



MHMR Tarrant YES Waiver Provider Services

Provider Manual

May, 2016

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INTRODUCTION

Welcome to MHMR Tarrant. We are pleased to recognize you as a member of our Provider Network and look forward to enjoying a long and mutually satisfying contractual relationship with you.

The purpose of this Provider Manual is to educate you about the policies and procedures of MHMR TARRANT. We ask that you read this material carefully and discuss any questions you may have with our Director of Contracts Management/Provider Relations, Kevin McClean, at (817) 569-4456.

MHMR TARRANT is staffed by a team of highly dedicated professionals experienced in managed care and the provision of services for persons who are diagnosed with a severe emotional disturbance or of mental health diagnosis according to the current Diagnostic and Statistical Manual (DSM). MHMR TARRANT is dedicated to providing high quality, innovative, and cost-effective management of behavioral health services.

Our philosophy is propelled by a strong commitment to service excellence supported by management flexibility and accountability. Our on-going objective is to continually refine our system so that we can excel in the delivery of quality services as we balance the best interests of our individuals, providers, and employees.

MHMR TARRANT clearly understands that open communication must exist between our service providers and our organization in order for us to be able to provide individuals in our community with the best possible care. We, therefore, invite you to share your perceptions, needs, and suggestions with our Director of Contracts Management/Provider Relations, who will also, from time to time, ask you to respond to surveys to help us identify other opportunities to improve our services and to assess your satisfaction as a member of our provider network.

We will do all that we can to support your entry into our system and assure that your continued participation in our network will be beneficial for all concerned.

In this Provider Manual, references may be made to individuals, clients, and covered individuals. All of these terms are to be considered interchangeable.



MISSION STATEMENT & VALUES

Mission Statement of MHMR Tarrant:

To enhance the mental health and intellectual development of people in our community.

Our Values:

- **Respect** for persons and families who are active in planning and evaluating their services
- **Recovery** as a life-long process of better health and well-being
- **Success** as positive outcomes for each person
- **Choice and participation** of persons and their families in the planning process
- **Inclusion** in the community through services that promote growth and independence
- **Safe, ethical and cost-effective services**
- **Best practices** in current research in medical, psychosocial and organizational fields
- **Collaboration** with other organizations for better services and efficiencies

ORGANIZATIONAL STRUCTURE

The organizational structure of MHMR Tarrant includes the Behavioral Health (BH) and Intellectual and Developmental Disabilities (IDD) Community Advisory Committees. These two committees are composed of individuals from the community, including individuals, who have a vested interest in assuring that quality services are readily available to our individuals. The committees are empowered to provide input into the planning process that will lead our organization into the future. Both of the committees report to our Board of Trustees.



Our Chief Executive Officer is accountable to our Board of Trustees and directs the Authority component of our organization. Chiefs who report directly to the Chief Executive Officer: Behavioral Health, Early Childhood Intervention and Intellectual and Developmental Disabilities Services, Chief Financial Officer, Chief of Organizational Development and the Managing Director of Information Services. Behavioral Health Services incorporates Mental Health Services and Substance Use Disorder Services.

Currently, MHMR TARRANT has providers in the areas of Behavioral Health Services, Intellectual and Developmental Disabilities Services, and Early Childhood Intervention Services. We anticipate continued growth in expanding our service providers from the community.

IMPORTANT POINTS TO REMEMBER

PROVIDER'S RESPONSIBILITIES

It is the provider's responsibility to render services to MHMR TARRANT individuals in accordance with the terms of the contract. The provider is required to render these services to MHMR TARRANT individuals in the same manner, adhering to the same standards, and within the same time availability as offered to all other individuals.



MHMR TARRANT does not guarantee that a MHMR TARRANT consumer or any number of MHMR TARRANT individuals will utilize any particular provider. Each consumer is given information regarding all providers in the provider network and then makes the choice of provider(s).

PROVIDER RESPONSIBILITIES

An individual or agency entering into a provider agreement to provide services is responsible for:

1. Maintaining a list of current personnel providing Waiver provider services or performing related activities;
2. Maintaining a list of the service(s) provided by personnel;
3. Identifying staff performing dual roles; and
4. Providing documentation to MHMR TARRANT of the procedures for:
 - a. Record keeping
 - b. Verifying staff qualifications; and
 - c. Criminal history and abuse registry checks.

Case Assignments:

When you are assigned a case for YES Waiver Services, you will receive an email or phone correspondence stating the new assignment of a youth and the identified Community Living Support (CLS) and Wraparound Facilitator. The subject line will say; **YES WAIVER CASE ASSIGNMENT.** The CLS will initiate communication with the specialized therapist to schedule the first and following appointments. The Wraparound Facilitator will be your primary contact for case management and wraparound services. They are in charge of monitoring the intervention service delivery and setting up monthly Wraparound Team Meetings.

Billing:

Contractor will submit services using the Agency provided electronic progress note. Program Director or Clinical Specialist will provide training on documentation format prior to delivering services. Payment for services rendered will be paid out once the progress note has been received and processed for billing. Progress notes are to be transmitted to MHMR for billing within 5 business days of service delivery.

Transmission of progress notes:

At MHMR, we abide by the HIPAA privacy laws; we respect the confidentiality and privacy of our consumers. HIPAA stands for the Health Information and Portability Accountability Act governing privacy and security of personal health information and any identifiable information about an individual. To report a HIPAA privacy violation, contact Client Records at MHMR Tarrant County 817-569-4382.

In following with HIPAA privacy laws, transmission of progress notes will be allowed through **encrypted email or hand delivered weekly:**

To: Program Director: Brandice Mueller
The Youth Center
1527 Hemphill St.
Fort Worth, TX 76104

Office: (817) 569-4201

Cell: (817) 901-0346

Email: Brandice.Mueller@mhmrtc.org

THE YOUTH EMPOWERMENT SERVICES (YES) WAIVER

The Health and Human Services Commission (HHSC) and the Department of State Health Services (DSHS) developed the Youth Empowerment Services (YES) Waiver, which provides comprehensive home and community-based mental health services to youth between the ages of 3 and 18, up to a month before a youth's 19th birthday, who have a serious emotional disturbance. The YES Waiver not only provides flexible supports and specialized services to children and youth at risk of institutionalization and/or out-of-home placement due to their serious emotional disturbance, but also strives to provide hope to families by offering services aimed at keeping children and youth in their homes and communities.

DSHS has created a manual explaining the program structure and the requirements to be met by providers. As an interested provider of MHMR Tarrant YES Services, DSHS expects you to be informed of the YES Waiver requirements. Be sure to familiarize yourself with the following information in this local manual and the YES Manual found at <http://www.dshs.state.tx.us/mhsa/yes/>

Specialized Therapies and Nutritional Counseling:

The unit designation for each specialized therapy is 15-minutes. One 15-minute increment shall be billed as one unit. In order to bill for a unit, the entire unit shall be provided to the participant, face-to-face.

Service Description:

Services to Covered Individuals are to assist them in meeting recovery goals. The intent of these services is to maintain or improve health, welfare, and/or effective functioning in the community.

Art Therapy - Through the use of art media, the creative process, and the resulting artwork, art therapy assists the Covered Individual in exploring feelings, reconciling emotional conflicts, fostering self-awareness, managing behavior, developing social skills, improving reality orientation, reducing anxiety, and increasing self-esteem.

An art therapy provider must be:

1. A licensed professional with documented training and experience relative to Art Therapy. This may include a: clinical social worker; professional counselor; marriage and family therapist; registered nurse; vocational nurse; physical therapist; occupational therapist; or dietitian; or
2. Certified by the Art Therapy Credentials Board (AT-BC).

Music Therapy - Musical or rhythmic interventions are utilized to assist the Covered Individual in accomplishing the restoration, maintenance, or improvement of social or emotional functioning, mental processing, or physical health. Music therapy provides a Covered Individual the opportunity to move from isolation into active participation through an increase in verbal and nonverbal communication, social expression, behavioral and social functioning, and self-awareness. A music therapy provider must be:

1. A licensed professional with documented training and experience relative to Music Therapy. This may include a: clinical social worker; professional counselor; marriage and family therapist; registered nurse; vocational nurse; physical therapist; occupational therapist; or dietitian; or
2. Certified by the Certification Board for Music Therapists (MT-BC).

Animal-Assisted Therapy - In Animal Assisted Therapy, animals are utilized in goal directed treatment sessions, as a modality, to facilitate optimal physical, cognitive, social and emotional outcomes of an individual such as increasing self-esteem and motivation, and reducing stress. Animal-Assisted Therapy is delivered in a variety of settings by specifically trained individuals in association with animals that meet specific criteria and in accordance with guidelines established by the American Veterinary Medical Association and either:

1. A licensed professional with documented training and experience relative to Animal Assisted Therapy. This may include a: clinical social worker; professional counselor; marriage and family therapist; registered nurse; vocational nurse; physical therapist; occupational therapist; or dietitian; or
2. Obtain certification specific to the type of program and animal(s) involved.

Recreational Therapy - The prescribed use of recreational and other activities as a treatment intervention is designed to restore, remediate, or habilitate improvement in a participant's functioning and independence, while reducing or eliminating the effects of the Covered Individual's serious emotional disturbance.

A recreational therapy provider must be:

1. A licensed professional with documented training and experience relative to Recreational Therapy. This may include a: clinical social worker; professional counselor; marriage and family therapist; registered nurse; vocational nurse; physical therapist; occupational therapist; or dietitian; or
2. Certified by the National Council of Therapeutic Recreation Certification (CTRS); or
3. Certified as a Texas Certified Therapeutic Recreation Specialist (TRS/TXC).

Nutritional Counseling - Nutritional counseling assists the Covered Individual in meeting basic and/or special therapeutic nutritional needs, including, but not limited to, counseling in nutrition principles, dietary plans, and food selection and economics.

Nutritional counseling must be provided by a person who is a registered, licensed, or provisionally licensed dietitian by the Texas Board of Examiners.

Licensed professionals, with documented training and experience relative to the specific service, may include a: clinical social worker; professional counselor; marriage and family therapist; registered nurse; vocational nurse; physical therapist; occupational therapist; or dietitian.

Respite Services:

1. In-Home Respite
2. Camp
3. Licensed Child Care Center
 - a. Preschool (ages 3 - 5)
 - b. School Age (ages 6-18)

The unit designation is one hour. One hour shall be billed as one unit. In order to bill for a unit, the entire unit shall be provided to the participant, face-to-face.

1. Department of Family and Protective Services (DFPS) Residential Child Care

The unit designation is daily. Any portion of a 24-hour period shall be permitted to be billed as one unit.

Service Definition:

Respite is furnished on a short-term basis because of the absence or need for relief of those persons who normally provide care for the Covered Individual.

Respite Types / Locations:

All settings must be located within the State of Texas.

In-Home Respite - In-home respite service is provided on a short-term basis because of the absence of, or need for relief for, the legally authorized representative (LAR) or other primary caregiver of a Covered Individual.

- Provided in the Covered Individual's home or place of residence; or
- Private residence of a respite care provider, if that provider is a relative of the Covered Individual, other than the parents, spouse, legal guardian, or Legally Authorized Representative (LAR).

Camp - Out-of-home respite service at a camp is provided on a short-term basis because of the absence of, or need for relief for, the legally authorized representative or other primary caregiver of a Covered Individual.

- Day or overnight camps accredited by the American Camping Association or;
- Day or overnight camps licensed by DSHS – 25 Tex. Admin. Code §§265.11 – 265.24

Licensed Child Care Center - Out-of-home respite service at a licensed child care center (LCCC) is provided on a short-term basis because of the absence of, or need for relief for, the legally authorized representative or other primary caregiver of a Covered Individual.

- Preschool (ages 3 - 5) or School Age (ages 6-18)
- Child-care center must be licensed by DFPS – 40 Tex. Admin. Code Ch. 746

DFPS Residential Child Care Residential Care Facility - Out-of-home respite service at a residential child care is provided on a short-term basis because of the absence of, or need for relief for, the legally authorized representative or other primary caregiver of a Covered Individual.

- Respite service provider must be a General Residential Operation (GRO) licensed with the Department of Family and Protective Services, in accordance with – 40 Tex. Admin. Code §748.4261

Other Standards:

1. Respite care providers must be at least 18 years of age, have a current driver's license, and pass the criminal history and abuse registry checks.
2. Respite services may be provided by a relative of the waiver recipient other than the parents, spouse, legal guardian, or Legally Authorized Representative (LAR).
3. The MHMR of Tarrant County must approve and provide ongoing oversight of respite settings to ensure the safety and appropriateness of the setting.
4. Respite care providers must complete training as required by DSHS.
5. The out-of-home respite provider must have a functional landline phone on the premises.

REFERRAL AND AUTHORIZATION PROCESSES

Referral Process

There is no guarantee that Provider will be used by a Covered Individual or any number of Covered Individuals. The LPHA will offer the Covered Individual a choice of providers from the list of contracted Providers. Covered Individuals will document their choice and are allowed to change Providers.

Provider will not engage in case finding or otherwise locating individuals to receive rehabilitative services and is prohibited from offering any gift with a value in excess of \$10 to potential clients and from soliciting potential clients through direct-mail or by telephone.



DOCUMENTATION



Provider must maintain records necessary to verify services delivered and billed to MHMR Tarrant.

Provider must additionally maintain records including the following:

1. Names of all Covered Individuals enrolled with Provider
2. Evidence of licensure, certification or accreditation, as required
3. Evidence of Life Safety Code or ADA inspection and compliance, if applicable
4. Evidence of insurance coverage
5. Evidence of criminal history checks of staff
6. Evidence of required staff training
7. If Covered Individuals are paid by Provider, evidence of compliance with Department of Labor (DOL) regulations regarding salaries and pay
8. Doctor's orders and medication records if medications are administered by Provider staff, if applicable.
9. Fire Marshall inspection and results of fire drills
10. Evidence of annual health department inspection for day programs which serve or prepare food for 10 or more Covered Individuals.

Provider will retain records for a minimum of seven (7) years.

Provider will receive, store, process, or otherwise deal with client information, if any, accessed or generated during services in compliance with Chapter 414, Subchapter A, Client Identifying Information, of Title 25 of the Texas Administrative Code.

Service Documentation

The Provider is responsible for documenting all services. **All service documentation must meet YES Manual requirements. It is against the rules to reimburse for travel.**

Appeal of Denial

If a claim is denied and Provider feels the claim should be paid, Provider must resubmit the claim and appeal the decision within 30 days of denial. Appeals or resubmission after the 90-

day window for filing with Medicaid will not be paid. Appeals of claim denials must be made in writing to:

Kevin McClean, Director of Contracts Management/Provider Relations

**MHMR of Tarrant County
P.O. Box 2603
Fort Worth, Texas 76113
providerrelations@mhmrtc.org**

STAFF TRAINING

Overview

If Provider is licensed or accredited by a state or federal regulatory agency, some training requirements may be waived. In such cases, the Provider is required to provide external audit reports related to accreditation, licensure or certification. If Provider is not licensed or accredited, the Provider is required to provide training to all staff working with YES Waiver Participants.

Training noted as such **in the YES Waiver Manual and listed above in the section entitled 2300.2 MHMR Tarrant Program Training Requirements** will be provided through the MHMR TARRANT Training Center or obtained from another entity. Training obtained from other entities must be related to the required job competencies as determined by the Texas Administrative Code and the Texas Department of State Health Services. Providers may submit training policies, procedures and materials to verify that training requirements are met. Providers may receive assistance, upon request, from the Local Authority with regard to training. The Local Authority will charge for training provided to Provider staff in the classroom.

Scheduling Training with MHMR TARRANT

Provider is responsible for ensuring all staff receives the required training prior to contact with Local Authority clients. Provider may register staff for classes by email to at least one week prior to class scheduled to training.request@MHMR_Tarrant.org or calling 817-569-4342. When scheduling training please provide a list of the names of those who will attend and which classes they will be attending. A confirmation will be



sent when class is scheduled, Provider will be billed for any persons registered for classes who do not attend unless The Training Center receives a cancellation notice by fax at least twenty-four (24) hours prior to the scheduled class MHMR TARRANT also offers several online courses through Relias Learning.

While all training is offered through the MHMR TARRANT Training Center, Providers may take many of the required courses elsewhere. If the

Provider elects to complete the training elsewhere, the Provider is responsible for the following:

- A) Ensuring the training meets the requirements set forth in the YES Provider Manual.**
- B) Keeping a record of the training for each individual staff including but not limited to
 - 1) The date of the training**
 - 2) The name and credentials of the person who provided the training****

- 3) A roster of persons who attended the training**
 - 4) Materials that describe the content of the training**
 - 5) A certificate of course completion and an attestation of competency in course materials**
- *MHMR TARRANT Contract Monitoring department may request training records at any time for any staff to verify compliance with the Provider's contract.**

Provider, its employees and agents must receive, read, and understand the MHMR Tarrant Compliance Plan. Provider will agree to abide by the principles contained in the compliance plan, including its responsibility to report any known or suspected violations of the plan.

CREDENTIALING

All staff must complete the credentialing process.

Provider and staff may not provide professional services until credentialed.

2300 MHMR Tarrant Credentialing and Enrollment

Credentialing occurs prior to any offer of a contract or service provider agreement.

1. Roster of Staff and Background/Credentialing Applications- Your Open Enrollment application will be reviewed by the Provider Relations/Contract Management Department and when satisfactory, will then be sent on to Contract Monitoring/Credentialing. We will ask you to provide a complete roster of your staff, including yourself, who will be providing direct contact with the Waiver Participants. You and your staff will be required to complete an initial Current Criminal Background Check (TDPS), Employee Misconduct Registry and annually thereafter. If you and / or your staff are professionally licensed or certified we will also require you to complete the Texas Standardized Credentialing Application (TSCA).

At a minimum, the provider will provide to the MHMR TARRANT reports of staff added with credentialing status, results of internal reviews of risk incidents, quality and billing audits and results of audits by any external licensing or accrediting bodies.

2300.1 MHMR Tarrant Criminal History and Background Checks

As part of the credentialing process with the Department of State Health Services (DSHS), an entity interested in providing YES Waiver (Waiver) services must allow to be done a criminal history check and abuse registry check on persons who will have substantial contact or potentially substantial contact with a Waiver participant.

2300.2 MHMR Tarrant Program Training Requirements

The MHMR Tarrant must ensure that prior to providing Waiver services and/or participating on Child and Family Team, all MHMR Tarrant staff member and direct service providers receive program training in accordance with the following:

- **YES WAIVER**
- **SYSTEMS OF CARE AND WRAPAROUND**
- **RESTRAINT -- LIMITED USE OF PHYSICAL RESTRAINT**
- **TRAINING**
- **REPORTING**
- **POLICIES AND PROCEDURES**

MHMR TARRANT is responsible for training all direct service providers on the MHMR TARRANT's policies and procedures, including, but not limited to:

- reporting of abuse,
- neglect or exploitation (ANE),

- behavior management,
- crisis and safety planning,
- critical incident reporting,
- restraint,
- first aid and
- CPR,

- **CRITICAL INCIDENT REPORT**

State Reporting and Local incidents are mandated to report.

If any of the items below occur, the first provider with the knowledge of the incident makes a report to the Wraparound Facilitator within 24 hours of finding out an incident occurred.

Examples of incidents required to be reported include, but are not limited to:

1. **Medical injuries;**
2. **Hospitalizations;**
3. **Behavioral or psychiatric emergencies (suicidal or homicidal ideations, gestures or attempts;**
4. **Allegations of violation(s) of participant rights;**
5. **Allegations of abuse, neglect, or exploitation;**
6. **Criminal activity;**
7. **Conduct involving restraints;**
8. **Property loss or damage;**
9. **Vehicle loss or damage;**
10. **Medication errors and pharmacy errors;**
11. **Participant departure;**
12. **Legal/juvenile justice department involvement; or**
13. **Death.**

Compliance:

MHMR Tarrant is committed to providing our consumers with ethically sound, efficient and effective quality services. It is your duty to assist in the prevention, detection and correction of any instances of noncompliance with applicable federal, state and private health care plans. Call to report your compliance concerns to the

COMPLIANCE ACTION LINE:

1-800-500-0333

Consumer/Individuals being served Complaints: Providers are required to inform consumers that they have the right to report any complaints about the services they are receiving to the **Consumer Complaint Reporting Line: (817) 569-4367 or 1-888-636-6344 (toll free)**

Within one hour of witnessing or becoming aware of possible abuse/neglect/exploitation each staff person is responsible for reporting the incident to the

Texas Department of Family and Protective Services:

1-800-647-7418 or www.txabusehotline.org

COMPLAINTS

All **provider complaints** and/or suggestions are to be communicated to **Provider Relations: (817) 569-4456**

To file a **complaint from an individual being served**, contact the DSHS Consumer Services and Rights Protection Unit Monday through Friday, from 8:00 a.m. to 5:00 p.m. at:

Toll Free: 1-800-252-8154

Local: 512-206-5760

Complaints can also be submitted in writing to: Texas Department of State

Health Services

Office of Consumer Services and Rights Protection

Mail Code 2019

P.O. Box 12668

Austin, Texas 78711-266

CONTRACT MONITORING

The Behavioral Health Quality Management / Contract Monitoring Department will conduct a variety of reviews, including but not limited to:

- Site Assessments, Infection Control, Safety, and Environmental Reviews
- Verification of required staff training
- Verification of credentialing of staff
- Special reviews based on complaints or other client related incidents

The Local Authority contact person for Quality Management / Contract Monitoring Reviews is:

Tim Wells, BH Quality Management Manager, (817) 569-4458

SANCTIONS, APPEALS AND CONTRACT TERMINATION

MHMR of Tarrant County will take punitive action for actions that pose a hazard to Covered Individuals or potentially violate Service guidelines.



Sanctions

MHMR of Tarrant County will impose sanctions if Provider does not maintain quality services in compliance with state and federal standards. Decisions regarding sanctions are reviewed by the Quality Management Committee. Notice of Default or Notice of Termination will be sent by certified mail to the Provider. Sanctions may include, but are not limited to:

- a. Immediate termination of contract
- b. Withholding of new referrals
- c. Withholding of outstanding payments, in whole or in part
- d. Request for recoupment of funds paid to Provider for services
- e. Fines, charge backs or offsets against future payments
- f. Suspension of contract and referral of existing Covered Individuals elsewhere, pending appeal

Appeal Process

If Provider wishes to appeal a decision by MHMR of Tarrant County to impose a sanction, Provider must notify the Director of Contracts Management/Provider Relations in writing within seven (7) days of receipt of a Notice of Default or Notice of Termination of the request for appeal. If Provider has additional information, not taken into consideration at the time the Sanction was imposed, documentation must be submitted with the request for appeal. Correspondence must be sent to:

Kevin McClean, Director of Contracts Management/Provider Relations

MHMR of Tarrant County

P.O. Box 2603

Fort Worth, Texas 76113

providerrelations@mhmrtc.org

Appeals of Sanctions will be reviewed by the Community Advisory Committee. Provider may be present at the meeting at which the appeal is discussed.

Contract Termination

If the contract is terminated, Provider is expected to cooperate with MHMR TARRANT in the transfer of Covered Individuals to other providers.

REFERENCES

Texas Administrative Code:

Rules of the Texas Department of Mental Health and Intellectual and Developmental Disabilities Title 25, Part II

..... Relevant Rules Grid

..... Chapter 404, Subchapter E..... Rights of Persons Receiving Mental Health Services

..... Chapter 414, Subchapter A..... Client-Identifying Information

..... Chapter 403, Subchapter B..... Charges for Community-Based Services

Chapter 405, Subchapter K Deaths of Persons Served by TDMHMR Facilities or Community Mental Health and Intellectual and Developmental Disabilities Centers (rev.6/95)

Chapter 414, Subchapter L..... Abuse, Neglect, and Exploitation in Local Authorities and Community Centers

Chapter 411, Subchapter G..... Community MHMR Centers

Chapter 412, Subchapter C..... Charges for Community Services

Chapter 412, Subchapter G..... Mental Health Community Services Standards

Chapter 412, Subchapter I..... Mental Health Case Management Services

Chapter 414, Subchapter K..... Criminal History Clearances

Chapter 419 A MENTAL HEALTH SERVICES--MEDICAID STATE OPERATING AGENCY RESPONSIBILITIES [YOUTH EMPOWERMENT SERVICES \(YES\)](#)
Most current version of the Youth Empowerment Services (YES) Manual.