County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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December 13, 2010

To: Supervisor Michael D. Antonovich, Mayor
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Supervisor Don Knabe

From: Patricia S. Ploehn, LCSW
Director

PERFECT IMAGE YOUTH CENTER GROUP HOME PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

In accordance with your Board's April 14, 2009 motion, we are informing your Board of the results of a group home compliance review.

Perfect Image Youth Center is located in Riverside County and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to Perfect Image Youth Center's program statement, its stated goal is "to provide a comprehensive array of services in an environment that the youth will experience as being safe, protective, nurturing, appropriately structured, and responsive to their individual needs." Perfect Image Youth Center is licensed to serve a capacity of six children, ages 13 through 18.

The Out-of-Home Care Management Division (OHCMD) conducted a review of the Perfect Image Youth Center in December 2009, at which time the agency had one six-bed site and three placed DCFS children. All three children were females. For the purpose of this review, all placed children were interviewed and their case files were reviewed. The placed children's average overall length of placement was six months, and their average age was 13. Six staff files were reviewed for compliance with Title 22 regulations and contract requirements.

One child was on psychotropic medication. We reviewed her case file to assess timeliness of psychotropic medication authorizations and to confirm that medication logs documented correct dosages were being administered as prescribed.

SCOPE OF REVIEW

The purpose of this review was to assess Perfect Image Youth Center's compliance with the contract and State regulations. The visit included a review of Perfect Image Youth Center's program statement, administrative internal policies and procedures, all placed children's case files, and a random sampling of personnel files. A visit was made to the facility to assess the quality of care and supervision provided to the children, and we conducted interviews with the children to assess the care and services they were receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

SUMMARY

Perfect Image Youth Center was providing adequate care to DCFS placed children, and the services were provided as outlined in the agency's program statement. The children interviewed stated that the staff treated them with respect and dignity and services were made available to them.

The direct care staff stated that the needs of the children were met in a timely fashion by the administrative staff. However, the Group Home was in full compliance with only three of nine sections of our compliance review, and there were multiple elements needing improvement in each of the other six sections. The Group Home complied with one of the eight elements reviewed under the Section Program Services.

At the time of the review, the Group Home needed to address several physical plant deficiencies, none of which posed a safety hazard to any placed children. The Group Home further needed to maintain runaway procedures pursuant to the contract and ensure that comprehensive allowance logs were fully maintained. The Group Home also needed to ensure that all children were assessed within thirty days of placement, develop comprehensive Needs and Service Plans (NSP) and ensure that monthly contact with the DCFS CSW was documented. Additionally, the Group Home needed to maintain current copies of IEPs and report cards in the children's files. Further, the Group Home needed to provide all children with the $50 required minimum monthly clothing allowance and minimum weekly allowance and encourage and assist children in creating and maintaining photo albums/life books. The Group Home also needed to ensure all staff members had criminal clearances, all staff member files had copies of current California driver licenses and signed copies of Group Home policies and procedures. The Group Home also needed to ensure that all staff members received on-going training as required per Title 22 regulations and all staff members received emergency intervention training per the Group Home's Program Statement.

Perfect Image Youth Center was receptive to implementing some systemic changes to improve its compliance with regulations and the Foster Care Agreement.

NOTABLE FINDINGS

The following are the notable findings of our review:

- In accordance with the DCFS contract, the Group Home did not maintain runaway procedures.

- The Group Home did not maintain comprehensive allowance logs. The children were not provided with the required monthly clothing and weekly monetary allowances.

- The Group Home did not always ensure children were assessed for needed services within 30 days of placement and had current and comprehensive Needs and Services Plans (NSP), and did not always document contact with DCFS social workers.

- The Group Home did not maintain staff files as required by Title 22 regulations and the Group Home's program statement. One staff member did not have a criminal clearance; another staff member's file was missing a current copy of the employee's California driver license; one staff member did not sign copies of the Group Home policies and procedures; one staff did not have current CPR and First-Aid training; staff members reviewed did not have on-going training as required per Title 22 regulations; and three staff members did not have emergency intervention training per the Group Home's Program Statement.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held on December 30, 2009:

In attendance:

Sandra Cromer, Executive Director, Perfect Image Youth Center and Greta F. Walters, Monitor, DCFS OHCMD.

Highlights:

The Executive Director expressed an understanding of our findings and recommendations. She stated that she had no comments for the report, but was working on implementing the recommendations.

As agreed, Perfect Image Youth Center provided a timely written Corrective Action Plan (CAP) addressing each recommendation noted in this compliance report. The CAP is attached.

As noted in the monitoring protocol, a follow up visit will be conducted to address the provider's approved CAP and assess for full implementation of recommendations.

If you have further questions, please call me or your staff may contact Armand Montiel, Board Relations Manager, at (213) 351-5530

PP:LP:KR
EAH:BB:gfw

Attachment

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Donald H. Blevins, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Bobby Turner, President, Board of Directors, Perfect Image Youth Center
Sandra Cromer, Executive Director, Perfect Image Youth Center
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional, Manager, Community Care Licensing

Perfect Image Youth Center Group Home
CONTRACT COMPLIANCE MONITORING REVIEW - SUMMARY

16761 Washington Street
Riverside, CA 92504
License Number: 336408586
Rate Classification Level: 9

	Contract Compliance Monitoring Review	Findings: December 2009
I	**Licensure/Contract Requirements** (9 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Stabilization to Prevent Removal of Child	2. Full Compliance
	3. Transportation	3. Full Compliance
	4. SIRs	4. Full Compliance
	5. Compliance with Licensed Capacity	5. Full Compliance
	6. Disaster Drills Conducted	6. Full Compliance
	7. Disaster Drill Log Maintenance	7. Full Compliance
	8. Runaway Procedures	8. Improvement Needed
	9. Allowance Logs	9. Improvement Needed
II	**Facility and Environment** (6 Elements)	
	1. Exterior Well Maintained	1. Improvement Needed
	2. Common Areas Maintained	2. Improvement Needed
	3. Children's Bedrooms/Interior Maintained	3. Improvement Needed
	4. Sufficient Recreational Equipment	4. Full Compliance
	5. Sufficient Educational Resources	5. Full Compliance
	6. Adequate Perishable and Non Perishable Food	6. Full Compliance
III	**Program Services** (8 Elements)	
	1. Child Population Consistent with Program Statement	1. Full Compliance
	2. DCFS CSW Authorization to Implement NSPs	2. Improvement Needed
	3. Children's participation in the Development of NSPs	3. Improvement Needed
	4. NSPs Implemented and Discussed with Staff	4. Improvement Needed
	5. Therapeutic Services Received	5. Improvement Needed
	6. Recommended Assessments/Evaluations Implemented	6. Improvement Needed
	7. DCFS CSWs Monthly Contacts Documented	7. Improvement Needed
	8. Comprehensive NSPs	8. Improvement Needed

IV	**Educational and Emancipation Services** (4 Elements) 1. Emancipation/Vocational Programs Provided 2. ILP Emancipation Planning 3. Current IEPs Maintained 4. Current Report Cards Maintained	 1. N/A 2. N/A 3. Improvement Needed 4. Improvement Needed
V	**Recreation and Activities** (3 Elements) 1. Participation in Recreational Activity Planning 2. Participation in Recreational Activities 3. Participation in Extra-curricular, Enrichment and Social Activities	 Full Compliance (All)
VI	**Children's Health-Related Services (including Psychotropic Medications)** (9 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychotropic Evaluation Review 3. Medication Logs 4. Initial Medical Exams Conducted 5. Initial Medical Exams Timely 6. Follow-up Medical Exams Timely 7. Initial Dental Exams 8. Initial Dental Exams Timely 9. Follow-up Dental Exams Timely	 Full Compliance (All)
VII	**Personal Rights** (11 Elements) 1. Children Informed of Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Staff Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed about Psychotropic Medication 11. Children Aware of Right to Refuse Psychotropic Medication	 Full Compliance (All)

VIII	**Children's Clothing and Allowance** (8 Elements)	
	1. $50 Clothing Allowance	1. Improvement Needed
	2. Adequate Quantity of Clothing Inventory	2. Full Compliance
	3. Adequate Quality of Clothing Inventory	3. Full Compliance
	4. Involvement in Selection of Clothing	4. Full Compliance
	5. Provision of Personal Care Items	5. Full Compliance
	6. Minimum Monetary Allowances	6. Improvement Needed
	7. Management of Allowances	7. Full Compliance
	8. Encouragement and Assistance with Life Book	8. Improvement Needed
IX	**Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)** (12 Elements)	
	1. Education/Experience Requirement	1. Full Compliance
	2. Criminal Fingerprint Cards Timely Submitted	2. Improvement Needed
	3. CACIs Timely Submitted	3. Improvement Needed
	4. Signed Criminal Background Statement Timely	4. Improvement Needed
	5. Employee Health Screening Timely	5. Full compliance
	6. Valid Driver's License	6. Improvement Needed
	7. Signed Copies of GH Policies and Procedures	7. Improvement Needed
	8. Initial Training Documentation	8. Full Compliance
	9. CPR Training Documentation	9. Improvement Needed
	10. First Aid Training Documentation	10. Improvement Needed
	11. On-going Training Documentation	11. Improvement Needed
	12. Emergency Intervention Training Documentation	12. Improvement Needed

PERFECT IMAGE YOUTH CENTER PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

Perfect Image Youth Center
16761 Washington Street
Riverside, California 92504
License Number: 336408586
Rate Classification Level: 9

The following report is based on a "point in time" monitoring visit and addresses findings noted during the December 2009 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review of three children's files and six staff files, Perfect Image Youth Center was in full compliance with three of nine sections of our Contract Compliance Review: Recreation and Activities Requirements, Children's Health-Related Services, Including Psychotropic Medication, and Personal Rights. The following report details the results of our review:

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of three children's case files and/or documentation from the provider, Perfect Image Youth Center fully complied with seven of the nine elements reviewed in the area of Licensure/Contract Requirements.

Based on our review, the Group Home was using all available resources to attempt to stabilize placements prior to requesting removal of a child. The Group Home was providing for the children's transportation needs and appropriately documenting and cross reporting special incident reports. Perfect Image Youth Center was in compliance with licensed capacity, conducted disaster drills at least every six months and maintained completed disaster drill logs. However, the Group Home did not maintain runaway procedures in accordance with the contract nor did they maintain comprehensive allowance logs.

Recommendations:

Perfect Image Youth Center shall ensure that:

1. The Group Home maintains runaway procedures pursuant to the contract.

2. Comprehensive allowance logs are fully maintained.

FACILITY AND ENVIRONMENT

Based on our review of Perfect Image Youth Center and interviews with the three children, the agency fully complied with three of six elements in the areas of Facility and Environment.

The Group Home maintained age-appropriate and accessible recreational equipment and on-site educational resources.

The Group Home maintained a sufficient supply of perishable and non perishable foods. The exterior of the Group Home was adequately maintained. The front yard was clean and adequately landscaped. However, the backyard was not landscaped and contained a large amount of debris.

While the Group Home provided a home-like environment, the interior had several deficiencies, none of which posed safety risks to placed children. Specifically, the living room and visitation room were dirty, and there was a bleach stain on the living room carpet. In the kitchen, a pillow case was being used as a window covering. The cabinet doors were dirty. The paint was peeling off of the dining table. In the bathroom, the bathtub and grout needed to be cleaned and the toilet seat was worn. There was insufficient lighting throughout the Group Home.

The children's bedrooms were adequately maintained, but there were deficiencies. The mattresses were comfortable, and all the beds had a full complement of linens. Children's sleeping arrangements were appropriate. Window screens were in good repair. However, the carpet in all bedrooms needed to be cleaned. In bedroom #1, the blinds were broken and a dresser drawer was broken. In bedroom # 2, a dresser was broken. In bedroom # 3, the closet door was broken.

Recommendation:

Perfect Image Youth Center management shall ensure that:

3. The Group Home site is maintained in good repair in accordance with Title 22 regulations.

PROGRAM SERVICES

Based on our review of three children's case files, Perfect Image Youth Center fully complied with one of eight elements reviewed in the area of Program Services.

We noted that placed children met the Group Home's population criteria as outlined in the program statement. One child had been at the Group Home for just three days and was, therefore, not assessed for needed services within 30 days. Of the two remaining children, one was not assessed for needed services within thirty days of placement.

Based on our review, we found that of the two children placed at the Group Home for thirty days or more, only one child had a current NSP. We found that for that child, the initial and updated NSPs had been developed and implemented by the treatment team. However, the NSPs were not comprehensive, did not include case plan goals, concurrent planning case plan goals or educational information. The reviewed NSPs did not reflect adequate documentation to confirm monthly contacts with the DCFS

CSW nor was there any other documentation in the case file. The Auditor-Controller's (A-C) prior year review also noted that Perfect Image Youth Center did not always ensure that the NSPs were comprehensive and included measurable and attainable goals.

Recommendations:

Perfect Image Youth Center management shall ensure that:

4. All children are assessed for needed services within thirty days of placement.

5. NSPs are comprehensive and include all required elements.

6. Monthly contacts with DCFS CSWs are adequately documented.

EDUCATION AND EMANCIPATION SERVICES

As one child had been placed at the Group Home for only three days, she was not interviewed about educational services. Based on interviews with the other two children and review of all their case files, it was determined that Perfect Image Youth Center had not complied with two elements relating to current IEPs and the maintenance of report cards. One child who had been enrolled in school for approximately one month had not received a report card, and the other child who had been in the Group Home for over a year did not have a current Individualized Educational Plan (IEP) or a current report card on file. Provision of Emancipation Planning/Vocational Programs and ILP Emancipation Planning were non applicable to due to the young age of the children.

Recommendation:

Perfect Image Youth Center management shall ensure that:

7. Current copies of IEPs and report cards are maintained in the children's files.

CLOTHING AND ALLOWANCE

Based on our review of three children's case files, and interviews with the two children who had been placed with the agency for at least a month, Perfect Image Youth Center fully complied with seven of eight elements in the area of Clothing and Allowance.

Based on our review, we found that only one of the two children placed over 30 days had received the $50 required monthly clothing allowance. Children were provided with opportunities to select their own clothes, and clothing provided to children was of good quality and sufficient quantity. The clothing allowance logs and inventories confirmed that the requirements were being met for one of the two children.

The two children reported that the Group Home allowed them to spend their monetary allowances as they chose. However, the children reported that they were not provided

with required minimum weekly allowances. Further, there was no documentation to support that the children were given the required minimum weekly allowance. The Group Home Executive Director explained that the Group Home was in a state of flux due to the unexpected resignation of the Group Home Administrator and confirmed that the children would receive all required allowances.

The Group Home provided children with adequate personal care items. The children were not encouraged or assisted in creating and maintaining their photo albums/life books. The A-C's prior year review also noted that Perfect Image Youth Center did not provide the children with the required monthly allowance or encourage and assist the children in creating and maintaining photo albums/life books.

Recommendations:

Perfect Image Youth Center management shall ensure that:

8. All children receive the $50 required monthly clothing allowance.

9. All children receive the required minimum weekly monetary allowance.

10. All children are encouraged and assisted in creating and maintaining photo albums/life books.

PERSONNEL RECORDS

Based on our review of six staff personnel files, Perfect Image Youth Center fully complied with three of twelve elements in the area of Personnel Records.

All six staff reviewed met the educational and experience requirement. They had initial health screenings and initial training. However, one Child Care Worker did not have timely submitted fingerprint cards, Child Abuse Central Index (CACI) clearance and signed criminal background statement. Another staff member did not have a current driver license on file. This was brought to the attention of the Executive Director, who was notified that the staff without clearances could not supervise the children and that the staff member without a valid driver license could not transport the children. Further, one staff member's file did not have a signed copy of the Group Home's policies and procedures nor documentation of CPR training and First-Aid training. None of the staff members had documentation of required on-going training in their files, and there was no documentation that three of the staff members received emergency intervention training per the Group Home's Program Statement. The Group Home Executive Director explained that the Group Home was in a state of flux due to the unexpected resignation of the Group Home Administrator and that she would obtain all necessary documentation.

Recommendations:

Perfect Image Youth Center management shall ensure that:

11. All hired staff are criminally cleared in accordance with Title 22 regulations and regulatory standards and that documentation is maintained.

12. All staff members authorized to transport children have copies of current California Driver Licenses maintained in their files.

13. All staff members are provided with signed copies of the Group Home policies and procedures.

14. All staff members have current CPR and First Aid training, annual training and emergency intervention training as required per Title 22 regulations and the Group Home's program statement.

PRIOR YEAR FOLLOW-UP FROM THE AUDITOR-CONTROLLER'S REPORT

Objective

Determine the status of the recommendations reported in the A-C's prior monitoring review.

Verification

We verified whether the outstanding recommendations from the monitoring review were implemented. The report was issued on September 11, 2008.

Results

The A-C's prior monitoring report contained three outstanding recommendations. Specifically, Perfect Image Youth Center was to ensure that it developed comprehensive NSPs that included measurable and attainable goals and all members of the treatment team. The Group Home was to ensure that documentation was maintained to show that children taking psychotropic medications were routinely seen by the prescribing psychiatrist. The Group Home was also to provide children with the $50 required monthly clothing allowance and encourage and assist children in creating and updating photo albums/life books. Based on our follow up of these recommendations, the recommendation to maintain documentation that children taking psychotropic medication are seen by the prescribing psychiatrist was fully implemented. As we noted, the other two recommendations were not fully implemented and corrective action was requested of Perfect Image Youth Center to further address these findings.

Recommendation:

Perfect Image Youth Center management shall ensure that:

15. It implements three outstanding recommendations from the A-C's September 11, 2008 monitoring report, which are noted in this report as Recommendations 5 as to the NSPs and 8 and 10 as to Clothing and Allowance.

Perfect Image Youth Center
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Riverside, CA 92504
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11/18/2010

Licensure/Contract Requirements

Recommendation 1 For the Group Home to maintain runaway procedures in accordance with the contract.

Status: The Perfect Image Youth Center (PIYC) has incorporated the recommendations on maintaining a runaway procedure in accordance with the contract. Upon all residents entering into the facility they will review and sign the runaway procedures. All Perfect Image Youth Center staff will be trained on all runaway procedures, including I-track.

Plan to prevent reoccurrence: PIYC staff will be trained monthly on runaway procedures. Administration will provide in-service training on a monthly basis.

Person responsible for implementing corrective action: Administrator, Sandy Cromer and Facility Manager, Monrosea Allen

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Recommendation 2 To make sure that allowance logs are maintained , appropriate, and comprehensive.

Status: Upon intake, all residents have received an allowance log. If the residents arrive to facility with money it will be properly noted on the log in sheet. The residents and staff will sign when money is issued or received.

Plan to prevent reoccurrence: The facility manager and administrator will ensure that all residents have received an allowance log upon arrival. They will also ensure that logs are properly utilized and maintained by staff and residents on a weekly basis

Person responsible for implementing corrective action: Administrator, Sandy Cromer and Facility Manager, Monrosea Allen

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Facility and Environment

Recommendation 3 The Group Home site is maintained and in good repair in accordance with Title 22 regulations

Status: The Perfect Image Youth Center has incorporated the recommendations on maintaining exterior common quarters, and resident's bedrooms. A gardener has been hired to maintain the background. The carpet has been thoroughly cleaned throughout the facility. The bleach stain has also been removed from the carpet in the living room. The living room, dining room, and bedrooms now have sufficient lighting. The profanity and peeling paint on table tops has been removed. All tables have been scrubbed and repainted. In the kitchen the cabinets have all been repainted and proper window coverings have been placed. The toilet in bathroom #1 has been replaced, the bathtub has been cleaned properly, and the grout has been uprooted and re-done. In bedroom #1, the broken blinds have been replaced. In bedrooms #1 and 2 the broken blinds have been replaced. The bedroom closet doors have been removed and replaced with curtains.

Plan to prevent reoccurrence: PIYC has hired a gardener to maintain the grounds and exterior every two weeks. The common grounds will be listed on a daily maintenance log and staff will ensure that it's kept up. PIYC staff will inspect all rooms, carpet, blinds, closets, and drawers and will note any concerns on the maintenance log on a daily basis. The maintenance log will be submitted to maintenance in a timely manner.

Persons responsible for implementing corrective action: Administrator, Sandy Cromer, Facility Manager, Monrosea, and Maintenance staff will ensure all repairs

completed in a timely manner.

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer and Facility manager, Monrosea Allen

Program Services

Recommendation 4 All children are assessed for needed services within thirty days of placement

Status: Perfect Image Youth Center will ensure that all children that are placed with PIYC will be assessed within thirty days.

Plan to prevent reoccurrence: Administrator Sandy Cromer and LCSW Adrienne Chadwick will ensure that as soon as the child is placed their needs will be assessed. PIYC LCSW will make a face to face contact with child within first 2 weeks of placement.

Person responsible for implementing corrective action: Administrator, Sandy Cromer and LCSW, Adrienne Chadwick

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Recommendation 5 Perfect Image is to ensure that all NSP's are comprehensive, including the case plan goals, concurrent case plan goals; and educational information

Status: Upon discussing NSP with LCSW, CSW and the child after intake, PIYC will improve the NSP by targeting each child's goal and describing it in greater detail. Also, each NSP will include reasonable goals for each child. PIYC will ensure that each child receives assistance in reaching her goal. PIYC will ensure that the case plan goals, and current case plan goals, and education goals are met.

Plan to prevent reoccurrence: PIYC LCSW Adrienne Chadwick will ensure that all the NSP are comprehensive, including case plan goals, concurrent case goals, and educational information by reviewing each NSP in a timely manner. By meeting with the child, CSW, and PIYC administration and staff, PIYC will ensure

that the NSP will include all elements of the NSP template.

Persons responsible for implementing corrective action: LCSW Adrienne Chadwick and Administrator Sandy Cromer and Staff

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Recommendation 6 Monthly contacts with DCFS CSWs are adequately documented

Status: Perfect Image Youth Center will ensure all monthly contacts between the child and DCFS CSWs are properly documented.

Plan to prevent reoccurrence: PIYC staff will document all face to face and telephone contacts by DCFS Social Workers in children's files. The Administrator will provide the PIYC LCSW with the contacts on a monthly basis.

Person responsible for implementing corrective action: PIYC staff and Administrator Sandy Cromer for implementing.

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Educational and Emancipation Services

Recommendation 7 Perfect Image Youth Center will have IEP's maintained and should have current copies of the children's report cards or progress reports maintained

Status: Perfect Image Youth Center will ensure that IEP's are maintained and will ensure that a current copy of the child's report card or progress report is maintained by going to the school and requesting documentation.

Plan to prevent reoccurrence: PIYC will ensure that all residents will have current copies of their report cards, progress reports, and current IEPs in their folders. Copies of the report cards will be maintained along with the original. Staff will receive progress reports weekly or monthly from each child's school. PIYC will routinely check the child's folders.

Person responsible for implementing corrective action: Administrator, Sandy Cromer and PIYC staff.

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Clothing and Allowance

Recommendation 8 The Perfect Image Youth Center issues at least $50 per month clothing allowance.

Status: All residents are receiving $50 per month of clothing. All receipts and signatures of issuing are properly logged and a copy is placed in each folder.

Plan to prevent reoccurrence: Perfect Image Youth Center will be maintaining clothing allowance logs and receipts for items purchased with clothing allowance.

Person responsible for implementing corrective action: Administrator, Sandy Cromer and Facility Manager, Monrosea Allen

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Recommendation 9 All children receive the required minimum weekly allowance

Status: All residents are receiving $7 as required for there minimum weekly allowance

Plan to prevent reoccurrence: Perfect Image Youth Center will be maintaining all children's weekly allowance of $7

Person responsible for implementing corrective action: Administrator, Sandy Cromer and Facility, Manager and Treasurer

Person responsible for monitoring to ensure corrective action remains

implemented and is working as intended: Administrator, Sandy Cromer

Recommendation 10 All children are encouraged and assisted in creating and maintaining photo albums/ life books

Status: All children will be assisted and encouraged to make a photo album/ life book from the time that they are first placed at PIYC.

Plan to prevent reoccurrence: Administration will ensure that each girl receives the opportunity and is encouraged and assisted with creating a photo album/ life books. The children will update photo albums/life books on a monthly basis.

Person responsible for implementing corrective action: Administrator, Sandy Cromer, Facility Manager, Monrosea Allen, and PIYC staff

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Personnel Records

Recommendation 11 All hired staff are criminally cleared in accordance with Title 22.

Status: PIYC has incorporated the recommendations for submitting criminal fingerprint cards timely and that all applicants are clear.

Plan to prevent reoccurrence: PIYC will submit criminal fingerprint cards before any new employee is allowed on grounds and able to begin a shift.

Person responsible for implementing corrective action: Administrator, Sandy Cromer

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Recommendation 12 All Perfect Image Employees have a valid driver's license.

Status: PIYC has ensured that all staff files contain a copy of California Driver's License.

Plan to prevent reoccurrence: On the date of hire all employees will submit a valid California Driver's License to PIYC or they will not begin working, nor have access to Los Angeles DCFS placed children.

Person responsible for implementing corrective action: Administrator, Sandy Cromer and Facility Manager, Monrosea Allen

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Recommendation 13 Perfect Image Youth Center employees sign copies of group home policies and procedures

Status: The Perfect Image Youth Center has incorporated the recommendations for all employees to sign copies of the facility's policies and procedures.

Plan to prevent reoccurrence: Perfect Image Youth Center administration will have all new and existing employees sign all facility policy and procedures. Perfect Image Youth Center employee packet will include policy and procedures.

Person responsible for implementing corrective action: Administrator, Sandy Cromer and Facility Manager, Monrosea Allen

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Recommendation 14 Perfect Image Youth Center employees will receive CPR and First Aid Training, Annual training and Emergency Intervention Training

Status: Perfect Image Youth Center has provided CPR and First Aid Training, Annual Training and Emergency Intervention Training from an outside license trainer for all PIYC staff.

Plan to prevent reoccurrence: Administration will ensure all staff training and

certifications are current by reviewing staff folders on a monthly basis and document progress. Copies of certificates will be maintained in all staff files.

Person responsible for implementing corrective action: Administrator, Sandy Cromer and Facility Manager, Monrosea Allen

Person responsible for monitoring to ensure corrective action remains implemented and is working as intended: Administrator, Sandy Cromer

Sandy Cromer
Administrator

11-18-10
Date