County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

PATRICIA S. PLOEHN, LCSW
Director

Board of Supervisors
GLORIA MOLINA
First District
MARK RIDLEY-THOMAS
Second District
ZEV YAROSLAVSKY
Third District
DON KNABE
Fourth District
MICHAEL D. ANTONOVICH
Fifth District

December 31, 2009

TO: Supervisor Gloria Molina, Chair
Supervisor Mark Ridley-Thomas
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: Patricia S. Ploehn, Director
Department of Children and Family Services

WEST COVINA GROUP HOME PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

West Covina Group Home is located in San Bernardino County and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to West Covina Group Home's program statement, their stated goal is "to help youth develop the skills and self esteem which will enable them to become self-sufficient and productive persons in society." West Covina Group Home is licensed to serve a capacity of six children, ages 11 through 17.

The Out of Home Care Management Division (OHCMD) conducted a review of the West Covina Group Home in September 2009 at which time, they had one six-bed site and five placed DCFS children. All five children were males. For the purpose of this review, all currently placed children were interviewed, and their case files were reviewed. The placed children's overall length of placement was five months, and the average age was 16 years old. Seven staff files were reviewed for compliance with Title 22 regulations and contract requirements.

There were three children on psychotropic medication. We reviewed their case files to assess timeliness of psychotropic medication authorizations and to confirm the medication logs documented correct dosages were being administered as prescribed.

SCOPE OF REVIEW

The purpose of this review was to assess West Covina Group Home's compliance with the Contract and State regulations. The visit included a review of West Covina Group Home'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 children, and we conducted interviews with children to assess the care and services they are receiving.

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

SUMMARY

Generally, West Covina Group Home was providing good quality care to DCFS placed children, and the services were provided as outlined in their program statement. The children interviewed stated that they want to continue residing at the placement and that the staff is genuinely concerned about them.

The direct care staff stated that they were pleased with the support that they receive from the administrative staff. In fact, the facility manager reported that the Group Home administrative staff was attentive to the needs of the children and were open to listening to the direct care staff's suggestions for improvement.

At the time of the review, the Group Home needed to address a few minor physical plant deficiencies, none of which posed a safety hazard to any placed children. The Group Home also needed to develop comprehensive Needs and Services Plans (NSPs) and maintain documentation to demonstrate that the logs for children taking psychotropic medications are completely and accurately documented.

West Covina Group Home was receptive to implementing some systemic changes to improve their compliance with regulations and the Foster Care Agreement. Further, the Administrator stated that he welcomed the findings in the review so that their current operating systems can be improved.

NOTABLE FINDINGS

The following are the notable findings of our review:

- Of the ten NSPs reviewed, none were comprehensive in that they did not complete all the required elements in accordance with the NSP template. The A-C's prior review also noted that West Covina Group Home did not always ensure that Needs and Services Plans/Quarterly Reports were comprehensive.

- Although the Facility Manager indicated that the Group Home maintains monthly contact with the DCFS CSWs, none of the five case files reviewed reflected adequate documentation to confirm the contacts.

- Of the three children reviewed who were eligible for Youth Development Services and/or emancipation or equivalent services, none had received services at the time of review.

- Two (66%) of the three children taking psychotropic medications had current psychotropic medication authorization forms and their medication logs included correct documentation. The third child's medication log included incorrect documentation in that his psychotropic medication, Phenytoin, was to be administered once daily, according to his prescription. However, the logs for August and September 2009 indicated that the medication was given twice daily for those two months. We determined that Phenytoin was in fact administered to the child only once daily during those two months.

- Three (60%) out of five children were not receiving recommended treatment services based on their psychological assessments/evaluations. The Out of Home Care Management Division (OHCMD) Monitor immediately brought this to the Group Home staff's attention. West Covina Group Home provided corrective action to address this matter, which confirms they will ensure placed children receive treatment services as recommended.

- Four (80%) out of five reviewed children reported that they felt safe in the Group Home and are provided with appropriate staff supervision. However, one child reported that he did not feel safe in the Group Home due to other children bothering him and sneaking into his room. He did not report being bullied or abused. This was immediately brought to the Group Home's attention and they voluntarily implemented an appropriate safety plan. The placed child confirmed that appropriate actions were implemented by the Group Home. The Group Home also agreed to provide appropriate supervision of all placed children to ensure their safety and well being. The Group Home reported that they will also encourage all placed children to be cordial and respectful of each other during daily group sessions.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held September 24, 2009:

In attendance:

Emeka Dillibe, Administrator West Covina Group Home, James Brandy, Facility Manager West Covina Group Home and Jui Ling Ho, Monitor, Out of Home Care Management Division, DCFS.

Highlights:

The Administrator was in agreement with our findings and recommendations. He stated that obtaining a copy of the review instrument was very helpful because he had information of the scope of what was being reviewed, and he felt the review was fair.

He indicated that some areas of the Contract are open to interpretation and therefore, too ambiguous. He also requested additional NSP training.

As agreed, West Covina Group Home 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.

PSP:LP:MG:EAH:BB:JH

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor Controller
Public Information Office
Audit Committee
Barbara Okonkwo, President, Board of Directors, West Covina Group Home
Hardip Gill, Executive Director, West Covina Group Home
Jean Chen, Regional Manager, CCL

WEST COVINA GROUP HOME PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

West Covina Group Homes
4041 Carroll Court
Chino, California 91710
License Number: 360911241
Rate Classification Level: 11

The following report is based on a "point in time" at the time of the monitoring visit. This compliance report addresses findings noted during the September 2009 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review of five children's files and seven staff files, West Covina Group Home was in full compliance with one out of nine sections of our Contract Compliance review: Licensure/Contract Requirements. The following report details the results of our review:

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of all placed children's case files, West Covina Group Home fully complied with all nine (100%) elements reviewed in the area of Licensure/Contract Requirements.

Recommendation:

None

PROGRAM SERVICES

Based on our review of five children's case files, West Covina Group Home fully complied with four (57%) out of seven elements reviewed in the area of Program Services.

We noted that placed children met the Group Home's population criteria as outlined in their program statement, and they were assessed for needed services within thirty days of placement.

Based on our review, we found that the treatment team develops and implements the Needs and Services Plans (NSPs) with input from the child. The NSPs are current and include short and long term goals. However, none of the ten required initial and updated NSPs were comprehensive. The NSPs did not include specific and measureable treatment goals as they relate to permanency, life skills and visitation. Additionally, there was no documentation of specific information regarding visits such as, the dates of visits, who the child visited, how the visit went, and the transportation arrangement. Also, three (30%) out of the ten required NSPs were not approved by the DCFS CSWs for implementation. The provider stated that they are in process of

replacing a social worker so that NSPs/Quarterly Reports issues can be resolved. In addition, the Group Home's CAP appropriately addresses action they will implement regarding the NSP/Quarterly Report findings.

The A-C's prior year review also noted that West Covina Group Home did not always ensure that NSPs were comprehensive.

Although the Facility Manager indicated that the Group Home maintains monthly contact with the DCFS CSWs, none of the five case files reviewed reflected adequate documentation to confirm the contacts. Additionally, three (60%) out of five children are not receiving recommended treatment services based on their psychological assessments/evaluations. The provider stated that the children do receive psychological assessments/evaluations. However, the Group Home staff was immediately informed that there was no documentation to indicate that the treatment team implemented the recommendations made in the assessments/evaluations. West Covina Group Home provided corrective action to address this matter, which confirms they will ensure placed children receive treatment services as recommended.

Recommendations:

West Covina Group Home management shall ensure that:

1. NSPs are comprehensive including all required elements.

2. Documentation is maintained as verification that DCFS CSWs approve the implementation of the NSPs.

3. Monthly contacts with DCFS CSWs are adequately documented.

4. Recommendations of psychological assessments/evaluations are implemented to meet the children's needs.

SITE VISITS INCLUDING CHILD INTERVIEWS

FACILITY AND ENVIRONMENT

Based on our review of West Covina Group Home and interviews with the five children, West Covina Group Home fully complied with four (67%) out of six elements in the areas of Facility and Environment.

Generally, the exterior of the Group Home was well maintained. The front and back yards were clean and adequately landscaped.

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.

While the Group Home provided a home-like environment, the interior had some minor deficiencies, none of which posed any safety risks to placed children. Specifically, the closets in the hallway appeared dusty and needed to be cleaned. The door under the sink in bathroom # 2 was hanging off due to a broken hinge and needed to be repaired. The previously placed towel rack was missing and needed to be replaced in bathroom #2. Neither bathroom had bath mats, which are needed to prevent falls.

Children's bedrooms were fairly well maintained and orderly. The mattresses were comfortable, and all the beds had a full complement of linens. Children's sleeping arrangements were appropriate. Window coverings and window screens were in good repair. However, the wall in bedroom #1 had tiny holes and dirty spots and needed to be repaired and repainted. The extra blankets kept in the hallway closet did not smell clean and needed to be rewashed. None of the bedrooms had age-appropriate personalized decorations for the placed children, and the floors were dusty and piled with dirty clothing.

The A-C's prior year review also noted that West Covina Group Homes did not always ensure that the Group Home's facility was maintained in accordance with CDSS Title 22 regulations.

Recommendation:

West Covina Group Home management shall ensure that:

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

EDUCATIONAL AND EMANCIPATION SERVICES

Based on our review of five children's case files, and interviews with the five children, West Covina Group Home fully complied with two (50%) out of four elements in the areas of Educational and Emancipation Services.

All children were attending school. All children were provided with educational support and resources to meet their educational needs and were progressing satisfactorily in school. Current copies of the children's report cards or progress reports were all well maintained in their case files. However, of the three children eligible for Independent Living Program (ILP) or equivalent emancipation services, none received services. The provider stated that they had contacted the ILP coordinators and CSWs to refer the placed children for the services. However, none of the five case files reviewed reflected adequate documentation to confirm the contacts.

Recommendation:

West Covina Group Home management shall ensure that:

6. All children eligible for Youth Development Services or equivalent emancipation services are referred for services and training in a timely manner.

RECREATION AND ACTIVITIES

Based on our review of five children's case files, and interviews with the five children, West Covina Group Home fully complied with one (33%) out of three elements in the areas of Recreation and Activities.

The Group Home provided children with recreational activities. The Group Home also provided transportation to and from the activities. However, two children indicated that they had not been given the opportunity to participate in planning activities. Two children reported that staff checks weekly to see how much money is left or available and then plans activities for them. Two children indicated that they like to participate in extra-curricular, enrichment and social activities in which they have an interest; however the Group Home has not made efforts for them to do so, or there are no resources available at this time. The facility manager stated that they have a limited budget for the activities and they are out in the Chino area and not many resources are available in this area. West Covina has appropriately addressed this finding in the attached CAP.

Recommendations:

West Covina Group Home management shall ensure that:

7. All children are given the opportunity to participate in planning activities.

8. Group Home staff seek available community resources and that all children are given the opportunity to participate in age-appropriate extra-curricular, enrichment, and social activities in which they have an interest.

CHILDREN'S HEALTH RELATED-SERVICES, INCLUDING PSYCHOTROPIC MEDICATION

Based on our review of five children's case files, and interviews with the five children, West Covina Group Home fully complied with seven (78%) out of nine elements in the areas of Children's Health Related-Services, including Psychotropic Medication.

The Group Home had ensured that all children's initial and follow-up physical examinations were conducted in a timely manner and were well documented in their case files. There was also a current psychiatric evaluation/review for each child on psychotropic medication and children were routinely seen by the prescribing psychiatrist. All children were aware of their right to refuse medication. However, two (40%) of children's initial dental examinations were late. One initial dental exam was 16 days late and the other was 23 days late. The Group Home did not provide any explanation to indicate why the required dental services were delayed.

Two (66%) of the three children taking psychotropic medications had current psychotropic medication authorization forms and their medication logs included correct

documentation. The third child's medication log included incorrect documentation in that his psychotropic medication, Phenytoin, was to be administered once daily, according to his prescription. However, the logs for August and September 2009 indicated that the medication was given twice daily for those two months. We determined that Phenytoin was in fact administered to the child only once daily during those two months

Once the deficiency was noted, the provider reported that immediate action was taken by giving the involved staff members written warnings informing them that the medication logs must be filled out correctly at all times and that all medication must be administered in a timely manner. Staff members were also informed of the need to ensure that they are signing for only the medication that they are administering. They were additionally made aware of the fact that any future violations may result in further disciplinary action such as suspension or termination. Additionally, one (33%) out of three children on psychotropic medication could not name the psychotropic medication that he was taking, and he feels he does not need the medication. The provider agreed that their Group Home will follow up and discuss this concern with the psychiatrist. The GH Monitor provided the Group Home with the contact information for the Psychotropic Medication Authorization desk.

Recommendations:

West Covina Group Home management shall ensure that:

9. All children's dental examinations are done in a timely manner.

10. All children who take psychotropic medications have current Court authorization forms.

11. All children who take psychotropic medications know why they are taking each medication and if there are any concerns and complaints about the medication, ensure that the placed child is offered the opportunity to discuss with necessary staff and the prescribing physician.

12. All of the medication distribution logs are correctly maintained and documented.

PERSONAL RIGHTS

Based on our review of five children's case files, and interviews with the five children, West Covina Group Home fully complied with eight (73%) out of 11 elements in the area of Personal Rights.

All five reviewed children reported that they are assigned chores that are reasonable and not too demanding. The five reviewed children also reported that they are allowed to make and receive personal telephone calls, send and receive unopened mail, and have private visitors. The five reviewed children reported that they attend the religious services of their choice. The five reviewed children reported satisfaction with meals and snacks. All five reviewed children also reported that they receive requested medical, dental and psychiatric care. The children also expressed satisfaction with the quality of their interactions with staff and reported that the staff members treat them with respect

and dignity. They also reported that they are given information about the Group Home's policies and procedures regarding discipline, child personal rights, house rules, and children's complaint grievance procedures.

Four (80%) out of five reviewed children reported that they felt safe in the Group Home and are provided with appropriate staff supervision. However, one child reported that he did not feel safe in the Group Home due to other children bothering him and sneaking into his room. He did not report being bullied or abused. This was immediately brought to the Group Home's attention and they voluntarily implemented an appropriate safety plan and the placed child confirmed that appropriate actions were implemented by the Group Home. The Group Home also agreed to provide appropriate supervision of all placed children to ensure their safety and well being. The Group Home reported that they will also encourage all placed children to be cordial and respectful of each other during daily group sessions.

Three (60%) out of five children reported that the discipline policies are consistently enforced and that there are fair and appropriate consequences for inappropriate behavior. However, two (40%) out of five children felt that their points were deducted unfairly and their levels were lowered unfairly. For example, a 16-year-old youth stated that he did his chores; however, the staff forgot to record it and refused to make corrections. Another example was that when an argument occurred, staff only listened to one side of the story and deducted that child's points. Another 17-year-old youth reported that they need to get staff's permission in order to go into the kitchen area; otherwise their points were being deducted. He believes this is unfair. The provider stated that the children are not prohibited from eating or taking food from the refrigerator, however, because they sometimes mess up the kitchen they are required to report to staff before entering the kitchen so that they can be appropriately supervised. The provider also stated that there will be no consequences for placed children entering the kitchen, even without staff permission. The provider also stated that because one child reported that his points were deducted unfairly, the staff members will be monitored by the facility supervisor to ensure that the point system is correctly executed. All staff members were given a review of the dispensation of points. The placed children will be encouraged to inform the facility supervisor of incidents that they believe the points system was unfairly administered.

Recommendations:

West Covina Group Home management shall ensure that:

13. The voluntary safety plan developed by West Covina Group Home is maintained.

14. The point system is executed accurately and fairly by regularly training staff on appropriate and acceptable discipline measures.

CLOTHING AND ALLOWANCE

Based on our review of five children's case files, and interviews with the five children, West Covina Group Home fully complied with seven (88%) out of eight elements in the areas of Clothing and Allowance.

Based on our review, while two children reported that they received $100-150 every two to three months, the remaining three children reported they received the required $50 per month for clothing. Therefore, basically all children received an average of $50 per month for clothing. Children are provided with opportunities to select their own clothes. Clothing provided to children is of good quality and of sufficient quantity. The clothing allowance logs and inventories confirmed that the requirements were being met.

All five reviewed children reported that the Group Home provides them with the required minimum weekly allowance and all children reported that they spend their allowances as they choose.

The Group Home provided children with adequate personal care items. However, all children are not encouraged or assisted in creating and maintaining their photo albums/life books.

Recommendation:

West Covina Group Home management shall ensure that:

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

PERSONNEL RECORDS

Based on our review of seven staff personnel files, West Covina Group Home fully complied with 11 (92 %) out of 12 elements in the area of Personnel Records.

All seven staff reviewed met the educational/experience requirements, submitted timely criminal fingerprint cards, Child Abuse Index Clearance (CAI) and signed a criminal background statement in a timely manner. They also received timely initial health-screenings, signed copies of the Group Home policies and procedures, had a valid driver's license, and completed CPR, First-Aid, emergency intervention training and initial training as required per the Group Home's program statement. However, two staff members did not complete their annual training as required per Title 22 and West Covina's program statement. One staff member was missing one hour and the other staff member was missing two hours of the required 20 training hours. The provider stated that the two above-mentioned staff members were at their training sessions, however, they failed to sign in as required. The Group Home will ensure that staff members sign in for all training sessions.

Recommendation:

West Covina Group Home management shall ensure that:

16. All the staff members sign in for all training sessions.

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 Fiscal Year 2007-08 monitoring review were implemented. The report was issued on May 20, 2008.

Results

The A-C's prior monitoring report contained three outstanding recommendations. Specifically, West Covina Group Home was to ensure that they develop comprehensive Needs and Services Plans which included measurable and attainable goals, that the Group Home is maintained in good repair in accordance with Title 22 regulations, and that they maintain documentation to indicate that children taking psychotropic medications are routinely seen by the prescribing psychiatrist. Based on our follow up of these recommendations, West Covina Group Home fully implemented one of the A-C's recommendations as it relates to documentation of children on psychotropic medication routinely being seen by the prescribing psychiatrist. The A-C's recommendation that the facility be maintained in good repair in accordance with Title 22 regulations was partially implemented. However, West Covina did not implement the recommendation regarding development of comprehensive Needs and Services Plans which included measurable and attainable goals. As we noted two recommendations were not fully implemented, corrective action was requested of West Covina Group Home to further address these findings.

Recommendation:

West Covina Group Home management shall ensure that:

17. They fully implement the two outstanding recommendations from the A-C's Fiscal Year 2007-08 monitoring report, which are noted in this report as Recommendations 1 and 5.

WEST COVINA GROUP CORP.

4041 Carroll Court
Chino, CA 91710
(909) 591-2589
Facility #360911241

December 18, 2009

Ms. Jui Ling Ho,
Out of Home Care Management Division
Department of Children and Family Services
9320 TelStar Ave., #208
El Monte, CA 91731

Dear Ms. Ho,

This is in response to your email dated December 17, 2009 regarding revision to item 21. The revision is as follows:

> Administrator and Facility manager will make sure that the Psychological assessment/evaluation recommendations are implemented.

Any questions, please contact me at (626)221-6406.

Sincerely,

Hardip Gill
Executive Director

November 24, 2009

Ms. Barbara Butler
Department of Children & Family Services
Out of Home Care Management Division
9320 Telstar Ave
El Monte, CA 91731

Dear Ms. Butler,

This letter is in response to your letter dated November 20, 2009 regarding the review conducted by your office in September 2009. We are in process of replacing social worker so that Needs & Service Plans/Quarterly Reports issues can be resolved. Also this social worker will contact Ms. Lui Ling Ho, MSW regarding retraining of NSP template contents and contract requirements. Regarding other significant findings the administrator will follow closely the facility supervisor to make sure that all documents are properly maintained.

Thanks again for your constructive feedback to our organization and we are committed to all necessary efforts to improve our services and quality of care to the clients.

If have any questions, please contact me at (909)591-2589.

Sincerely,

Hardip Gill
Executive Director

WEST COVINA GROUP HOME

4041 Carroll Court
CHINO, CA 91710

Phone: (909) 591-2589
Fax: (909) 364-2311

November 2, 2009

Jui Ling Ho, MSW
Dept of Children & Family Services
Out of Home Care Management Division
9320 Telstar Avenue, #206
El Monte, CA 91731

ADDENDUM TO CORRECTIVE ACTION PLAN FOR FINDINGS/DEFICIENCIES NOTED ON 9/1/09, 9/8/09, 9/9/09 & 9/16/09 OHCMD VISIT

Please find below our response and plan of correction noted during your visit to our facility

GROUP HOME CONTRACT COMPLIANCE CHECKLIST RESPONSES

IV. Educational & Emancipation Services:

23 & 24. The agency will ensure to continue it's practice of enrolling all eligible children to ensure that no child is left behind. The clients in question has since began the agency developed ILP.

We have been in close contact with DCFS ILP worker Gale Parker (626) 691-1644 to assist in this regard ensuring that all clients receive services. All the documentation shall be maintained in child's file.

We will work in conjunction with the county worker to implement the placed child's Youth Development Services as appropriate.

Please see attached agency ILP training protocol and checklist to ensure that services are offered timely and appropriately documented.

V. Recreation & Activities:

27 & 29. We will continue to encourage the client's to participate in the planning and development of recreational activity calendar. The plan will provide a variety of developmental activities designed to meet the physical, cognitive, social and emotional needs of the clients.

On a monthly basis a group will be held with residents and staff to get written and verbal input from residents on suggestions and ideas for recreation activities to be offered. The facility supervisor will oversee these group meetings. All residents will be encouraged to participate. The agency will document their input/suggestions as well as those activities within reason that the agency is able to offer , provide and afford.

WEST COVINA GROUP HOME

4041 Carroll Court
CHINO, CA 91710

Phone: (909) 591-2589
Fax: (909) 364-2311

VII. Personnel Rights:

40. The agency will ensure to maintain close and appropriate supervision of all clients to ensure their well being and safety. For those residents who are newly placed, like the rest of the residents we will ensure to make them comfortable through our communications and daily interactions with them, ensuring that all their needs are met. We will as well in our daily groups encourage other residents to remain cordial and respectful of each other.

43. As much as one resident have claimed that his points were deducted unjustly we will continue to monitor all staff dispensation of our agency reward and behavior modification program. All staff in a recently held staff meeting underwent a review of the administration of the point system. The facility supervisor will ensure to monitor closely staff utilization of the point system. The residents are as well encouraged to inform the facility supervisor in events they believe the program was unfairly administered. All residents are immediately allowed into the kitchen area without staff permission. Residents will not have any consequences for entering the kitchen area or are they required to obtain staff permission. Residents are free to get snacks that are offered and put out for them such as fresh fruits, fruit bars etc.

Thank again for your constructive feedback to our organization and we are committed to making necessary efforts at improving our services and quality of care to the clients we serve..

Sincerely,

Hardip Gill

Hardip Gill
Executive Director

WEST COVINA GROUP HOME

4041 Carroll Court
CHINO, CA 91710

Phone: (909) 591-2589
Fax: (909) 364-2311

October 16, 2009

Jui Ling Ho, MSW
Dept of Children & Family Services
Out of Home Care Management Division
9320 Telstar Avenue, #206
El Monte, CA 91731

CORRECTIVE ACTION PLAN FOR FINDINGS/DEFICIENCIES NOTED ON 9/1/09, 9/8/09, 9/9/09 & 9/16/09 OHCMD VISIT

Please find below our response and plan of correction noted during your visit to our facility

GROUP HOME CONTRACT COMPLIANCE CHECKLIST RESPONSES

II. Facility & Environment:

11. The closets in the hallway had the contact paper cover on it stripped and new contact papers coverings installed.

The cabinet door second loose hinge has been fixed.

A replacement towel rack and bathroom floor mats were purchased and installed.

12. Extra blankets are washed now nightly by the overnight staff

The wall is in bedroom #1 has been repainted

The coverings to the closet doors were once more reinstalled and clients encouraged not to take them down and put them aside as they usually do.

The clients are continually encouraged to pick up the clothing and some personal belongings off the floor to ensure that the floor looks tidy and clean

III. Program Services:

17. The agency will ensure to keep appropriate documentation such as fax receipts, email copies etc when attempts were made to obtain CSW's signatures/approval and NSP's without responses from them. This will be appropriately documented to ensure that efforts were made to gather their signatures and approvals on NSP's after the interdisciplinary team meetings

21. The agency will ensure that there is linkage and continuity in treatment team recommendations to ensure that assessments/evaluations are implemented always.

22. The facility supervisor and all staff have immediately implemented the use of contact notes to document all monthly DCFS CSW contacts.

IV. Educational & Emancipation Services:

23 & 24. The agency will ensure to continue it's practice of enrolling all eligible children to ensure that no child is left behind. The clients in question has since began the agency developed ILP.

We have been in close contact with DCFS ILP worker Gale Parker (626) 691-1644 to assist in this regard ensuring that all clients receive services. All the documentation shall be maintained in child's file.
We will work in conjunction with the county worker to implement the placed child's Youth Development Services as appropriate. **Please see attached agency ILP checklist to ensure that services are offered timely and appropriately documented.**
Please See attached information from Child #4 & #5, schools explaining our agency attempt to enroll them in school times as required.

V. Recreation & Activities:

27 & 29. We will continue to encourage the client's to participate in the planning and development of recreational activity calendar. The plan will provide a variety of developmental activities designed to meet the physical, cognitive, social and emotional needs of the clients.

VI. Children's Health Related-Services, Including Psychotropic Medication

32. The staff members who in error signed and documented for medications more than the actual number of times it was actually dispensed were immediately disciplined and again retrained on proper agency medication dispensation procedures. The facility supervisor on a daily/weekly basis will review all medication documentation to ensure accurate recordings and proper dispensations.
37. The facility supervisor will ensure that all newly placed children are seen by the dentist within the first 30days of initial placements. In events were the child is on Awol during scheduled appointments or refuses to attend, the agency will ensure to have this documented appropriately.

IX. Personnel Records:

68. The agency will ensure that staff members appropriately sign-in for proper documentations each time they attend agency staff trainings. The staff members whose hours were short were at the trainings but had neglected to sign in as required. The supervisor will ensure to check on this in the future.

Thank again for your constructive feedback to our organization and we are committed to making necessary efforts at improving our services and quality of care to the clients we serve..

Sincerely,

Hardip Gill

Hardip Gill
Executive Director