



County of Los Angeles  
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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July 9, 2020

To: Supervisor Kathryn Barger, Chair  
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Supervisor Janice Hahn

From: *Cynthia McCoy Miller for*  
Bobby D. Cagle  
Director

**THE DANGERFIELD INSTITUTE OF URBAN PROBLEMS  
SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAM  
CONTRACT COMPLIANCE REVIEW**

**REVIEW OF REPORT**

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of the Dangerfield Institute of Urban Problems Short-Term Residential Therapeutic Program (STRTP) (the Contractor) in February 2020. The Contractor has four offices located in the Second Supervisorial District. The offices provide services to the County of Los Angeles DCFS placed children, Probation foster youth, children placed by other counties, and Non-Minor Dependents (NMDs).

**Key Outcomes**

NUMBER OF PRIORITY FINDINGS
PRIORITY 1 2
PRIORITY 2 12
PRIORITY 3 1

CAD conducted an on-site Contract Compliance Assessment review of the Contractor's compliance within the following applicable areas: General Contract Requirements; Facility and Environment; Engagement and Teamwork; Needs and Services Plans; Permanency and Transition Services; Education and Independent Living Program Services; Health and Medical

*"To Enrich Lives Through Effective and Caring Service"*

Needs; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Files.

The Contractor was in full compliance with 3 of 10 applicable areas of CAD's Contract Compliance Review: Engagement and Teamwork; Health and Medical Needs; and Personal Needs/Survival and Economic Well-Being.

For the purpose of this review, four DCFS placed children, two NMDs and one Probation foster youth were selected for the sample. CAD reviewed the seven children's files and interviewed four children to assess the level of care and services they received. Additionally, three discharged children's files were reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed five staff files for compliance with Title 22 Regulations and County contract requirements. To assess the quality of care and supervision provided to the placed children and foster youth, DCFS conducted site visits at the Contractor's location.

CAD noted findings in the areas of:

#### Priority 1

- Personnel Files
  - Personnel did not receive initial emergency intervention training.
  - Personnel did not receive annual on-going emergency intervention training.

#### Priority 2

- General Contracting Requirements
  - Detailed sign in/out logs were not properly maintained.
- Facility and Environment
  - Vehicle used to transport children did not have a first aid kit as required.
  - Required notices and postings of sexual health and reproductive rights were not posted or visible.
  - Adequate nutritious perishable and non-perishable food were not maintained, as there were expired food found.
- Needs and Services Plans (NSPs)
  - NSPs were not completed accurately and were not comprehensive.
- Permanency and Transition Services
  - NSPs for NMDs was not consistent with the Transitional Independent Living Plan (TILP).
  - Aftercare support services and linkages were not provided to the child and family post-discharge by the STRTP.
  - STRTP did not provide post permanency support services.

- Education and Independent Living Program Services
  - Children report cards/progress reports were not up to date, as a child's Independent Educational Plan in the file was not current.
- Personal Rights and Social/Emotional Well-Being
  - Children report that they were not informed about their rights to contraceptives and a container to lock them in.
- Personnel Files
  - Personnel did not receive on-going CSEC training.
  - Personnel did not receive on-going LGBTQ training.

Priority 3

- Facility and Environment
  - No adequate educational resources were available, as there were no working computers at the site.

On April 2, 2020, DCFS CAD MSW Intern, Children Services Administrator I and II, and Out-of-Home Care Management Division Quality Assurance Specialist held an exit conference with the Contractor's representatives.

The Contractor's representatives agreed with the review findings and recommendations, and were receptive to implementing systemic changes to improve the Contractor's compliance with regulatory standards.

The Contractor provided the attached approved Corrective Action Plan addressing the noted findings in this compliance report.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager, at (213) 351-5530.

BDC:KR  
LTI:nw

Attachments

c: Sachi A. Hamai, Chief Executive Officer  
Arlene Barrera, Auditor-Controller  
Raymond Leyva, Interim Chief Probation Officer  
Sheila Mitchell, Chief Deputy Probation Officer, Juvenile Services  
Public Information Office  
Audit Committee  
Sybil Brand Commission  
Lori Irving, Executive Director, The Dangerfield Institute of Urban Problems  
Kellee Coleman, Regional Manager, Community Care Licensing Division  
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division

Dangerfield Institute of Urban Problems  
Short-term Residential Therapeutic Program (STRTP)

May 1, 2020

To: Tiana Hardaway, *MSW Intern, Contract Compliance, Children's Social Worker III*  
Nicole Whaley, *LCSW, LPCC, Children Services Administrator I*  
**Department of Children and Family Services**  
**Administrative Support Bureau**  
**Contracts Administration Division**  
**Contract Compliance Section**  
**3530 Wilshire Blvd. 4th Floor**  
**Los Angeles, CA 90010**

### **DIUP CORRECTIVE ACTION PLAN**

The following is the Dangerfield Institute of Urban Problems STRTP Corrective Action Plan (CAP) in response to the Contract Compliance Review commencing February 11, 2020 and conducted by DCFS Contracts Administration Division (CAD) – Contracts Compliance Section. This CAP addresses the findings and recommendations identified during the Exit Conference on April 2, 2020. The Agency Administrator is responsible for ensuring CAP implementation and the Assistant Executive Director is responsible for ensuring CAP compliance. Dangerfield Institute of Urban Problems STRTP Corrective Action Plan will be completely executed by May 2, 2020.

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### **GENERAL CONTRACT REQUIREMENTS**

#### **Element #4:**

Detailed sign in/out logs are maintained

#### **CAD FINDINGS:**

Site #1, #2, #3, and #4 sign in and sign out logs do not include the name and telephone number of the person who is responsible to supervise the child while they are away from the facility. Further, the logs are not complete in entirety.

#### **CORRECTIVE ACTION PLAN:**

Dangerfield Institute of Urban Problems (DIUP) recognizes the importance of maintaining sign in and sign out logs for the minors residing in the program. Sign in and out logs are maintained at each facility. The corrective actions that addresses the CAD finding is that the STRTP staff will ensure that the name and telephone number of the person who is responsible for the child

while away from the facility is clearly written on the sign in and out log. As well, a daily review will be conducted to ensure that the logs are completed in their entirety. (see attached sign in/out logs)

## FACILITY AND ENVIRONMENT

### Element #6 Vehicles used to transport children are maintained in good repair

First aid kit (6.17)

#### CAD FINDINGS:

Car #2 did not have a first aid kit in the car at the time of inspection.

#### CORRECTIVE ACTION PLAN:

Dangerfield Institute of Urban Problems (DIUP) is committed to ensuring the safety of all children and staff during transport. The DIUP vehicle inspection policy and procedure speaks to ensuring that each vehicle has a first aid kit in every vehicle used for transporting staff and children. The corrective action plan related to the CAD finding in this area is to modify the policy and procedure to increase the frequency of vehicle inspections to ensure that all areas required for safety of passengers are compliant on the vehicle inspection log. The corrective action for this CAD finding was resolved on 4/10/2020 and the First Aid Kit is in the vehicle.

### Element #9 All required notices and postings are posted and visible. (NEW):

Sexual Health & Reproductive Rights are posted and visible (9.4)

#### CAD FINDINGS:

Site #1, #2, #3, and #4 did not have Sexual and Reproductive Rights posted. (9.4)

#### CORRECTIVE ACTION PLAN:

Dangerfield Institute of Urban Problems (DIUP) recognizes that SB89 ensures that all children, adolescents and young people have the right to make their own free and informed choices and to have control over their sexual and reproductive health. In agreement with the law, DIUP would not knowingly withhold sexual health information and access to services from any youth. The Sexual and Reproductive Rights poster was not mandated to be posted as a responsibility for the agency. In that light, the poster was not affixed to the facility information board in the STRTP placements. The corrective action for this CAD finding was resolved 4/10/2020 and the posters are affixed to the information board at all locations.

### Element #11 Adequate recreational equipment and educational resources are maintained in good repair and are readily available to children.

Access to working computers is provided. (11.3)

CAD FINDINGS:

Site #1, #3, and #4 did not have working computers at the time of inspection

CORRECTIVE ACTION PLAN:

Dangerfield Institute of Urban Problems (DIUP) contractually agreed to provide "sufficient computer access" for the children in our facilities. DIUP also recognizes the significance of providing computer access for the children to assist with homework, tutoring services, and other pertinent child-appropriate online services. During the review, the computers at the locations indicated were not working. The corrective action for this CAD finding has been resolved. DIUP has purchased new Dell computers on March 24, 2020 for each site, and they have all been installed and configured by our Technical IT Serviceman on 4/7/2020. The computers are setup with internet and equipped with programs such as Microsoft Office Suite for educational resource.

Element #12 Adequate nutritious perishable and non-perishable foods are maintained

Food storage meets USDA guidelines. (12.4)

CAD FINDINGS:

Site #1 had a package of Mission tortillas that expired on 12/22/19 and a package of Guerrero tortillas that expired on 2/23/20; Site #3 had two Pillsbury cake icings that expired on 1/11/20 and 2/2/20, a Sweet Baby Rays Secret Sauce Condiment that expired on 1/2/20, and one box of Hungry Jack Mashed Potatoes that expired on 2/8/20; Site #4 had a loaf of Nature's Way bread that expired on 2/28/20.

CORRECTIVE ACTION PLAN:

Dangerfield Institute of Urban Problems (DIUP) adheres to the Title 22 guidelines which specifies that "All food shall be selected, stored, prepared and served in a safe and healthful manner." The items noted in the CAD findings were primarily noted, with the exception on one item, to have expired within the month previous to the audit review. This finding reveals the need to enhance the internal procedure to address the frequency in which the pantry food is inventoried, and expired food discarded promptly. The corrective action for this finding is to increase the frequency of ensuring that the pantry, refrigerated and frozen foods are inventoried weekly and that appropriate action is taken to discard food items that have passed the expired freshness on the packaging. An inventory check-list is attached.

NEEDS AND SERVICES PLAN

Element #16 The NSPs were completed accurately and on time.

NSPs were comprehensive & accurate. (16.2)

## CAD FINDINGS

Child #1 6/6/19 CFT goals are to take Psychiatric medication, decrease marijuana use, and communicate when he will be late however these goals are not mentioned in the 9/26/19 NSP. 11/6/19 CFT addresses child running away and substance use, however it is not mentioned in 11/26/19 NSP; Child #4 8/24/19 and 10/24/19 NSP's DPO did not complete Probation assessment section; Child #1, #2, #3, #4, #5, #6, and #7 do not have complete monthly NSPs. The agency completes a full quarterly NSPs, however the first 17 pages of the monthly NSPs are not updated and the agency only updates the goals section of the NSP. Child #1 NSP dated 12/19/19 reflects 23 SIRS, however child has 41 SIRS; Child #2 NSP dated 12/4/19 reflects 0 SIRS, however child has 2 SIRS; Child #3 NSP dated 12/4/19 does not reflect how many SIRS were reported, however child has 21 SIRS; Child #4 NSP dated 12/24/19 does not reflect how many SIRS were reported, however child has 9 SIRS.

## CORRECTIVE ACTION PLAN:

Dangerfield Institute of Urban Problems (DIUP) recognizes the critical component of the NSP goals as the foundation for the child/NMD stabilization, future goals and ambition. DIUP also works diligently with the child/NMD and other members of the treatment team to create goals that serve to enhance the life skills and quality of life for the identified child/NMD. Goals formulated and discussed during the CFT, although agreed upon by the child/NMD and other members of the team, may not always be goals that the child/NMD are committed to long-term. As indicated in the CAD findings, the formulated goals from the CFT need to be mentioned in the NSP. As a treatment team, DIUP finds that the successful achievement of NSP goals requires child/NMD buy-in and motivation to achieve the goals. The goals from the CFT will be included in the NSP as they were established in the CFT.

The LA County Juvenile Probation Department partners with DCFS and its contractors in the provision of service to children on probation who are also in DCFS care. The probation officer assigned to the child in care communicates directly with the child and the child's STRTP case manager. The STRTP depends on the probation officer to return the data needed for the NSP section related to probation. The corrective action to address the CAD findings related to completion of the probation section of the NSP will be communicated to the probation officer by the STRTP case manager. The STRTP case manager will request that the probation officer complete and forward the required data. Once completed and forwarded to DIUP by the probation officer, the STRTP case manager responsible for completing the NSP will document the communication, and the data completed by the probation officer in the appropriate section of the NSP. If the documentation is not returned by the probation officer, follow-up communication will ensue, as well as attempts made to secure the data requested, which will also be documented in the child's hard chart maintained by DIUP.

As per the guidelines specified in the Statement of Work, "the NSP shall be updated/modified every thirty (30) days thereafter and within five (5) days submitted to the County Worker. Updates/modifications to the NSP shall address: 1) the child's need for continuing services; 2) the need for (any) modification in services; and 3) the recommendation(s) of the CFT regarding the feasibility of the child's return to their home, placement in a resource family home, placement in another facility, or move to independent living." The corrective action related to the CAD findings acknowledges that the DIUP NSP procedure will be amended and DIUP will begin implementation of monthly NSPs beginning with NSPs due 4/1/2020, and all NSPs due thereafter.

Dangerfield Institute of Urban Problems (DIUP) adheres to the SIR procedure as outlined by DCFS and CCL. Regarding the CAD findings related to SIRs not being reported in the Needs and Services Plan (NSP), DIUP recognizes the critical nature of such reporting. The corrective action plan related to the CAD finding is to ensure that NSPs are reviewed prior to submission to be inclusive of the required data for the appropriate reporting period. A training occurred on April 3<sup>rd</sup>, 2020 with all Social Workers to ensure all S.I.R.'s are included in each NSP.

#### **PERMANENCY AND TRANSITION SERVICES (NEW)**

##### **Element #23 (NEW):**

For NMDs, NSP is consistent with the TILP plan

##### **CAD FINDINGS**

Child#7 12/5/19 NSP states agency has not received a TILP from DCFS, 12/11/19 CFT notes indicate the TILP was signed during the meeting however a copy of the TILP is not in the file;

##### **CORRECTIVE ACTION PLAN:**

Dangerfield Institute of Urban Problems (DIUP) acknowledges the importance of the TILP and the established goals contained therein. The corrective action to address the CAD findings is to enhance the frequency of periodic file reviews, which will make known documentation contained in the child's hard file. In the case where documentation, such as the TILP, is not present in the file, STRTP case manager will pursue and follow-up with the respective team member(s) to ensure that the documentation is present in the minor's hard chart. The minor's hard chart will reflect the documented communication with the CSW requesting a copy of the TILP.

##### **Element #24 (NEW)**

Aftercare support services and linkages were provided to the child & family post-discharge by the STRTP

##### **CAD FINDINGS**

Child #3 discharge report does not indicate aftercare support services and linkages.

CORRECTIVE ACTION PLAN:

Dangerfield Institute of Urban Problems (DIUP) will initiate transitional linkages and aftercare support services to the child and family post-discharge. The corrective action in response to the CAD findings is to provide linkages for community resources and services accessible to all members of the community. As well, referral for aftercare services will be provided to all children and their family members when requested. Referrals for on-going therapeutic support, community 12-step meetings, and community agencies that provide prevention and aftercare will be provided to children and families. DIUP has developed collaborative relationships with many community advocates that can be utilized for linkage and referral. As well, DIUP will design and develop an aftercare program that will track post-discharge children and their families who voluntarily agree to participate in the DIUP aftercare component. The aftercare component will provide opportunities for social support networking, advocacy, continuum of care linkages and referrals, as well as on-going communication with the STRTP team. As well, former graduates from the STRTP have an opportunity to give-back to the agency through volunteer opportunities.

Element #25 (NEW)

The STRTP provided post permanency support services

CAD FINDINGS

Child #3 discharge report does not indicate aftercare support services and linkages.

CORRECTIVE ACTION PLAN:

The corrective action for this CAD finding is included in the above element #24.

EDUCATION AND INDEPENDENT LIVING SERVICES PROGRAM (NEW)

Element #29

The children's report cards/progress reports, and if applicable, current copies of IEPs are maintained in their files.

CAD FINDINGS

Child#1 IEP in file is not up to date, IEP in file is dated 11/27/18. Child's report card is not up to date the most recent report card is dated 2/19/19.

CORRECTIVE ACTION PLAN:

Dangerfield Institute of Urban Problems (DIUP) recognizes the importance of maintaining current educational records related to the child/NMD school progress. Many of the institutions of learning that the children/NMD attend are considered "non-traditional" institutions. These

non-traditional institutions have the unique capability of addressing the educational needs of the child that is placed in the STRTP. DIUP/STRTP case managers request updated school records regularly. However, many of the non-traditional schools do not grade the child's progress as a traditional school. Grades and credits to advance to the next grade level are not reflected or calculated the same as a brick and mortar middle/high school. The corrective action in response to the CAD findings is that the STRTP case manager will request the updated school records and progress reports from the school as per our policy and procedure. When difficulties arise in acquiring the requested documentation, the DIUP Educational Liaison will engage with school officials to obtain the requested information. The child/NMD hard chart record will be updated to reflect that the data has been requested from the school, and that follow-up will continue until the documentation has been received.

## PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

### Element #60

Children were informed about their right to have contraceptives and a container to lock them in. (NEW)

### CAD FINDINGS

Child #1 stated that they were not informed of their right to have contraceptives and a container to lock them in, and the agency did not document when the CSW spoke with the child about their Sexual and Reproductive rights; No-Child #2 stated that they were not informed of their right to have contraceptives and a container to lock them in, and the agency did not document when the CSW spoke with the child about their Sexual and Reproductive rights; No-Child #6 stated that they were not informed of their right to have contraceptives and a container to lock them in; #38-60 N/A- Child #3 had runaway at the time of interview, and the agency did not document when the CSW spoke with the child about their Sexual and Reproductive rights; Child #4 had runaway at the time of interview; Child #5 refused to be interviewed; Child #7 had runaway at the time of interview.

### CORRECTIVE ACTION PLAN:

As stated above in Element #9, Dangerfield Institute of Urban Problems (DIUP) recognizes that SB89 ensures that all children, adolescents and young people have the right to make their own free and informed choices and to have control over their sexual and reproductive health. The SB89 training provided to DIUP states that it is the responsibility of the CSW to provide the annual sexual health rights data to the children in care. It is the understanding from the training provided that the ownership for the conveyance of the sexual health rights information is from the LA County DCFS Caseworker to the child. The corrective action for this CAD findings is to add this right as a review objective during periodic file review of the minor's hard chart. The agency will add the SB89 form with the intake packet. the resident will be informed of their right to have contraceptives, review and sign the intake packet enclosed with the SB89 form.

## PERSONNEL FILES

### Element #83, Personnel received initial training & orientation (NEW)

Personnel received initial emergency intervention training. (83.1)

### CAD FINDINGS

Staff #1, #2 and #4 do not have initial emergency intervention training in the file.

### CORRECTION ACTION PLAN:

Staff #1, #2 and #4 have completed the initial Pro Act Training, see attached certificates confirming completion.

### Element #84, Personnel received annual on-going trainings (NEW)

Personnel has received current emergency intervention training. (84.1)

### CAD FINDINGS

Staff #1, #2 and #4 do not have emergency intervention training in the file.

### CORRECTIVE ACTION PLAN:

The ongoing training for Pro Act (emergency intervention) is 1 year from the date of the initial training, Staff #1, #2, #4 is not eligible for the ongoing training because they have not completed the entire year, all would not be eligible until April 2021. We will make sure any initial and ongoing training will be followed up with and maintained by our agency's Trainer. The Trainer will maintain records and prompt enrollment for due required Staff Trainings. Initial Pro Act Training is 16 hours and the ongoing Pro Act update is 8 hours.

### Element 84.2

Personnel has current emergency intervention training on file with the provider

### CAD FINDINGS

Staff #1 and #2 do not have emergency intervention training in the file

### CORRECTIVE ACTION PLAN:

The ongoing training for Pro Act (emergency intervention) is 1 year from the date of the initial training, Staff #1, #2, is not eligible for the ongoing training because they have not completed the entire year, all would not be eligible until April 2021. We will make sure any initial and ongoing training will be followed up with and maintained by our agency's Trainer. The Trainer will maintain records and prompt enrollment for due required Staff Trainings.

Element 84.5 (NEW)

Personnel received on-going CSEC training

CAD FINDINGS

Staff #1, #2, and #4 do not have on going CSEC training in the file

CORRECTIVE ACTION PLAN:

DIUP will ensure Staff #1, #2 and #4 enroll and complete in required Training within 90 days of 5/2/2020. DIUP will send Certificates of completion confirming training is up to date.

Element 84.6 (NEW)

Personnel received on-going LGBTQ training

CAD FINDINGS

Staff #1, #2, #4 do not have LGBTQ training in the file. Staff #3 last completed LGBTQ training was 9/12/18.

CORRECTIVE ACTION PLAN:

DIUP will ensure Staff #1, #2 and #4 enroll and complete in required Training within 90 days of 5/2/2020. DIUP will send Certificates of completion confirming training is up to date.

Element 84.8 (NEW)

Personnel received 2 hours of on-going developmentally disabled training

CAD FINDINGS

Staff #1, #2, and #4 do not have ongoing developmentally disabled training in the file

CORRECTIVE ACTION PLAN:

DIUP will ensure Staff #1, #2 and #4 enroll and complete in required Training within 90 days of 5/2/2020. DIUP will send Certificates of completion confirming training is up to date.

*Lorrie Irving*

Lorrie Irving, Assistant Executive Director

Date: 5/1/20











DANGERFIELD INSTITUTE  
of URBAN PROBLEMS

## Home Pass/Off-Grounds Activity Request

Client Name: \_\_\_\_\_ Todays Date: \_\_\_\_\_

### DATES REQUESTING

LEAVING: \_\_\_\_\_  
DATE TIME

RETURNING: \_\_\_\_\_  
DATE TIME

PURPOSE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### DESTINATION

Person Supervising: \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone #: \_\_\_\_\_

### TRANSPORTATION

Mode of Transportation (bus,car,walking): \_\_\_\_\_

#### **IF BY CAR:**

Person picking you up: \_\_\_\_\_

Driver's License #: \_\_\_\_\_ (one time only)

#### **IF BY BUS:**

Time Arrived to Destination: \_\_\_\_\_ Verified: \_\_\_\_\_ (staff initials)

Time Leaving Destination: \_\_\_\_\_ Verified: \_\_\_\_\_ (staff initials)

Time Arrived at Group Home: \_\_\_\_\_ Verified: \_\_\_\_\_ (staff initials)

### Staff Verified Completion of:

- |                                       |  |
|---------------------------------------|--|
| <input type="checkbox"/> HOMEWORK HRS | <input type="checkbox"/> EMANCIPATION HRS              |
| <input type="checkbox"/> ROOM CLEAN   | <input type="checkbox"/> CHORES                        |
| <input type="checkbox"/> MEDS GIVEN   | <input type="checkbox"/> MEDS RETURNED (if applicable) |
| <input type="checkbox"/> EVAL GIVEN   | <input type="checkbox"/> EVAL RETURNED                 |

Staff has given MEDS to client (if applicable) \_\_\_\_\_  
Staff Print Name

Staff has given the Home Evaluation Form to client \_\_\_\_\_  
Staff Print Name

Facility Social Worker Approved: \_\_\_\_\_

ALEXIS ESTWICK, MSW

CERTIFIES THAT

JOHN STUART

HAS SUCCESSFULLY COMPLETED 16 HOURS OF TRAINING

Pro-Act Initial Certificate  
Professional Assault Crisis Training  
This classes was conducted at Dangerfield  
This certificate is good for one ( 1 ) year

APRIL 4-5, 2020

*Alexis Estwick, MSW*

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ALEXIS ESTWICK, MSW

ALEXIS ESTWICK, MSW

CERTIFIES THAT

VICTOR CLEMENTS

HAS SUCCESSFULLY COMPLETED 16 HOURS OF TRAINING

Pro-Act Initial Certificate

Professional Assault Crisis Training

This classes was conducted at Dangerfield

This certificate is good for one ( 1 ) year

APRIL 4-5, 2020

*Alexis Estwick, MSW*

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ALEXIS ESTWICK, MSW

ALEXIS ESTWICK, MSW

CERTIFIES THAT

LATOYA LEWIS

HAS SUCCESSFULLY COMPLETED 16 HOURS OF TRAINING

Pro-Act Initial Certificate  
Professional Assault Crisis Training  
This classes was conducted at Dangerfield  
This certificate is good for one ( 1 ) year

**APRIL 4-5, 2020**

*Alexis Estwick, MSW*

ALEXIS ESTWICK, MSW