAMPLE OF CASE PLAN UTILIZED BY PROGRAM



**CHILD/FAMILY CASE PLAN
(Secure Residential Placement)**

IDENTIFYING INFORMATION	
Child's Name:	County:
Child's Date of Birth:	Caseworker PID:

PURPOSE OF PLAN: The goals and tasks outlined in this plan are designed to help resolve issues that led to your involvement with the juvenile justice system and to ensure the safety, permanency, and well being of you and your family. You will be expected to participate in developing this case plan and demonstrate progress in achieving the goals listed. Your progress will periodically be reviewed and evaluated. In addition to the activities outlined in the case plan, you are expected to adhere to all court ordered conditions of probation.

PRIOR SERVICES: List all services previously provided to help the child remain safely with the family. If no services were provided, there **MUST** be an explanation.

FACILITY INFORMATION		
Name of Facility:		Date of Placement:
Address:		
City/State/Zip:		Phone #:

NEED FOR PLACEMENT: Explain why this child requires placement. Discuss the child's behavior **AND** the family situation.

APPROPRIATENESS OF PLACEMENT: Explain what specific services are being provided to meet the child's needs as discussed in the 'need for placement' above.



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MEDICAL/DENTAL DOMAIN NAMES AND ADDRESSES OF CHILD'S MOST RECENT HEALTHCARE PROVIDERS <i>(prior to placement)</i>			
MEDICAL		DENTAL	
Name:		Name:	
Address:		Address:	
City/State/Zip:		City/State/Zip:	
Phone #:		Phone #:	
Child's current medications (including psychotropic meds):			
Indicate what medications are for:			
List any other important medical information/concerns:			
Date child's immunization & health records were provided to facility designee:			
Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			
SAFETY/SECURITY DOMAIN			
Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			
RECREATIONAL DOMAIN			
Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			
EDUCATIONAL DOMAIN NAME AND ADDRESS OF CHILD'S MOST RECENT EDUCATIONAL PROVIDER <i>(prior to placement)</i>			
Name:		Phone #:	
Address:		City/State:	
Child's current grade level placement:		Child's current grade level performance:	
Date child's educational records were provided to facility designee:			
Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			
EMOTIONAL (MENTAL/BEHAVIORAL HEALTH) DOMAIN			



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Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			
RELATIONSHIP/SOCIALIZATION DOMAIN			
Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			
PARENT AND CHILD PARTICIPATION DOMAIN			
Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			

PERMANENCY PLAN: Plan for the safe and permanent placement of the child.

- Return to parent * Emancipation/independent living Adoption
 Place with relative * Other permanent living arrangement

**If emancipation/independent living or other permanent living arrangement is the permanency plan, explain why this is in the best interest of the child.*

PROJECTED PERMANENCY DATE: _____



SECONDARY DOMAINS

**The following domains are used for consideration when developing the child's case plan to address more specific needs that the child and/or the family may have.*

PREPARATION FOR ADULT LIVING/VOCATIONAL DOMAIN <i>(if child is or will be 16 before next review)</i>			
Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			
FAMILY SERVICES DOMAIN			
Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			
SUPPORT SERVICES PROVIDED TO FACILITY DESIGNEE <i>(identify services the department will provide to the facility designee to assist in meeting the child's needs)</i>			
Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			

PARENTAL/FAMILIAL RIGHTS AND RESPONSIBILITIES

Along with the right to visit your child, you have the right to be notified of any change in the placement of your child.

You have a right to be notified if there is a change in your visitation schedule.

You have the right to know the plan of action necessary to have your child returned to you, and you have the responsibility to follow that plan in order to correct the circumstances which required the placement of your child in substitute care.

You have the right to be notified of any unusual occurrence regarding your child such as injury, illness, runaway, etc.

You have the right to be notified of any child facility staffing, placement review, or administrative hearing, which has the potential for impacting the return of your child. In addition, you have the responsibility to attend these staffings/reviews and participate in the development of the plan of action.

While your child is in placement, you have the right to be involved in the review of this case plan that occurs at least every ninety (90) calendar days to ensure that appropriate treatment is being provided.



**Tab 8-Program Components and Narrative
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**



SIGNATURES *(The signature of the facility designee indicates a completed case plan)*

BY SIGNING THIS DOCUMENT, IT IS AN ACKNOWLEDGEMENT OF THE OPPORTUNITY TO PARTICIPATE IN THE DEVELOPMENT OF THIS CASE PLAN.

CHILD:	DATE:
FAMILY:	DATE:
JPO:	DATE:
FACILITY DESIGNEE:	DATE:

DATE DISTRIBUTED
(A copy of the completed case plan shall be distributed to all who participated in its development by the facility designee)

CHILD	FAMILY	JPO

If any party has not, or refuses to sign, explain:



Sample Case Plan Review Form



**REVIEW OF CHILD/FAMILY CASE PLAN
(Secure Residential Placement)**

<input type="checkbox"/> 90 Day Review			<input type="checkbox"/> 180 Day Review			<input type="checkbox"/> 270 Day Review			<input type="checkbox"/> 360 Day Review			<input type="checkbox"/> Other		
Date of Initial Case Plan:				Date of Last Review:				Date of Current Review:						
IDENTIFYING INFORMATION														
Child's Name:						County:								
Child's Date of Birth:						Caseworker PID:								
FACILITY INFORMATION														
Name of Facility:								Date of Current Placement:						
Address:														
City/State/Zip:								Phone #:						

CONTINUED NEED FOR PLACEMENT: Explain why this child continues to require placement. Discuss the child's behavior AND the family situation.

APPROPRIATENESS OF PLACEMENT: Explain what specific services are being provided to safely meet the child's needs discussed in the previous section.



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MEDICAL/DENTAL DOMAIN						
NAMES AND ADDRESSES OF CHILD'S CURRENT HEALTHCARE PROVIDERS						
MEDICAL			DENTAL			
Name:			Name:			
Address:			Address:			
City/State/Zip:			City/State/Zip:			
Phone #:			Phone #:			
Child's current medications (including psychotropic meds):						
Indicate what medications are for:						
List any other important medical information/concerns:						
Goal #1:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #2:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #3:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
SAFETY/SECURITY DOMAIN						
Goal #1:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #2:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #3:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
RECREATIONAL DOMAIN						
Goal #1:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>



Tab 8-Program Components and Narrative
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RECREATIONAL DOMAIN <i>(continued)</i>						
Goal #2:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #3:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
EDUCATIONAL DOMAIN						
NAME AND ADDRESS OF CHILD'S CURRENT EDUCATIONAL PROVIDER						
Name:				Phone #:		
Address:			City/State/Zip:			
Child's current grade level placement:						
Goal #1:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #2:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #3:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
EMOTIONAL (MENTAL/BEHAVIORAL HEALTH) DOMAIN						
Goal #1:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #2:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #3:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>



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RELATIONSHIP/SOCIALIZATION DOMAIN						
Goal #1:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #2:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #3:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
PARENT AND CHILD PARTICIPATION DOMAIN						
Goal #1:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #2:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>
Goal #3:						
Discussion of progress:						
Measurement of progress	+3 <input type="checkbox"/>	+2 <input type="checkbox"/>	+1 <input type="checkbox"/>	0 <input type="checkbox"/>	-1 <input type="checkbox"/>	-2 <input type="checkbox"/>

PERMANENCY PLAN: Plan for the safe and permanent placement of the child.

- return to parent * emancipation/independent living adoption
 place with relative * other permanent living arrangement

**If emancipation/independent living or other permanent living arrangement is the permanency plan, explain why this is in the best interest of the child.*

PROJECTED PERMANENCY DATE: _____



**Tab 8-Program Components and Narrative
Texas Juvenile Justice Department
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SECONDARY DOMAINS

**The following domains are used for consideration when developing the child's case plan to address more specific needs that the child and/or the family may have.*

PREPARATION FOR ADULT LIVING/VOCATIONAL DOMAIN (if child is or will be 16 before next review)						
Goal #1:						
Discussion of progress:						
Measurement of progress	+3	+2	+1	0	-1	-2
Goal #2:						
Discussion of progress:						
Measurement of progress	+3	+2	+1	0	-1	-2
Goal #3:						
Discussion of progress:						
Measurement of progress	+3	+2	+1	0	-1	-2
FAMILY SERVICES DOMAIN						
Goal #1:						
Discussion of progress:						
Measurement of progress	+3	+2	+1	0	-1	-2
Goal #2:						
Discussion of progress:						
Measurement of progress	+3	+2	+1	0	-1	-2
Goal #3:						
Discussion of progress:						
Measurement of progress	+3	+2	+1	0	-1	-2
SUPPORT SERVICES PROVIDED TO FACILITY DESIGNEE						
Goal #1:						
Discussion of progress:						
Measurement of progress	+3	+2	+1	0	-1	-2
Goal #2:						
Discussion of progress:						
Measurement of progress	+3	+2	+1	0	-1	-2
Goal #3:						
Discussion of progress:						
Measurement of progress	+3	+2	+1	0	-1	-2



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LIST ANY NEW NEEDS* THAT MAY HAVE BEEN IDENTIFIED SINCE THE LAST PLAN/REVIEW AND THE INTERVENTIONS TO ADDRESS THOSE NEEDS			
Goal / Need	Intervention	Person(s) Responsible	Time Frame
1.			
2.			
3.			
4.			
5.			
6.			

*NOTE: New needs/goals listed here are to be moved to the appropriate domain at the next review.

PLAN OF CONTACT	
A. Did the JPO maintain contact with the child, family, and facility designee on a monthly basis?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain why:	
B. Did the family comply with their plan of contact with the child?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, explain why:	
C. The current plan of contact between the child and parent is as follows (document frequency AND method):	

SIGNATURES *(The signature of the facility designee indicates a completed case plan review)*

BY SIGNING THIS DOCUMENT, IT IS AN ACKNOWLEDGEMENT OF THE OPPORTUNITY TO PARTICIPATE IN THE DEVELOPMENT OF THIS CASE PLAN.

CHILD:	DATE:
FAMILY:	DATE:
JPO:	DATE:
FACILITY DESIGNEE:	DATE:

DATE DISTRIBUTED		
<i>(A copy of the completed case plan review shall be distributed to all who participated in its development by the facility designee)</i>		
CHILD	FAMILY	JPO

If any party has not, or refuses to sign, explain:



R. LITERATIVE REVIEW TO SUPPORT AND VALIDATE PROGRAMMING OFFERED

G4S will use Cognitive Behavioral Therapy as its primary and fundamental treatment approach and philosophy. Volumes of research support the effectiveness of this strategy and intervention process as the most effectual in promoting positive treatment outcomes and reducing recidivism. Curriculum selected for use will meet the standards set in the following narrative.

Cognitive Behavioral Treatment

Cognitive–Behavioral Therapy/Treatment (CBT) is a problem-focused approach to helping people identify and change the dysfunctional beliefs, thoughts, and patterns of behavior that contribute to their problems. Its underlying principle is that thoughts affect emotions, which then influence behaviors. CBT combines two very effective kinds of psychotherapy: cognitive therapy and behavioral therapy.

Cognitive therapy concentrates on thoughts, assumptions, and beliefs. With cognitive therapy, people are encouraged to recognize and to change faulty or maladaptive thinking patterns. Cognitive therapy is a way to gain control over inappropriate repetitive thoughts that often feed or trigger various presenting problems (Beck 1995). CBT teaches the person to change negative self-talk and replace it with positive or “functional” self-talk thus changing the feelings and perception about the situation.

Behavioral therapy concentrates on specific actions and environments that either change or maintain behaviors (Skinner 1974; Bandura 1977). Replacing negative behaviors with positive behaviors is a well-known strategy to help change outcomes. The combination of cognitive therapy and behavioral therapy has proven highly beneficial. Many studies provide consistent empirical evidence that CBT is associated with significant and clinically meaningful positive changes, particularly when therapy is provided by experienced practitioners (Waldron and Kaminer 2004). CBT has been successfully applied across settings (e.g., schools, support groups, prisons, treatment agencies, community-based organizations, churches) and across ages and roles. It has been shown to be relevant for people



Tab 8-Program Components and Narrative Texas Juvenile Justice Department Secure Residential Specialized Program Services

with different abilities and backgrounds. The strategies of CBT have been used successfully to prevent the onset, restructure the severity, and redirect the long-term consequences of problem behaviors among young people.

Problem behaviors that have been particularly amenable to change using CBT have been 1) violence and criminality, 2) substance use and abuse, 3) teen pregnancy and risky sexual behaviors, and 4) school failure. The integration of CBT with other types of approaches such as with motivational interviewing may increase treatment effectiveness among less compliant individuals and populations (Zinbarg et al. 2010). Integrating CBT with strengths-based approaches may similarly yield improved outcomes (Zinbarg et al. 2010). This type of integration may be particularly important for achieving improved outcomes with delinquent youth.

Substance Use and Abuse: Many young people perceive that everyone experiments or uses alcohol and other drugs (Prokhorov et al. 1993). CBT is the primary prevention strategy used by many model programs to alter these faulty beliefs and attitudes about the universal use of alcohol, tobacco, and other drugs, and to teach young people the behaviors needed to refuse if, or when, presented with the opportunity (Botvin, Botvin, and Ruchlin 1998). Techniques used to facilitate change include identifying the circumstances surrounding use, learning strategies to manage urges and cravings, concentration to anticipate and avoid high-risk situations as a means to facilitate abstinence, and remembering to engage in positive behaviors (Kaminer 2004).

Delinquency, Criminality, and Violence Prevention: The most widely used approaches to treatment in criminal justice today are variations of CBT (Little 2005). Distorted cognition is one of the most notable characteristics of chronic offenders (Beck 1999). Cognitive-behavioral treatments for juvenile offenders are designed to correct dysfunctional thinking and behaviors associated with delinquency, crime, and violence.

Meta-analyses of programs designed for criminal offenders have shown cognitive-behavioral programs to be highly effective in reducing recidivism rates (Little 2005; Lipsey, Chapman, and Landenberger 2001; Pearson et al. 2002;



Tab 8-Program Components and Narrative Texas Juvenile Justice Department Secure Residential Specialized Program Services

Wilson, Bouffard, and MacKenzie 2005; Walker et al. 2004). A meta-analysis by Landenberger and Lipsey (2005) looked at whether certain components of CBT programs used with adult and juvenile offenders were associated with greater recidivism effect sizes. They concluded that programs with better implementation quality and fidelity, along with higher-risk offender populations, were associated with greater effect sizes. Programs incorporating anger control and interpersonal problem-solving components enhanced effectiveness, while those incorporating victim impact and behavior modification components diminished effectiveness. Programs were equally effective for adult and juvenile populations. Programs with the most effective CBT implementation and components corresponded to a decrease in recidivism of 50 percent, compared with a control condition.

S. UNDERSTANDING AND ACCEPTANCE OF TJJD CONTRACT PROVISIONS, CERTIFICATIONS AND REPRESENTATIONS

G4S understands and accepts responsibility to consistently comply with all TJJD contract provisions, certifications, representations, law, administrative rules, policies and procedures.

T. AGREEMENTS TO EXECUTE CONTRACT AT TIME OF AWARD

G4S is prepared to execute the contract at the time of award. It is assumed it is the intention of the TJJD to execute the contract tentatively on April 19, 2013. If G4S is awarded the contract, we request the contract to be executed at the Department's earliest availability to allow for the hire process and ensure time to complete our comprehensive training prior to receiving TJJD youth.



Tab 9. Quality Control Plan/Measures of Performance and Quality of Services

A. DETAIL OF QUALITY CONTROL PLAN

G4S is committed to operating a program that meets the Acceptable Quality Level (AQL) of the Texas Juvenile Justice Department (TJJD). G4S has developed an Internal Fidelity and Quality Improvement Process that is a multi-level department management and score card practice, designed to ensure continuous assessment, measurement and management of risk as well as to promote continuous quality improvement. The score card process continues to be enhanced based upon identified trends, patterns and improvement needs. Most recent enhancements to processes have included targeted evaluation of leadership development, management accountability, outcomes management as well as targeted clinical services enhancement initiatives designed to improve the quality of services delivered to the youth.

The department management and score card process employs a coaching philosophy and “keeping score” which includes ongoing evaluation of expected services and service delivery, documentation, observation and fidelity reviews as well as an evaluation of overall quality and development of improvement initiatives. The process includes weekly and monthly management reporting by program leadership and management staff, both quantitative and qualitative fidelity checks, verification activities and observations at program, regional and leadership levels, formalized monthly score card reviews completed by assigned regional teams as well as leadership reviews and evaluation of program data, performance improvement plans and program outcomes.

Operational Risk Management System Requirements

- Daily Management Meeting: G4S shall facilitate a daily management meeting conducted by the Facility Administrator or designee to review essential data and to ensure an exchange of pertinent information that is essential to the management and operations of the program. The program shall ensure use of the required form and shall document all those in attendance at the meeting. Meeting minutes shall be



Tab 9-Quality Control Plan/Measures of Performance and Quality of Services Texas Juvenile Justice Department Secure Residential Specialized Program Services

maintained for all Daily Management Meetings and shall be maintained on a community computer drive and in a binder for review, reference and follow up as indicated.

- Monthly Department Coaching Sessions: G4S Facility Administrator shall ensure the completion of monthly supervision “coaching” sessions with all key departmental staff. At minimum, monthly coaching sessions shall be conducted with management representatives from case management, clinical, health, operations, safety and security, and support services. As a part of the monthly coaching session, the Facility Administrator shall review the monthly management reports with the assigned department director. Each week, the Facility Administrator shall also conduct verification checks (sample) of items stated as completed on the verification tool. The Facility Administrator shall use the coaching sessions to ensure completion of required practices, to provide supervision and coaching to the direct report, to assist in problem solving and to promote communication and preventative planning practices to ensure ongoing quality improvement.
- Weekly Management Meeting: G4S Facility Administrator shall ensure completion of a weekly management meeting. The meeting shall include all facility management team members and shall be documented on the required management meeting form. Weekly management team meeting minutes shall be documented and maintained on the community computer drive and in a binder with signatures of all attendees for review, reference and follow up as indicated.
- Facility Risk Management Meeting: Each month, a facility risk management meeting shall be conducted to review the facility based score card findings, performance improvement plan initiatives and to review pertinent information, upcoming audits, evaluations and/or significant events. The Facility Risk Management Meeting is to be facilitated by the Regional Director with attendance and participation by the Regional Compliance Manager, Clinical Specialist and Facility Administrator.
- Regional Leadership Meeting: A regional leadership meeting shall be conducted on a monthly basis to review Key Performance Indicator (KPI) data, performance improvement plans, score card data, and relevant needs and improvement initiatives for all G4S Youth Services programs including the facility. Those participating in the regional leadership meeting include Director of Operations, VP of Clinical Services,



Tab 9-Quality Control Plan/Measures of Performance and Quality of Services Texas Juvenile Justice Department Secure Residential Specialized Program Services

Director of Compliance, Director of Health Services, Regional Director, Regional Compliance Manager and Clinical Specialist for the assigned area. Data reporting and significant trends and findings discussed within the meeting are compiled into a monthly program report summary with a coordinated color coded rating scale which is presented to the Executive Management Team.

Fidelity and Compliance System Requirements

- Monthly Fidelity and Compliance Reviews: Monthly fidelity and compliance activities shall be routinely conducted by the facility management staff. Fidelity and compliance review activities shall include, but are not limited to, a monthly review of key documentation in the areas of operations, safety and security, treatment services and health services, completion of assigned verification checks, observations and completion of surveys.
- Score Card: The facility score card is the framework of monthly review reporting completed by the regional team. The score card outlines expected minimum areas of review and provides a rating system designed to measure both compliance and quality of services as well as facility leadership and management. The regional team is responsible for completion of the score card document on a monthly basis.
- Score Card Review Processes: Score card review processes shall be used as ongoing tools to promote continuous communication and improvement activities. Score card reviews are completed at the facility level and the regional level to address program progress and improvement initiatives.
- Compliance Management Systems Review: Regional leadership shall complete a monthly Management Systems Review report. The report includes review of incident reporting, vacancies, coverage plan reviews, performance improvement status reviews, required call and meeting participation, verification checks, trends analysis, schedule submission and summary of pertinent information, supervision and improvement planning for the period.



B ACCEPTANCE TO ALLOW TJJD TO CONDUCT MONITORING AND TO FULL COOPERATION

The G4S plan described above emulates quality programming achievement outcomes. G4S understands that TJJD maintains a monitoring system to ensure the delivery of quality services and terms of the contract. We intend to fully cooperate with the TJJD process of evaluating program performance and youth outcomes through different means, such as:

- Periodic announced and/or unannounced on-site program monitoring by TJJD;
- Compliance with the Contract for Residential Services;
- Progress toward behavioral and treatment outcomes;
- TJJD Performance Measures for Residential Contract Programs (Exhibit G); and,
- TJJD Monitoring Rating for Residential Contract Programs (Exhibit G).

C. UNDERSTANDING OF TJJD CONTRACT CARE PERFORMANCE AND QUALITY OF SERVICE MEASURES

G4S understands the purpose of contract care performance and the requirement to maintain measurements of service quality through a monitoring system that is related to the program's risk level. We understand the risk classification determines the number of contract visits per fiscal year, in addition to the identification of targeted goals and outcomes. Further, we understand there are risk factors associated with the program risk level such as actual and projected expenditures, program staffing, quality of life score, performance measures, specialized services, population characteristics, provider experience with program services and program experience with TJJD. If awarded the contract, G4S fully intends to comply with all terms of the contract. We maintain strong relationships with our customers and lead the State of Florida in our ability to provide comprehensive, quality services and operations in residential settings. For this reason, we welcome the opportunity to partner with the Texas Juvenile Justice Department.



D. TAKE APPROPRIATE ACTION TO CORRECT FINDINGS AND DEFICIENCIES

In the event a performance deficiency is identified during a TJJD monitoring visit, G4S will immediately correct the finding and deficiency through a corrective action plan.

E. MONITOR DAY TO DAY OPERATIONS

G4S will take responsibility for monitoring the day-to-day operations of the program, which will be reviewed during daily management meetings.

F. MONITOR ACTIVITIES OF CONSULTANTS, SUBCONTRACTORS, SUBCONTRACTOR'S EMPLOYEES AND VOLUNTEER WORKERS

G4S will take responsible for monitoring activities of consultants, subcontractors, subcontractor's employees and volunteer workers to ensure compliance with applicable requirements and achievement of performance goals.



Execution of Offer

NOTE: RESPONDENT SHALL COMPLETE, SIGN AND RETURN THIS SECTION WITH OFFER. FAILURE TO DO SO MAY RESULT IN DISQUALIFICATION OF THE OFFER.

By signature hereon, the Respondent certifies to the following Affirmation Clauses: All statements and information prepared and submitted in the response to this RFP are current, complete and accurate.

He/she has not given, offered to give, nor intends to give at any time hereafter, any economic opportunity, future employment, gift, loan gratuity, special discount, trip, favor, or service to a public servant in connection with the submitted response. Failure to sign the Execution of Offer or signing it with a false statement shall void the submitted Offer or any resulting contracts.

Neither the Respondent or the firm, corporation, partnership, or institution represented by the Respondent or anyone acting for such firm, corporation, or institution has (1) violated the antitrust laws of the State of Texas under Texas Business and Commerce Code, Chapter 15, or the Federal antitrust laws; or (2) communicated the contents of this Proposal either directly or indirectly to any competitor or any other person engaged in the same line of business during the procurement process for this RFP.

By signing this bid, bidder certifies that if a Texas address is shown as the address of the bidder, bidder qualifies as a Texas Resident Bidder as defined in Texas Administrative Code, Title 34, Part 1, Chapter 20.

Under Section 2155.006(b) of the Texas Government Code (TGC), a state agency may not accept a bid or award a contract including a contract for which purchasing authority is delegated to a state agency, that includes proposed financial participation by a person who, during the five-year period preceding the date of the bid or award, has been: (1) convicted of violating a federal law in connection with a contract awarded by the federal government for relief, recovery, or reconstruction efforts as a result of Hurricane Rita, as defined by Section 39.459, Utilities Code, Hurricane Katrina, or any other natural disaster occurring after September 24, 2005; or (2) assessed a penalty in a federal civil or administrative enforcement action in connection with a contract awarded by the federal government for relief, recovery, or reconstruction efforts as a result of Hurricane Rita, as defined by Section 39.459, Utilities Code, Hurricane Katrina, or any other natural disaster occurring after September 24, 2005; or (2) assessed a penalty in a federal civil or administrative enforcement action in connection with a contract awarded by the federal government for relief, recovery, or reconstruction efforts as a result of Hurricane Rita, as defined by Section 39.459, Utilities Code, Hurricane Katrina, or any other disaster occurring after September 24, 2005. Under Section 2155.006 of the Texas Government Code, the bidder certifies that the individual or business entity named in this bid is not ineligible to receive the specified contract and acknowledges that any contract resulting from this RFP may be terminated and payment withheld if this certification is inaccurate.

Under Government Code § 2155.004, no person who prepared the specifications or this RFP has any financial interest in Respondent's Proposal. If Respondent is not eligible, then any contract resulting from this RFP shall be immediately terminated. Furthermore, "under Section 2155.004, Government Code, the vendor [Respondent] certifies that the individual or business entity named in this bid or contract is not ineligible to receive the specified contract and acknowledges that this contract may be terminated and payment withheld if this certification is inaccurate."

Under Family Code § 231.006, relating to child support obligations, Respondent and any other individual or business entity named in this solicitation are eligible to receive the specified payment and acknowledge that this contract may be terminated and payment withheld if this certification is inaccurate.



**Execution of Offer
Texas Juvenile Justice Department
Secure Residential Specialized Program Services**

Any Proposal submitted under this RFP shall contain the names and social security numbers of person or entity holding at least a twenty-five percent (25%) ownership interest in the business entity submitting the Proposal.

Name:	Social Security Number:
Name:	Social Security Number:
Name:	Social Security Number:

Under Government Code §669.003, relating to contracting with an executive of a state agency, Respondent represents that no person who, in the past four years, served as an executive of the Texas Comptroller of Public Accounts, TJJJ or any other state agency, was involved with or has any interest in this Proposal or any contract resulting from this RFP. If Respondent employs or has used the services of a former executive head of TJJJ or other state agency, then Respondent shall provide the following information: Name of former executive, name of state agency, date of separation from state agency, position with Respondent, and date of employment with Respondent.

The following provision allows an agency to require criminal history background checks of contractor employees and subcontractors who have access to information resources technology of state agencies. Note that under Section 411.1405, Government Code, agencies must have a written policy that has been approved by the Office of the Attorney General relating to the use of background checks before such checks can be performed. If an agency has authority to require other types of background checks and wishes to perform those checks on contractors' employees, a contract provision to authorize such would be needed. Contractor's employees, applicants, interns and volunteers and the employees, applicants, interns and volunteers of Contractor's contractors identified by TJJJ as having access to State of Texas information resources and information resources technologies, as defined in Texas Government Code, 127 Section 411.1405, are subject to periodic criminal history record investigations performed by the Department of Public Safety and the Federal Bureau of Investigation for TJJJ. Individuals whose criminal histories are determined by TJJJ to be unsatisfactory under the policy promulgated by TJJJ, and approved by the Office of the Attorney General shall not be allowed access to State of Texas information resources and information resources technologies and may, at the discretion of TJJJ be precluded from providing services through this Contract. Contractor shall reimburse TJJJ the cost of the criminal history background investigations.

TJJJ is federally mandated to adhere to the directions provided in the President's Executive Order (EO) 13224, Executive Order on Terrorist Financing - Blocking Property and Prohibiting Transactions With Persons Who Commit, Threaten to Commit, or Support Terrorism, effective 9/24/2001 and any subsequent changes made to it via cross-referencing respondents/vendors with the Federal General Services Administration's Systems For Award Management (SAM, <https://www.sam.gov/portal/public/SAM>), which is inclusive of the United States Treasury's Office of Foreign Assets Control (OFAC) Specially Designated National (SON) list. Contents of EO 13224 may be viewed by accessing the following website: <http://www.whitehouse.gov/news/orders/>.

Respondent certifies that the responding entity and its principals are eligible to participate in this transaction and have not been subjected to suspension, debarment, or similar ineligibility determined by any federal, state or local governmental entity and that Respondent is in compliance with the State of Texas statutes and rules relating to procurement and that Respondent is not listed on the federal government's terrorism watch list as described in Executive Order 13224. Entities ineligible for federal procurement are listed at: <https://www.sam.gov/portal/public/SAM>.

Respondent agrees that any payments due under this contract will be applied towards any debt, including but not limited to delinquent taxes and child support that is owed to the State of Texas.

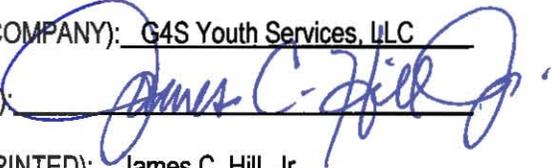
Respondent represents and warrants that the individual signing this Execution of Offer is authorized to sign this document on behalf of the Respondent and to bind the Respondent under any contract resulting from this Offer.



Execution of Offer
Texas Juvenile Justice Department
Secure Residential Specialized Program Services

Pursuant to Section 2262.003 of the Texas Government Code, the state auditor may conduct an audit or investigation of the vendor or any other entity or person receiving funds from the state directly under this contract or indirectly through a subcontract under this contract. The acceptance of funds by the Respondent or any other entity or person directly under this contract or indirectly through a subcontract under this contract acts as acceptance of the authority of the state auditor, under the direction of the legislative audit committee, to conduct an audit or investigation in connection with those funds. Under the direction of the legislative audit committee, the Respondent or other entity that is the subject of an audit or investigation by the state auditor must provide the state auditor with access to any information the state auditor considers relevant to the investigation or audit. Respondent will ensure that this clause concerning the authority to audit funds received indirectly by subcontractors through the vendor and the requirement to cooperate is included in any subcontract it awards. Respondent certified that it has not been an employee of the Texas Juvenile Justice Department within the last twelve (12) months.

Any terms and conditions attached to a solicitation will not be considered unless specifically referred to on this solicitation by submitting a Document identified as Vendor "Terms and Conditions" and listing any exception which is taken. Vendor "Terms and Conditions" may result in disqualification.

RESPONDENT (COMPANY): G4S Youth Services, LLC
SIGNATURE (INK): 
NAME (TYPED/PRINTED): James C. Hill, Jr.

TITLE: President DATE: 02/26/2013

STREET: 6302 Benjamin Road Suite 400

CITY/STATE/ZIP: Tampa, FL 33634

TELEPHONE AND FACSMILE NO: Phone: 813-514-6275 Fax: 813-514-6723

PAYEE IDENTIFICATION NUMBER: _____ OR

FEDERAL TAXPAYER IDENTIFICATION NUMBER: 54-1859903