County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
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August 26, 2011

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

From: Philip L. Browning
Interim Director

WEST COVINA GROUP HOME 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.

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 the agency's program statement, its goal is to "help youths 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 males, ages 11-17 years old.

The Out-of-Home Care Management Division (OHCMD) conducted a review of West Covina Group Home in February 2011, at which time the agency had one six-bed site and six placed DCFS children. The placed children's overall average length of placement was seven months, and their average age was 16. For the purpose of this review, all currently placed children were interviewed and their case files were reviewed. Six staff files were reviewed for compliance with Title 22 regulations and contract requirements.

Four children were on psychotropic medication. We reviewed their case files 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 West Covina Group Home's compliance with the contract and State regulations. The visit included a review of the agency's program statement, administrative internal policies and procedures, six children's case files, and a random sample of personnel files. A visit was made to the site to assess the quality of care and supervision

provided to children, and interviews were conducted 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

Generally, West Covina Group Home was providing services as outlined in its program statement. The children's case files and personnel files were well-organized and professionally maintained. The site was clean and adequately landscaped. All six children interviewed disclosed that they felt safe at the Group Home.

At the time of the review, the Group Home needed to address a few minor physical plant deficiencies which did not pose a safety hazard to any placed children. The Group Home also needed to develop comprehensive Needs and Services Plans (NSP), ensure that DCFS Children's Social Workers' (CSW) monthly contacts were appropriately documented in the NSPs, and maintain current court-approved authorizations for the administration of psychotropic medication along with a current psychiatric evaluation/review for each child on psychotropic medication.

The Administrator and her staff were receptive to implementing the recommendations and correcting the deficiencies noted.

NOTABLE FINDINGS

The following are the notable findings of our review:

- Screens on the garage door were torn and needed to be replaced. The kitchen stove needed cleaning, and one bicycle needed to be repaired or replaced. The Administrator had the screen door replaced, the stove cleaned and assigned a chores list to staff ensuring that the stove would be cleaned after each use. The bicycle was thrown away as the resident using the bicycle was discharged. The OHCMD Monitor made an unannounced visit to the Group Home in June 2011 and verified that the corrective actions had been implemented.

- Five initial NSPs were reviewed; an initial NSP for one child had already been reviewed in 2009. Ten updated NSPs were reviewed. Four of five initial NSPs and five of 10 updated NSPs were comprehensive and met all the required elements in accordance with the NSP template. The remaining six NSPs did not contain adequate details on Group Home contact with CSWs and some did not have signatures from the children and/or the CSW. The Administrator stated that in the future all email and telephone contacts with the CSWs would be documented in the children's files. Further, the Facility Manager would be responsible for immediately faxing NSPs to the CSWs for their approval, and a copy of the fax confirmation sheet verifying the date and time the NSP was faxed will be attached to the NSP. The Facility Manager will also make an appointment with the DCFS CSW to go to his/her office to get the NSP signed.

- No current court-approved authorization for the administration of psychotropic medication was found for one child who has since been discharged from the Group Home. No current psychiatric evaluation/review was found for another child who was on psychotropic medication. The Administrator reported that the psychiatrist stated the psychiatric evaluation was not necessary because the child was "tapering off" medication. This child has since been discharged from West Covina Group Home.

- One child disclosed during the interview that he was not involved in selecting his clothing. The Administrator stated that the Group Home always allowed the children to pick their own clothes but this child was gaining weight and was repeatedly selecting clothes that were too small for him, so staff helped him select appropriate clothing.

- Three children said that they were not encouraged or assisted in creating and updating a life book/photo album. One child disclosed during his interview with the Monitor that he kept his pictures in his camera. The Administrator said that some of the children stored pictures in their cameras. In the future, she indicated she would make sure all the children have a life book/photo album.

- One staff's Child Abuse Central Index (CACI) clearance was not found. The same staff had signed the Criminal Background Statement 13 days after hire date. The Administrator stated that this staff was not allowed to work until criminally cleared, and the staff's criminal clearance has since been submitted to OHCMD. Another staff's First Aid certification was not current. This staff has since updated his First Aid certification, and a copy was submitted to OHCMD.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held March 21, 2011:

In attendance:

Tonya Alexander, Administrator, West Covina Group Home, and Kirk Barrow, Monitor, DCFS OHCMD.

Highlights:

During the exit conference, the Administrator stated that the Group Home would make sure that the Group Home contacts with the CSWs are documented in detail in the NSPs and that the children's and DCFS CSWs' signatures are obtained. She noted that the Group Home did make attempts to get CSWs' signatures; however, the NSPs reviewed did not have the signatures or documentation that they had been requested.

The draft report was sent to the Group Home Administration for comments. As no problems were reported with the report, OHCMD proceeded with finalizing the report.

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

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

PLB:RS:KR
EAH:DC:kb

Attachments

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
Barbara Okonkwo, President, Board of Directors, West Covina Group Home
Hardip Gill, Executive Director, West Covina Group Home
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

WEST COVINA GROUP HOME
PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

4041 Carroll Court
Chino, California 91710
License Number: 360911241
Rate Classification Level: 11

	Contract Compliance Monitoring Review	**Findings: February 2011**
I	**Licensure/Contract Requirements** (9 Elements) 1. Timely Notification for Child's Relocation 2. Stabilization to Prevent Removal of Child 3. Transportation 4. SIRs 5. Compliance with Licensed Capacity 6. Disaster Drills Conducted 7. Disaster Drill Logs Maintenance 8. Runaway Procedures 9. Allowance Logs	Full Compliance (ALL)
II	**Facility and Environment** (6 Elements) 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non-Perishable Food	1. Improvement Needed 2. Improvement Needed 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance
III	**Program Services** (8 Elements) 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Therapeutic Services Received 6. Recommended Assessments/Evaluations Implemented 7. DCFS CSWs Monthly Contacts Documented 8. Comprehensive NSPs	1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed 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	Full Compliance (ALL)

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 Psychiatric 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 Conducted 8. Initial Dental Exams Timely 9. Follow-Up Dental Exams Timely	1. Improvement Needed 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance
VII	**Personal Rights** (11 Elements) 1. Children Informed of Group 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 2. Adequate Quantity of Clothing Inventory 3. Adequate Quality of Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance

	8. Encouragement and Assistance with Life Books	8. Improvement Needed
IX	**<u>Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)</u>** (12 Elements)	
	1. Education/Experience Requirement	1. Full Compliance
	2. Criminal Fingerprint Cards Timely Submitted	2. Full Compliance
	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. Full Compliance
	7. Signed Copies of GH Policies and Procedures	7. Full Compliance
	8. Initial Training Documentation	8. Full Compliance
	9. CPR Training Documentation	9. Full Compliance
	10. First Aid Training Documentation	10. Improvement Needed
	11. On-going Training Documentation	11. Full Compliance
	12. Emergency Intervention Training Documentation	12. Full Compliance

WEST COVINA GROUP HOME
PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

4041 Carroll Court
Chino, California 91710
License Number: 360911241
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The following report is based on a "point in time" monitoring visit and is intended only to report on the findings noted during the February 2011 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review of six children's case files and six staff files, and/or documentation from the provider, West Covina Group Home was in full compliance with four of nine sections of our Contract Compliance Review: Licensure/Contract Requirements, Educational and Emancipation Services, Recreation and Activities, and Personal Rights. The following report details the results of our review.

FACILITY AND ENVIRONMENT

Based on our interview with the six children and/or documentation from West Covina Group Home, the agency fully complied with three of six elements reviewed in the area of Facility and Environment.

The Group Home had an appropriate quantity and quality of reading materials, and educational resources and supplies including computers were readily available to children. Children's bedrooms were well-maintained and the Group Home maintained a sufficient supply of perishable and non-perishable foods. Generally, the exterior of the Group Home was well maintained, although screens on the garage door were torn and needed to be replaced. The kitchen stove needed cleaning and one bicycle needed to be repaired or replaced. The Administrator reported the screen door had been replaced, the stove had been cleaned and a chore list was assigned to staff to ensure that the stove is clean after each use. The bicycle has since been thrown away because the resident who was using the bicycle had been discharged. The OHCMD Monitor made an unannounced visit to the Group Home in June 2011, and verified that the corrective actions were implemented.

Recommendations:

West Covina Group Home Management shall ensure that:

1. The Group Home's exterior and grounds are well maintained.

2. Common quarters are well maintained.

3. It maintains sufficient age appropriate recreational equipment in good condition.

PROGRAM SERVICES

Based on our review of six children's files and/or documentation from the provider, West Covina Group Home fully complied with six 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 its program statement, were assessed for needed services within 30 days, and were receiving required therapeutic services.

Five initial NSPs were reviewed; an initial NSP for one child had already been reviewed in 2009. Ten updated NSPs were reviewed. Four of five initial NSPs and five of ten updated NSPs reviewed were comprehensive and met all the required elements in accordance with the NSP template. The NSPs did not have adequate details on Group Home contact with Children's Social Workers (CSW), and some did not have signatures from the child and/or the CSW. The Administrator stated she would ensure the Group Home therapist gave more details on the Group Home contacts with the CSWs in the NSPs and make sure the children and CSWs sign the NSPs. In the future, she indicated all email and telephone contacts with the CSWs would be documented in the children's files. Further, the Facility Manager will be responsible for immediately faxing NSPs to CSWs for their approval, and a copy of the fax confirmation sheet verifying the date and time the NSP was faxed will be attached to the NSP. The Facility Manager will be responsible for making an appointment with the CSW to go to his/her office to have the NSP signed.

Recommendations:

West Covina Group Home Management shall ensure that:

4. Comprehensive NSPs are developed.

5. The Group Home's monthly contacts with CSWs are appropriately documented.

CHILDREN'S HEALTH-RELATED SERVICES, INCLUDING PSYCHOTROPIC MEDICATION

Based on our review of six children's case files and interviews with all six children, West Covina Group Home fully complied with eight of nine elements in the area of Children's Health-Related Services, including Psychotropic Meciation.

Initial and follow-up medical and dental examinations were conducted timely, and medication logs were properly maintained, including for those on psychotropic medication. No current court-approved authorization for the administration of psychotropic medication was found for one child who has since been discharged from West Covina Group Home. No current psychiatric evaluation/review was found for another child who was on psychotropic medication. The Administrator stated they were informed by the psychiatrist that a psychiatric evaluation was not necessary since the child was "tapering off" medication. This child has since been discharged from West Covina Group Home.

Recommendations:

West Covina Group Home Management shall ensure that:

6. All children have current court-approved authorizations for the administration of psychotropic medication.

7. All children on psychotropic medication have a current psychiatric evaluation.

CLOTHING AND ALLOWANCE

Based on our review of six children's case files and interviews, West Covina Group Home fully complied with six of eight elements reviewed in the area of Clothing and Allowance.

Based on our review, children were provided with at least $50 per month clothing allowance. The clothing provided to children was of good quality. The children interviewed reported that the Group Home provided them with the required minimum weekly allowance, and all children reported that they spent their allowance as they chose.

The Group Home provided children with adequate personal care items appropriate to their ethnic needs, and the items were readily accessible. Based on our review, the clothing provided to the children was of good quality, however one child disclosed during the interview that he was not involved in selecting his clothing. The Administrator stated that the Group Home always allowed the children to pick their own clothes but this child was gaining weight and was repeatedly selecting clothes that were too small for him so staff helped him select appropriate clothing.

Three children said they were not encouraged and assisted in creating and updating a life book/photo album. One child disclosed during his interview with the Monitor that he kept his pictures in his camera. The Administrator said that some of the children stored pictures in their cameras. In the future she will make sure all the children have a life book/photo album.

Recommendations:

West Covina Group Home Management shall ensure that:

8. Children are given opportunities to select their own clothing.

9. Children are encouraged and assisted in creating life books/photo albums.

PERSONNEL RECORDS

Based on our review of six staff personnel files, and/or documentation from the provider, West Covina Group Home fully complied with nine of 12 elements reviewed in the area of Personnel Records.

All six staff reviewed met the educational/experience requirements and submitted timely criminal fingerprint cards. They received timely health screenings, had valid driver's licenses,

completed CPR, and had initial and on-going training. All six staff signed copies of Group Home policies and procedures and received emergency intervention training. One staff's Child Abuse Central Index (CACI) clearance was not found, and he had signed the Criminal Background Statement 13 days after hire. The Administrator stated this staff was not allowed to work until criminally cleared. The staff's criminal clearance has since been submitted to OHCMD. Another staff's First Aid certification was not current. This staff has since updated his First Aid certification and a copy was submitted to OHCMD.

Recommendations:

West Covina Group Home Management shall ensure that:

10. Staff Child Abuse Central Index (CACI) clearances are submitted timely.

11. Appropriate employees sign a criminal background statement in a timely manner.

12. Appropriate employees received First-Aid training.

FOLLOW-UP FROM THE 2009 MONITORING REVIEW

Objective

Determine the status of the recommendations reported in the 2009 monitoring review.

Verification

We verified whether the outstanding recommendations from the 2009 review issued December 31, 2009 were implemented.

Results

OHCMD's prior monitoring report contained 17 outstanding recommendations. Specifically, West Covina Group Home was to develop comprehensive NSPs; and assure that CSWs approve the implementation of the NSPs, monthly contacts with CSWs are adequately documented and recommendations of psychological assessments/evaluations are implemented to meet the children's needs. West Covina Group Home was also to ensure that the Group Home site is maintained in good repair in accordance with Title 22 regulations; that children are given the opportunity to participate in planning activities and participate in age-appropriate extra-curricular, enrichment, and social activities in which they have an interest.

West Covina Group Home management was to ensure that dental examinations are done timely, that children on psychotropic medication have current court authorizations, that children who take psychotropic medication know why they are taking each medication and that medication distribution logs are correctly maintained and documented. They were also to ensure that the voluntary safety plan developed by the Group Home is maintained and the point system is executed accurately and fairly by regularly training staff on appropriate and acceptable discipline measures. In addition, the Group Home was to assure that children

were encouraged and assisted in creating and maintaining life books/photo albums. Finally, all staff members must sign in for all training sessions.

Based on our follow-up of these recommendations, West Covina Group Home fully implemented 12 of the 17 recommendations from 2009. West Covina Group Home did not implement the recommendation regarding development of comprehensive NSPs or the recommendation that monthly contacts with CSWs are adequately documented. The Group Home site was not maintained in good repair in accordance with Title 22 regulations. All children on psychotropic medication did not have a current authorization, and children were not encouraged and assisted in creating and maintaining life book/photo albums. As noted, corrective action was requested of West Covina Group Home to further address the recommendations that were not implemented.

Recommendation:

West Covina Group Home Management shall ensure that:

13. It fully implements the December 31, 2010 outstanding recommendations from the 2009 monitoring report, which are noted in this report as Recommendations 1, 4, 5, 6, and 9.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER (A-C)

A fiscal review of West Covina Group Home has not been posted by the A-C.

West Covina Group Home II

Memo

To: Kirk Barrow, Group Home Monitor
barrok@dcfs.lacounty.gov

From: Tonya Alexander, Administrator

CC: Hardip Gill, Director
Dorothy Channel, Out of Home Care Management Division
channd@dcfs.lacounty.gov

Date: May 26, 2011

Re: "CAP" Revisions 2011

GROUP HOME CONTRACT COMPLIANCE REVIEW FIELD EXIT SUMMARY:

OHCMD Findings:
II. FACILITY AND ENVIRONMENT
10. Are the group home's exterior and grounds well maintained?
Screens on garage door are torn and needs to be replaced.

CAP: The screen door has been replaced.

OHCMD Findings:
11. Are common quarters will maintained?
Kitchen stove needs cleaning.

CAP: The stove has been cleaned and staff has a chore list which will ensure that the stove is cleaned after each use.

OHCMD Findings:
13. Does the group home maintain sufficient recreational equipment in good?
Condition and age appropriate?
Bicycle needs repairs or replacement.

CAP: Bicycle has since been thrown away.

OHCMD Findings:
III. PROGRAM SERVICES

17. Did the group home obtain the DCFS CSWs authorization to implement the Need and Service Plan?

CAP: WCGH Management will conduct a meeting with our contracted therapist to address NSP requirements The comprehensive factor will be stressed. If additional training or clarification is needed, the contract therapist will be required to meet the group homes OHCMD Monitor. All future NSPs will include the following:

1) Case Plan Goal (Permanency) will be specific and congruent with the comments field. The concurrent case plan goal will be documented. This information will be requested from each child's CSW upon intake.
2) Education section will be comprehensive and will address all fields specific to the child (GPA, CAHSEE status, IEP status, etc.) as well as Childs academic strengths/deficits. The Child's file will contain al educational information.
3) NSP Treatment & Visitation section will be thorough. It will include specifics (who, where, show, how). If for any reason the child does not have visits, there will be an explanation of the interventions being made and /or efforts to locate a significant person.
4) Life Skills Training/Emancipation Preparation section will be specific. Although WCGH already focuses on life skills and emancipation preparation, it was not clearly documented for the therapist to include in the NSP's.
5) All SIR's will be clearly documented in the Special Incident Reports section.
6) Identified Treatment Needs/Outcome Goals will be child specific and pertinent to each child. Goals will be measurable and attainable. If goals are not met in the 90-day timeframe, goals will be modified and the dated extended for the child achieve.
7) Upon receipt of initial NSP's and updates, The Facility Manager will be responsible for immediately faxing to DCFS Social Workers for approval. The Facility Manager will attach a copy of the fax confirmation sheet verifying the date and time the NSP was faxed. The Facility Manager will follow up via telephone. If unable to reach the DCFS Social Worker, the Facility Manager will contact the SCFS Social Worker Supervisor or the DCFS On-Duty Social Worker for approval. The Facility Manager will also make an appointment with the DCFS Social Worker to go to his/her office to get the NSP signed as a last resort. The Facility Manager will ensure all NSP's are approved and signed by all required parties.

The administrator and Facility Manager will review all NSP's on a monthly basis to ensure this process is followed and all NSP's are comprehensive and meet its requirements.

OHCMD Findings:
22. Are DCFS CSWs contacted monthly and are the contacts appropriately documented?
NOTE: Other NSP related questions are addressed in the Performance Measures Review.
No CSWs signature found on NSPs for Anthony S and Abraham V and no other evidence that CSW authorized NSP. Anthony S. said he was not sure if he participated in the development of the NSPs and his signature was not on the NSPs. David G and Anthony S is not prescribed psychotropic medication. No Group Home contacts with CSWs documented in NSPs for Alexander G, Donovan J Joshua R Anthony S and Abraham V Did the Treatment team develop comprehensive Needs and Service Plans: Alexander BSP dated 1/10/11 has not signatures, no group home contacts with CSW documented in NSP dated 1/10/11. No child and CSW signatures in NSPs 10/10/11. Donovan's NSP dated 9/24/10, no group home contact with CSW found. Joshua's updated NSP dated

1/2/11 needs more details in group home contacts with CSW. Anthony's initial NSPs dated 9/10/10 have no signatures for any.

CAP: NSP Treatment & Visitation section will be thorough. It will include specifics (who, where, show, how). If for any reason the child does not have visits, there will be an explanation of the interventions being made and/ or efforts to locate a significant person. The facility manager will be in charge of making sure each resident have a mentor if they don't have family contact. The DCFS Social Worker will be informed bi-monthly on resident progress.

DCFS Social Workers will be contacted at least once monthly by the Facility Manager on the progress of the resident by email or phone contact. The emails will be put in residents file for documentation.

When a resident's NSP is ready to be reviewed the resident will have a meeting with the Therapist and facility Manager to discuss the NSP. We will also have a cover sheet that the resident will be required to sign stating that they have participated in there NSP and they understand what they have read and are satisfied with their progress.

All residents that don't have family contact will be offered a mentor. If for some reason the resident declines the suggestion, it will be documented in a SIR.

OHCMD Findings:

VI. CHILDREN'S HEALTH RELATED-SERVICES, INCLUDING PSYCHOTRIPIC MEDICATION

30. Are there current court-approved authorizations for the administration of psychotropic medication?

CAP: Upon placement, if a child is on Psychotropic Medication the Facility Manager will request a copy of the current Psychotropic Medication Authorization (PMA) along with the placement packet. If the child does not have a current PMA, the Facility Manager will contact the CSW and /or child's previous placement on the day of placement. If for any reason the Facility Manager is unable to obtain the current PMA, the Facility Manager will schedule an appointment with the facilities Psychiatrist to complete the PMA immediately. The Psychiatrist will attach a copy of the fax verification form verifying the PMA has been sent to the court and approval is pending. The Facility Manager will closely reviews all PMA's to ensure the medication listed is consistent with the child's current medication and dosage instructions. When a physician changes or adjust a child's medication, Group Home Management will make sure the PMA is revised accordingly and submitted to court for approval. If a psychiatrist prescribes medication on an emergency basis. The agency will follow up all DCFS policy requirements. A copy of the PMA will be completed by the prescribing Psychiatrist and sent to the court for approval. The Psychiatrist will attach a copy of the fax verification form verifying the PMA has been sent to the court and approval is pending. All authorizations will be placed in residents file. If the resident is placed by the parent then there is a signature page on file by the parents authorizing the Group Home to administer medication to the resident. This process will be overseen by Group Home Administrator, to ensure compliance.

OHCMD Findings:

31. Is there a current psychiatric evaluation/review for each child on psychotropic medication?

CAP: Upon placement of each resident that is prescribed psychotropic medication the Facility Manager will schedule an appointment with the Facility Psychiatrist for evaluation of medication. . If the child does not have a current PMA, the Facility Manager will contact the CSW and /or child's previous placement on the day of placement. If for any reason

the Facility Manager is unable to obtain the current PMA, the Facility Manager will schedule an appointment with the facilities Psychiatrist to complete the PMA immediately.

OHCMD Findings:

VIII. CLOTHING AND ALLOWANCE

53. Are children involved in the selection of their clothing?

CAP: All residents are given a monthly allowance. In the event that a resident ask the staff to shop for him a SIR will be completed and the resident must sign the document giving staff permission to shop the his clothes.

IX. PERSONNEL RECORDS

60. Did appropriate employees sign a criminal background statement in a timely manner?

61. Have appropriate employees received First-Aid Training?

CAP: Upon employment with West Covina Group II, all staff will be required to complete the following before employment can began:

a. Complete a Criminal Background Statement upon hire.
b. Within 30 days of employment CPR and 1st aid training must be completed.
c. Current DMV print out, Copy of Driver's License and Copy of Social security card
d. Pro-act training prior to physical contact with any resident.
e. 40 hours of training prior to working with residents.

Note: Staff will be given a Memo during the hiring process that they are responsible for monthly training hours and certificates. It is the Facility Manager responsibility to make sure that all records are checked on a monthly basis to ensure that all certificates and training classes are current per Title XXII, Section 84065 (A) (6).

Tonya Alexander

Tonya Alexander – Administrator

6/26/11

Date