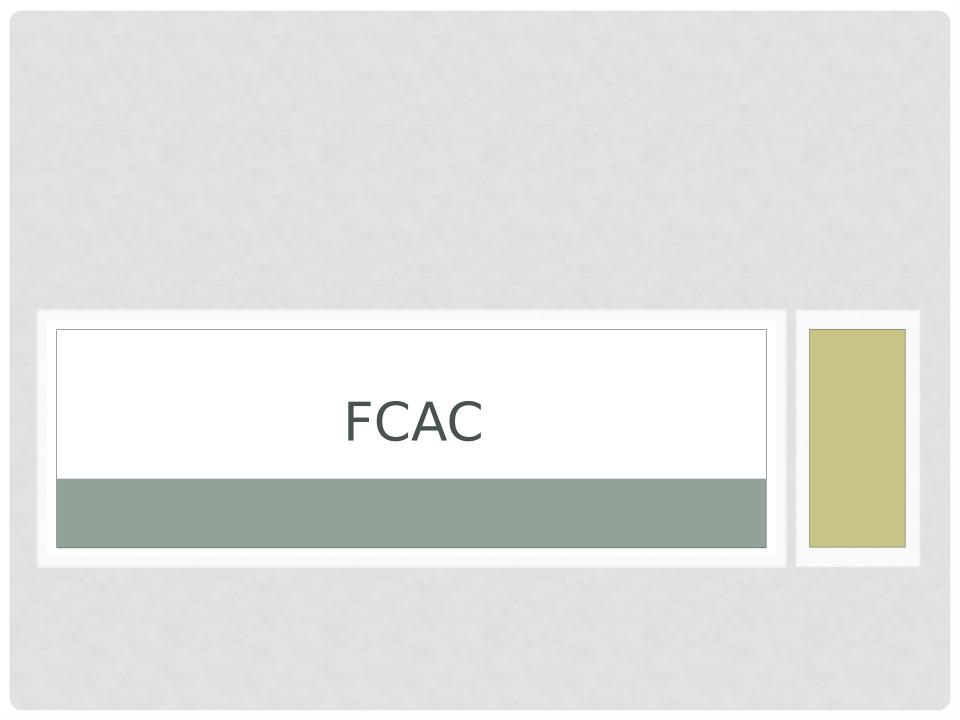
PRETRIAL ACCREDITATION



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COURSE OBJECTIVES

- FCAC Commission
- Initial Accreditation Steps
- The Role of the Accreditation Manager
- The Standards
- File Development
- Proofs of Compliance
- The Accreditation/Assessment Process
- Commission Review

FCAC COMMISSION

- Four Sheriffs appointed by FSA
- Six Command staff level corrections professionals
- Pretrial Services Manager appointed by APPF
- Probation Manager appointed by FACC

COMMISSION FUNCTIONS

- Establish standards
- Award accreditation/reaccreditation
- Oversee staff and committee activities
 - SRIC
 - Outreach
- Resolve assessment issues
- Conduct meetings three times annually

COMMISSION PHILOSOPHY

- Commissions expect agencies to maintain compliance and presumes agencies operate in compliance with their established directives.
- The Commissions' interactions with agencies is non-adversarial and supportive.

FPAP PROGRAM REVIEW

Full Compliance (80 standards)

- 78 mandatory
- 2 optional

THE FLORIDA ACCREDITATION OFFICE ROLES AND FUNCTIONS

- Facilitate Commissions' goals and activities
- Coordinate Commission meetings
- Promote the accreditation programs
- Provide accreditation training
- Serve as information and materials resource

INITIAL STEPS

- CEO and agency commitment
- Appoint/hire an Accreditation Manager
 - team
 - committee
 - agency-wide
- Consult with Program Manager
- Sign an agreement
- Review Policies and Procedures
- Attend Accreditation Manager Training

SELF ASSESSMENT

- Visit accredited agencies/facilities
- Become familiar with standards
- Evaluate facility
- Update written directives
- Construct files (Electronically)

FPAP FEE STRUCTURE

Based on Service Area Population Up to 100,000 \$450 100,001 to 250,000 \$900 250,001 to 500,000 \$1,200 500,001 to 999,999 \$1,800 Over 1 million \$2,400

\$300 Annual software fee* This fee will increase to \$350/year on 1/1/2022

PROGRAM SPECIFICS

- 24 month process for initial accreditation
- 36 month process for reaccreditation
- Accredited for 3 years

THE ROLE OF THE ACCREDITATION MANAGER

ACCREDITATION MANAGER ROLE

- Process Manager
- Liaison within Agency
- Liaison with Program Manager
- Change Agent

PROJECT PLANNING

Process impact evaluation

- standard requirements
- agency current compliance level
- agency resource availability

SET PROJECT PRIORITIES

Determine standards:

- affecting organization
- affecting written directive system
- which require the longest compliance time
- which require the greatest amount of change
- which documentation is straight forward and readily available
- not applicable
- elected exemptions

EVALUATE WRITTEN DIRECTIVE SYSTEM

Does your written directive system meet standards

- format of each directive
- procedures for numbering and revising
- system for keeping directives current
- policy statements
- procedures for activities
- procedure for review and approval

CURRENT POLICY REVIEW

- Completeness
- Clarity of content ease of understanding
- Conflict with other policies
- Conforms with
 - Legal issues
 - Actual practices
 - Best practices

DEVELOP, UPDATE AND REVISE

- Provide format and samples to subject matter experts
- Ensure understanding
- Incorporate standard language, where appropriate

POLICY DEVELOPMENT

- Directives not comprehensive enough
- Copying directives verbatim from other agencies/facilities
- Misinterpreting standards
- Pride of authorship
- Requiring more than is necessary for standard compliance

THE STANDARDS

STANDARDS

Standards provide the description of what must be addressed by the agency. The method of compliance is the agency's responsibility.

THE STANDARDS

- Scope
- Composition
- Applicability

TYPES OF STANDARDS

- Directives, policies, plans, or procedures
 - (This is more than repeating the standard language!!!)
- Observable
- Multiple requirements (bullets)
 - Itemized list of additional elements requiring individual documentation
 - Some bullets may not be applicable (N/A)
- Conditional (If)
 - Standard is only applicable if the condition exists

STANDARD FORMAT

- Standards statement
- Bullets
- Quantified compliance keys
 - Initial and reaccreditation
- Required references
- Assessor guidelines
- Accreditation Manager notes

GLOSSARY

- Contains FPAP specific definitions
- Underlined words in the PowerDMS manual are contained in the glossary.

3.02M

A written directive outlines safety and security procedures for inoffice arrests and physical incidents. All physical incidents are reported within a specified timeframe, and in writing to the appropriate authority. The directive includes:

Bullets

- A. Procedures when active warrants are identified;
- B. Provisions for staff training and protocols for de-escalation; and
- C. Provisions for staff training and protocols for use of force.

Proofs of Compliance

- Written directive addressing elements of the standard (Qty Initial: 1) (Qty Reaccred: 1)
- Proof of training (Qty Initial: 1) (Qty Reaccred: 1 each year)
- Employee interviews

Required References Assessor Guidelines Accreditation Manager Notes

PROPOSED STANDARD CHANGES

Standards Revision Form

- Available on website
- Anyone can submit, but must be approved by agency supervisor
- Due to FAO 30 days prior to SRIC meeting
- SRIC reviews and makes a recommendation to the Commission
- Commission approves, modifies, or rejects
- Effective upon publication, agency must comply within 12 months, unless otherwise directed



GENERAL GUIDELINES FOR FILES

- Create a file for every standard
- If a written directive requires documentation, the documentation should be included in the file
- If a standard does not call for a written directive, but one exists, it should be included in the file

REDACTING INFORMATION

- Redact names and additional information on proofs that may be considered sensitive
- HIPAA
- Do not upload Criminal Histories!

CREATE AND MAINTAIN FILES

Proofs

- Written directives state the agency performs the function described in the standard
- Supporting documentation shows by example the agency actually does the activity stated in the written directive

ELEMENTS OF A FILE

- Written directives
- Supporting documentation
 - Other than written directives
- People to interview
- Factors to observe

WRITTEN DIRECTIVES

- Policy
- Procedure
- Plan
- Rule
- General/Special Order
- State Law/County or Municipal Ordinances
- Collective Bargaining Agreements

SUPPORTING DOCUMENTATION

- Memorandums
- Computer printouts
- Job descriptions/JTAs
- Letters from citizens
- Logs/rosters/evaluations
- Budget documents
- Instructional material
- Police reports
- Incident reports

OBSERVATIONS/INTERVIEWS

- Activities
- Equipment
- Security
- Facility
- Policies
- Interviews

PERSONNEL INTERVIEWS

- First Appearance
- Key Personnel in their work space
- Interaction with agency members is critical
- Inmates (FCAC only)

NEW/AMENDED STANDARDS POLICY

- An agency scheduled for an assessment within one year of the publication date has two options:
 - Meet new standard requirements by the assessment date; or
 - Delay compliance with new standards until after the assessment has occurred.

WHAT IS A PROOF OF COMPLIANCE?

COMPLIANCE

A file is in compliance when:

- Proofs demonstrate agency's ability to meet all standard requirements
- Interviews with key personnel prove compliance
- All time-sensitive requirements are completed
- Observe required equipment, security measures, etc.

PROOF GUIDELINES, INITIAL

Proofs should demonstrate compliance for the twelve month period prior to the assessment, or from the date of the policy, if in place less than 12 months.

PROOF GUIDELINES, REACCRED

- Proofs are from assessment date to assessment date
- Proofs for policies issued during the reaccreditation cycle must demonstrate compliance from the date of the policy only if the standard changed
 - Agency must still show 3 years of proofs if the standard did not change

ACCREDITATION AND ASSESSMENT PROCESS

PREPARE YOUR EMPLOYEES

- Prepared employees are confident employees
- Conduct agency inspections
- Spotlight agency stars
- Keep everyone updated and involved
- Don't waste time on nay-sayers

TIMELINES

- Start preparing 6 12 months prior to assessment
- Coordinate with Program Manager to schedule assessment dates (allow some flexibility)
- Ensure all fees are paid
- Review all files and complete an internal technical review (Check Computers)
- Perform a facility inspection visit roll call
- HAVE A MOCK ASSESSMENT!!

MOCK ASSESSMENT

- It should be a thorough and honest review of the agency and is intended to prepare them for their formal assessment
- It is <u>NOT</u> to be adversarial or intimidating at any time
- Notify your Program Manager when mock is scheduled and identify your assessors

MOCK ASSESSMENT

- Suggest ways to enhance files or meet facility requirements that are standards related
- Analyze every aspect pertaining to standards
- Facilitate changes for accreditation manager
- Assist with follow-up questions

FORMAL ASSESSMENT

- Approve supplied proofs of compliance
- Verify continued compliance with standards for current accreditation timeframe
- Read previous final report
- Confirm time sensitive requirements were completed

ENTRANCE INTERVIEW

- Led by Team Leader
- Introductions
- Assessor experience/background
- Commission philosophy
 - Non-adversarial
 - Non-disruptive
- Expectations

AGENCY ORIENTATION

Personnel introductionsAssessor workspace area



AGENCY TOUR

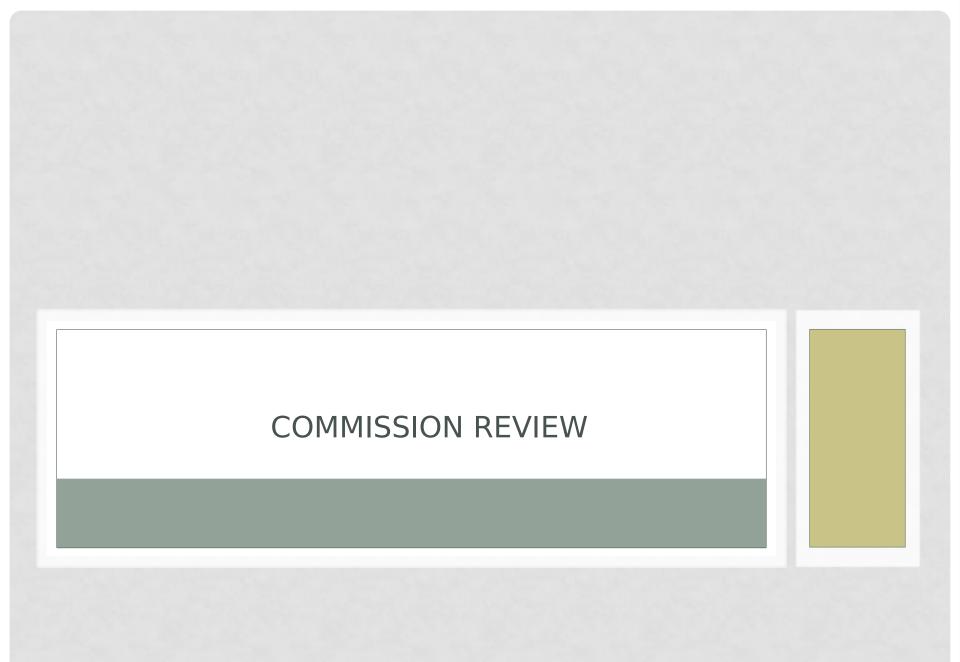
- Familiarize assessors with agency (if applicable)
- Observable standards
- Standard equipment
- Inspection of work areas

EXIT INTERVIEW

- Led by Team Leader
- Give observations/findings of visit
- Recommendations to Commission
- Exit interview should match the final report
- No misunderstandings by the agency
- Final report will be sent to CEO by staff, NOT assessors

FINAL REPORT

- Elements of the final report:
 - Agency profile
 - Assessment review summary
 - Compliance tally
 - Corrective Actions
 - Standards Changed Status
 - Noncompliance Standards
 - Chapter Summaries
 - Exemplary Project
 - Conclusions and Recommendations



AGENCY REVIEW PROCESS





QUESTIONS???!