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DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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March 7, 2012

To: Supervisor Zev Yaroslavsky, Chairman
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From: Philip L. Browning
Director

HILLSIDES GROUP HOME PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

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

The Hillsides Group Home (Hillsides) has three sites located in the 5th Supervisorial District and one site located in the 1st Supervisorial District, and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to Hillsides Group Home program statement, its goal is "to stabilize children, re-educate the families and reunify children with their families as soon as possible." Hillsides Group Home is licensed to serve the capacity of 66 children, ages 6 through 17.

The Out-of-Home Management Division (OHCMD) conducted a review of the Hillsides Group Home in March 2011, at which time the Agency had 13 DCFS placed children, nine of whom were males and four females. The sampled children's overall length of placement was seven months, and the average age was 15. For the purpose of this review, ten sampled children were interviewed and their case files were reviewed. Ten staff files were reviewed for compliance with the Title 22 Regulations and contract requirements.

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

SCOPE OF REVIEW

The purpose of this review was to assess Hillsides Group Home's compliance with the contract and State Regulations. The visit included a review of Hillsides' program statement, administrative internal policies and procedures, ten children's case files, and a random sampling of personnel files. Visits were made to all of the sites to assess the quality of care and supervision provided to children, and we conducted interviews with the children to assess the care and services they were receiving.

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

SUMMARY

Generally, Hillsides was providing the services as outlined in its program statement. The children interviewed indicated that they enjoyed the daily recreation activities, were happy with their clothing and glad to have their own bedroom.

At the time of the review, the Group Home needed to address the issue of disaster drills being conducted at least every six months at the four sites, as well as fire drills on the main campus. At the time of the review, these drills were being initiated through the on-campus school during school hours, but not on weekends and in the evenings. The visit also revealed expired food in the main campus kitchen, as well as no system for dating and logging the delivery of food to ensure that the children were served fresh food. A few children discussed not being provided second helpings of food on the main campus and all of the sites did not maintain a Sign-In/Sign-Out Log.

Hillsides Group Home was receptive to implementing some systemic changes to improve their compliance with regulations and the Foster Care Agreement.

NOTABLE FINDINGS

The following are the notable findings of our review:

- The main campus kitchen contained expired food with no tracking system to determine when food was received and when it expired. The Agency representatives immediately removed the expired food and stated that they employ an outside company to supply and prepare all of the on-campus food. They further explained that they have sub-contracted their food service for many years due to the difficulty of employing and staffing kitchen help. The Agency

has an employee who provides the oversight and will ensure that all food is dated when it arrives and that expired food is discarded.

- One child's Psychotropic Medication Authorization (PMA) was not submitted to Court in a timely manner. The Agency representatives stated that the Dependency Court would not accept the PMA renewal until they were nearly expired; therefore this PMA was submitted to Court the day before it expired with the approval arriving after the prior PMA had expired.

- Some children did not receive a timely initial medical and/or dental examination. The Nursing Supervisor stated that the children were placed in the Group Home with current physical and/or dental examinations; however, the review revealed that the Agency did not obtain the applicable children's medical and/or dental examinations in a timely manner.

- One child said she did not feel safe in the Group Home or treated with dignity and respect. She described feeling provoked by a few staff members in the Group Home, and that she had previously been restrained with too much force. The DCFS OHCMD monitor reported this allegation to the Child Protection Hotline on June 10, 2011. The referral was investigated by DCFS ERCP and deemed inconclusive. The allegation was discussed with the youth's therapist and the Administrator. The youth had never disclosed this allegation, or the alleged bruise to the upper left arm to her therapist. Another child did not feel safe due to feeling provoked by other children. According to the Cottage Supervisor, the child perceives children being helpful as provocation, and that this child may play too hard with the other children and get mad when they ask him to stop. The Agency representatives stated that they are concerned with any child feeling unsafe and will look into both of these matters to ensure these two children feel safe. Further investigation by DCFS OHCMD is pending Community Care Licensing (CCL) completing their investigation.

- A few children reported not being satisfied with meals and/or snacks because they felt that the second serving was not always adequate. The Agency representatives stated that they struggle with the children's obesity and subsequent lack of confidence and depression and attempt to steer the children toward making healthy food choices. The Agency representatives further stated that they have explored smaller first portions, anticipating the children having a second serving and eating too much food. The Agency representatives may explore smaller plates in an effort to limit the food portions. Also, the Agency representatives noted that one of the sampled children had gained 39 pounds since admission, although they provide a structured, daily recreation program, along with their on-grounds, built-in swimming pool. Subsequently, the child was enrolled in two pediatric obesity classes through Huntington Memorial Hospital. Furthermore, the Agency is exploring the possibility of implementing a Weight Watcher's group for the children, modeling the one they currently provide for

their staff members. Although the Agency believes that group support is very important in obtaining success, the children have not agreed to the Weight Watcher's program, due to their perceived notion of the weigh-in process. However, the Agency stated that on an individual basis, three children have joined two particular outside fitness programs. Additionally, another child prefers the pre-packaged meals, so the Agency is exploring a particular weight loss program which includes pre-packaged foods.

- Some children reported that they did not know that they had the right to refuse medical/dental/psychiatric care, psychotropic medication and be informed of their prescribed psychotropic medication. The Agency representatives stated that the children's psychiatrist and therapist will continue to inform and reiterate to the children their rights related to receive or reject medical, dental, psychiatric treatment and prescribed psychotropic medication, as well as educate them of their prescribed psychotropic medication.

- A few children reported not having the opportunity to create a life book/photo album. The Agency representatives stated that three children are relatively new to the Agency; however the Agency will encourage participation in activities that include making life books/photo albums. The Agency representatives further stated that during the orientation process for new children, the Agency will reiterate the children's involvement in creating these life books.

- Some of the reviewed Needs and Services Plans were not comprehensive. The Agency representatives acknowledged the deficiency and stated that they will provide training for their therapists.

- There were some personnel issues at the time of the review. One staff member's personnel file did not contain verified work experience and one staff member did not meet the requirements in the Hillsides' program statement's job description. In the Corrective Action Plan (CAP), the Agency provided verified work experience for the one staff member and stated that the job description for the other staff member had been revised. The revised job description was forwarded to Community Care Licensing (CCL) and DCFS Contracts section for approval and to be incorporated into the Hillsides Group Home Program Statement. Also, one staff member did not have a timely Criminal Clearance and another staff member did not have a timely Criminal Background Statement and Tuberculosis Clearance. The Agency representatives stated that they have improved their hiring process since 1991 and 2000, when these two staff members were hired. Additionally, a personnel file contained insufficient documentation of receiving the required initial training and some staff members did not have a current and/or timely certificates in CPR, First-Aid and/or Pro-Act. The Agency provided a written statement that these staff members will never be left alone with the children until they have received their required certificates.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held August 10, 2011.

In attendance:

Susanne Crummey, Administrator, Hillsides; Jeanne Williams, Ph.D., Director of Treatment Services and Kristine Kropke Gay, Monitor, OHCMD, DCFS.

Highlights:

Hillsides Group Home was in agreement with our presented findings and recommendations. In regards to personnel issues, the Agency representatives stated that the staff members' job description had been revised and the revised job description would be sent to Community Care Licensing (CCL) and DCFS Contracts section for approval and incorporation into the current Hillsides Group Home's program statement. Also, the Agency representatives explained that they have improved their hiring procedures since these two employees were hired to prevent untimely Criminal Clearances, Criminal Background Statements and Tuberculosis Clearances. The Agency representatives stated that they will conduct CPR, First-Aid, Pro-Act and Pro-Act Refresher training on a more frequent basis in order to reduce the likelihood of staff members not having the required certificates or the emergency intervention plan refresher course, and that uncertified staff members will not be allowed to work alone with a child.

In regards to the expired food, the Agency representatives immediately removed the expired food and stated that they employ an outside company to supply and prepare all of the on-campus food. They further explained that they have subcontracted their food service for many years, and found it necessary due to the difficulty of employing and staffing kitchen help. The Agency has an employee who provides the oversight and will ensure that all food is dated when it arrives and that expired food is discarded.

Also, in discussing the children receiving second helpings, the Agency representatives stated that they struggle with the children's obesity and subsequent lack of confidence and depression. The Agency attempts to steer the children toward making healthy food choices. The Agency representatives further stated that they have explored smaller first portions, in anticipation of the children having second servings. The Agency may also explore smaller plates in an effort to limit the food portions. It was noted that one of the sampled children had gained 39 pounds since admission, although the Agency provides daily recreation for the children. The Agency is exploring the possibility of implementing a Weight Watcher's group for the children, modeling the one they currently provide for their staff members.

Regarding the children's personal rights issues related to accepting or rejecting treatment and being informed of their prescribed psychotropic medications, the Agency representatives stated that the children's therapist and psychiatrist continually educate the children and will continue to do so.

As agreed, Hillsides Group Home provided a timely written Corrective Action Plan (CAP), addressing each recommendation noted in this compliance report. The approved CAP is attached. DCFS OHMD will follow-up on the implementation of the recommendations during the next monitoring review.

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:kkg

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Deborah L.S. Booth, President, Board of Directors, Hillsides
Joseph M. Costa, Executive Director, Hillsides
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

HILLSIDES GROUP HOME PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

SITE LOCATIONS

Main Campus
940 Avenue 64
Pasadena, California 91105
License Number: 191200313
Rate Classification Level: 12

On-Campus Satellite (OCS)
940 Avenue 65
Los Angeles, California 90042
License Number: 191801995
Rate Classification Level: 12

Girls Satellite Home (GSH)
873 north Hill Avenue
Pasadena, California 91104
License Number: 191290639
Rate Classification Level: 12

Boys Satellite Home (BSH)
873 North Hill Avenue
Pasadena, California 91001
License Number: 191200838
Rate Classification Level: 12

	Contract Compliance Monitoring Review	**Findings: March 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. Needs Improvement 2. Needs Improvement 3. Needs Improvement 4. Full Compliance 5. Full Compliance 6. Needs Improvement
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	1. Full Compliance 2. Full Compliance 3. Full Compliance

	4. NSPs Implemented and Discussed with Staff 5. Therapeutic Services Received 6. Recommended Assessments/Evaluations Implemented 7. DCFS CSWs Monthly Contacts Documented 8. NSPs Comprehensive	4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Needs Improvement
IV	**Education and Emancipation Services** (4 Elements) 1. Emancipation/Vocational Programs Provided 2. ILP and 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. Needs Improvement 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Needs Improvement 6. Full Compliance 7. Full Compliance 8. Needs Improvement 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	1. Full Compliance 2. Needs Improvement 3. Needs Improvement 4. Needs Improvement 5. Full Compliance

	6. Children Free to Receive or Reject Voluntary Medical, Dental, and Psychiatric Care	6. Needs Improvement
	7. Children Allowed Private Visits, Calls, and Correspondence	7. Full Compliance
	8. Children Free to Attend Religious Services/Activities	8. Full Compliance
	9. Reasonable Chores	9. Full Compliance
	10. Children Informed about Psychotropic Medication	10. Needs Improvement
	11. Children Aware of Right to Refuse Psychotropic Medication	11. Needs Improvement
VIII	**Children's Clothing and Allowance** (8 Elements)	
	1. $50 Clothing Allowance	1. Full Compliance
	2. Adequate Quantity Clothing Inventory	2. Full Compliance
	3. Adequate Quality Clothing Inventory	3. Full Compliance
	4. Involvement in Selection of Clothing	4. Full Compliance
	5. Provision of Personal Care Items	5. Full Compliance
	6. Minimum Monetary Allowances	6. Full Compliance
	7. Management of Allowance/Earnings	7. Full Compliance
	8. Encouragement and Assistance with Life Book	8. Needs Improvement
IX	**Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)** (12 Elements)	
	1. Education/Experience Requirement	1. Needs Improvement
	2. Criminal Fingerprint Cards Timely Submitted	2. Needs Improvement
	3. CACIs Timely Submitted	3. Full Compliance
	4. Signed Criminal Background Statement Timely	4. Needs Improvement
	5. Employee Health Screening Timely	5. Needs Improvement
	6. Valid Driver's License	6. Full Compliance
	7. Signed Copies of GH Policies and Procedures	7. Full Compliance
	8. Initial Training Documentation	8. Needs Improvement
	9. CPR Training Documentation	9. Needs Improvement
	10. First-Aid Training Documentation	10. Needs Improvement
	11. Ongoing Training Documentation	11. Needs Improvement
	12. Emergency Intervention Training Documentation	12. Needs Improvement

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PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

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Boys Satellite Home (BSH)
873 North Hill Avenue
Pasadena, California 91001
License Number: 191200838
Rate Classification Level: 12

The following report is based on a "point in time" monitoring visit, and is only intended to report on the findings noted during the March 2011 monitoring review.

CONTRACTUAL COMPLIANCE

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

FACILITY AND ENVIRONMENT

Based on our review of Hillsides Group Home and interviews with ten children, Hillsides Group Homes fully complied with two of the six elements in the area of Facility and Environment.

The Group Home maintained sufficient age-appropriate recreational equipment that was in good condition, an appropriate quantity and quality of reading materials and educational resources.

However, during the inspection of the Girls' Satellite Home (GSH), we noticed a large portion of the left side of the backyard's wooden fence was severely leaning over and the fence behind the garage was missing a wooden picket. Windows in bedrooms one, two, and three, did not open when the Cottage Supervisor and Monitor tried to open them and one bedroom blind was broken. Also, the bathroom windows did not open (near bedrooms three and four) and the laundry room screen was broken. The fire exit doorway outside bedroom three was full of dirt. The fire exit landing contained a large pile of leaves and pine needles. In the second bedroom, located in the Boys Satellite Home (BSH), the double bedroom windows did not open. Bedroom three was missing the wand on the window blind. The GSH and BSH Supervisor acknowledged the deficiencies and stated that they would be repaired.

The Main Campus Family Cottage laundry room had no flooring under the washer and dryer, only the subfloor. The Agency Representatives stated that linoleum would be placed under the appliances. Additionally, the Main Campus Redwood Cottage had two bedrooms with patched walls. In another bedroom, the middle dresser drawer did not open. The Agency Representatives and Cottage Supervisor stated that the bedrooms were in the process of being repainted and the dresser drawer would be repaired. Also, in one cottage (Canyon Cottage) had a dresser drawer that was off the track and therefore not usable. Another cottage (Arroyo Cottage) had a bedroom that contained a lot of markings on the walls and another bedroom had a patched hole above the bed. The Agency Representatives stated the dresser drawers would be repaired and the bedrooms would be repainted.

Although the Main Campus' Kitchen had adequate food, there were many perishable and non-perishable food items that had expired. When the Monitor discovered this deficiency, it was brought to the attention of a kitchen staff member, as well as the Program Director on duty at the time of the inspection. The Program Director acknowledged the perishable and non-perishable food items that had expired, removed some of the expired food and e-mailed the Agency Representatives of the deficiency. The Monitor contacted the Agency Representatives the following day, who stated that the expired food was removed and that the kitchen staff members would ensure that all food is dated when it arrives, so that expired food would be discarded in the future.

Recommendations:

Hillsides Group Home Management shall ensure that:

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

2. The Group Home common quarters are well maintained.

3. The children's bedrooms are well maintained.

4. The Group Home contains fresh perishable and non-perishable foods.

PROGRAM SERVICES

Based on our review of ten children's case files, Hillsides Group Home fully complied with seven of the eight elements in the area of Program Services.

We noted that placed children met the Group Home's population criteria as outlined in their program statement; the Group Home obtained or attempted to obtain the CSW's signature to implement the Needs and Services Plans (NSP), and the children and staff participated in the NSP. We also found that the children received the required therapeutic services and the monthly CSW contacts were noted in the children's files.

Of the 23 initial and updated NSPs reviewed, some were not comprehensive in that they did not include all of the required elements in accordance with the NSP template. Some of the NSPs did not include specific and measurable treatment goals as they relate to permanency

and life skills. The Agency Representatives acknowledged the deficiency and stated that they will provide training for their therapists.

Recommendation:

Hillsides Group Home management shall ensure that:

5. The NSPs are comprehensive and include all elements of the NSP template.

CHILDREN'S HEALTH-RELATED SERVICES, INCLUDING PSYCHOTROPIC MEDICATION

Based on our review of ten children's files and/or documentation from the provider, Hillsides Group Home fully complied with six of the nine elements in the area of Children's Health-Related Services, including Psychotropic Medication.

The Agency had ensured that the children's psychiatric evaluations/reviews were current, the medication logs were maintained and consistent with the Court authorization and that the initial medical and dental examinations were conducted.

DCFS OHCMD found that the Group Home had 11 children on psychotropic medication. Of the 11 children prescribed psychotropic medication, one child's psychotropic medication authorization (PMA) expired on June 3, 2011, and the new PMA request was not submitted to the Court until June 2, 2011. Additionally, three of the ten sampled children did not receive a timely initial medical examination and four of the ten children did not receive a timely initial dental examination. The Nursing Supervisor stated that the children were placed with a current medical and/or dental examination; however, the review revealed that the Group Home did not obtain the applicable children's medical and/or dental examinations in a timely manner.

Recommendations:

Hillsides Group Home Management shall ensure that:

6. The children have a current PMA on file.

7. The children receive a timely initial medical and dental examinations.

PERSONAL RIGHTS

Based on our review of ten children's case files and interviews with the children, Hillsides Group Home fully complied with 6 of 11 elements in the area of Personal Rights.

All ten sampled children reported that they were informed of the Group Home policies and procedures, were allowed private visits, to make and receive telephone calls, and to send and receive unopened mail. Additionally, the children stated that they were free to attend religious services and activities of their choice and that their chores were reasonable.

Two children stated that they did not feel safe in the Group Home. Specifically, one child stated that sometimes it could be "hell," in that some staff yell and provoke children in a specific common area where the cottage camera is not located. The child further discussed a restraint in which she felt that "too much force" was used by a staff member, resulting in a bruise to her upper left arm. The DCFS OHCMD Monitor reported this allegation to the Child Protection Hotline and discussed the allegation with the youth's therapist and the Group Home Administrator. The youth had never disclosed to her therapist this allegation, or the alleged bruise to her upper left arm. The DCFS OHCMD Monitor reported this incident to Community Care Licensing and their investigation remains pending. Another child stated that he did not feel safe at the Group Home and that he wanted to be at home with his mother. The child stated that the kids provoke him, beat him up and "the staff doesn't care." According to the Cottage Supervisor, the child perceives children being helpful as provocation, and that this child may play too hard with the children and they will get mad at him when they ask him to stop and he does not honor their wishes. The Agency Representatives stated that they are concerned with any child feeling unsafe and will look into both of these matters to ensure these two children feel safe.

Six children stated they do not always get a second serving. One child stated that he "got his portion of food," but sometimes he is still hungry. Another child stated there were no second helpings, while some stated that second helpings depended upon how much food was left over after the staff members eat, or that the seconds were a very small portion, or that seconds only consisted of vegetables, and salad and/or fruit, not the main dish or dessert. Another child stated that he thought they "deserved seconds," but second helpings are not always available. Two children were not satisfied with the food and snacks. The Agency Representatives stated that they struggle with the children's obesity and subsequent lack of confidence and depression and attempt to steer the children toward making healthy food choices. The Agency representatives further stated that they have explored smaller first portions, in anticipation of the children having second servings. The Agency Representatives may explore smaller plates in an effort to limit the food portions. The Agency Representatives noted that one of the sampled children had gained 39 pounds since admission, although the Agency provides daily recreation for the children. The Agency Representatives are exploring the possibility of implementing a Weight Watcher's group for the children, modeling the one they currently provide for their staff members.

The first child who reported not feeling safe, also felt unfairly treated by two staff members. She cited a specific incident in which she was accused of getting up late and as a result received early bed time. The child explained that the cottage clocks are all set at different times and that a particular staff member used the clock to her (staff member's) advantage in accusing the child of waking up late for school. She also stated that two staff members are "liars", provoke and/or talk behind their back to other staff members. The Agency Representatives stated that the cottage battery-operated clocks may vary, but realize that the clocks are not the issue. The concern is child(ren) perceive staff members as yelling when staff members talk to the children in a raised tone of voice. This may be an indication that staff requires re-training. Another child reported that he did not know that he had the right to receive or reject medical, dental and psychiatric treatment. A separate child reported that he was not informed of his prescribed psychotropic medication and four children stated that they did not know that they had the right to refuse their prescribed psychotropic medication. The Agency Representatives stated that the child's psychiatrist and therapist will continue to inform

and reiterate to the child their rights to receive or reject medical, dental, psychiatric treatment and prescribed psychotropic medication, as well as educate them of their prescribed psychotropic medication.

Recommendations:

Hillsides Group Home Management shall ensure that:

8. All children feel safe in their Group Home.

9. All children are satisfied with meals and snacks.

10. All children are treated with respect and dignity.

11. All children are made aware of their right to refuse medical, dental and psychiatric care.

12. All children are informed about their psychotropic medication.

13. All children are aware of their right to refuse psychotropic medication.

CLOTHING AND ALLOWANCE

Based on our review of ten children's case files and interview with ten children, Hillsides Group Home fully complied with seven of eight elements in the area of Clothing and Allowance.

All ten children reported that they received the required clothing allowance and were pleased with the quality and quantity of their clothing. The clothing allowance logs and inventories confirmed that the requirements were being met.

Additionally, the children reported being involved in the selection of purchasing their clothing, as well as having a sufficient supply of personal care items. The children also reported receiving at least the minimum weekly allowance and the ability to spend their allowance on themselves. Three of the ten interviewed children were not aware of a life book/photo album while two other children did not answer the question. The Agency representatives stated that the three children are relatively new to the Agency; however they will encourage participation in activities that include making life books/photo albums. The Agency representatives further stated that during the orientation process for new children, the Agency will reiterate the children's involvement in creating these life books.

Recommendation:

Hillsides Group Home Management shall ensure that:

14. All children have the opportunity to create a life book/photo album.

PERSONNEL RECORDS

Based on our review of ten sampled personnel files, Hillsides Group Home fully complied with 3 of the 12 elements in the area of Personnel Records.

All ten staff members received a timely Child Abuse Central Index (CACI) clearance, had a valid driver's license and had signed copies of the Group Home policies and procedures.

Two staff members did not meet the education/experience requirements and that at the time of the review, one staff member's personnel file did not contain verified work experience and one staff member did not meet the requirements in the Hillsides Group Home job description. The Agency Representatives provided verified work experience for the one staff member and stated that the job description for the other staff member had been revised and they would forward the revised job description to Community Care Licensing (CCL) and DCFS Contracts for approval to incorporate into the Hillsides Group Home Program Statement. One staff member did not have a timely Criminal Clearance and another staff member did not have a timely Criminal Background Statement and Tuberculosis clearance. The Agency Representatives stated that they have improved their hiring process since 1991 and 2000, when these two staff members were hired. One staff member's personnel file did not contain all of the documentation that the staff member received the required initial training hours within 90 days and another staff's personnel file did not contain all of the required ongoing training hours. The Agency representatives were able to provide these staff members complete training hours.

Two of ten reviewed staff members' CPR and/or First-Aid Certificates were not timely. Also, five of ten staff members were not certified in the Emergency Intervention Plan (Pro-Act) and/or did not receive timely training in Pro-Act Refresher. The Agency representatives stated that they will conduct CPR, First-Aid and Pro-Act training on a more frequent basis to help remediate the timely certification. Additionally, the Agency representatives stated that until the staff member(s) receives the three certificates, they will never be left alone with children.

Recommendations:

Hillsides Group Home Management shall ensure that:

15. All staff have documentation in their personnel file of meeting the educational/experience requirements as described in their current job descriptions.

16. All staff receive a timely criminal fingerprint card and criminal background statement.

17. All staff receive a timely Tuberculosis Clearance.

18. All staff members' personnel files contain documentation of the required initial and ongoing training hours.

19. All staff members maintain timely and current certificates in CPR and First-Aid.

20. All staff members receive timely training in Pro-Act Refresher.

PRIOR YEAR FOLLOW-UP FROM THE OUT-OF-HOME CARE MANAGEMENT DIVISION'S (OHCMD) REPORT

Objective

To determine the status of the recommendations reported in the OHCMD's prior monitoring review.

Verification

DCFS OHCMD verified whether the outstanding recommendations from the last monitoring review were implemented. The last report was issued on June 3, 2010.

Results

The OHCMD's prior monitoring report contained eight outstanding recommendations. Specifically, Hillsides Group Home was to ensure that the children were given the opportunity to participate in planning recreational activities, that their dosage of psychotropic medication being administered was within the range allowed on the psychotropic medication authorization, that the children were allowed a second serving of food considering any medical restrictions and that the children were educated regarding their psychotropic medication.

Also, the children were to have access to their weekly allowance. Staff members were to complete CPR training, the required annual or on-going training, and the emergency intervention refresher training.

Recommendation:

Hillsides Group Home Management shall ensure that:

21. The Agency will fully implement the four outstanding recommendations from the previous report, dated June 3, 2010, which are noted in this report as Recommendations 9, 18, 19, and 20.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The Auditor-Controller did not conduct a fiscal review of Hillsides Group Home.

HILLSIDES' COMPLIANCE REVIEW, 2010
CORRECTIVE PLAN

8/23/11 9/19/11 Revd

I. LICENSURE/CONTRACT REQUIREMENTS

#6 Group home conducts disaster drills every six months.

Disaster Drills: Hillsides has conducted only one disaster drill each year on the day of the Los Angeles county-wide duck and cover drill. The one drill took place on 10/21/10, at 10:21 a.m. It was campus-wide, involving staff and children. Attached is documentation of that drill. However, Hillsides has not met the minimum of two per year.

Plan: Hillsides will have a minimum of two disaster drills per year throughout all programs, including Boy's Satellite and Girls Satellite. The drills will be preplanned to occur both during the school day, after hours and on weekends when the children are in their cottages. These drills will be integrated into a master schedule and will be tracked not only by the Program Director's and group homes logs but also by the Hillsides Safety Committee and the Risk Assessment Committee. This will not only insure that the prescribed disaster drill take place but also that there is an assessment of the effectiveness of the drills. Responsible Staff Person: Gerri Monohan, Safety Committee and Director of Operations

Fire Drills: As all Hillsides staff and children know, Hillsides has had numerous fire drills during the past year, and they are all required to follow evacuation procedures each time. Clearly, some of these drills have not been documented as procedure dictates.. However, it is also clear that at several sites, we have either fallen short of the requirement of one per month or have not had adequate systems in place to document both planned and unplanned fire drills.

Plan: A system of electronic scheduling has been instituted to provide a predictable reminder system that will insure that all Hillsides facilities have monthly fire drills. In addition, the Safety Committee will review on a quarterly basis the logs from each facility and site to ensure that the log is being accurately maintained to reflect that each drill has been documented. This will also allow the Safety Committee to review the effectiveness of the drills taking place.

Responsible Staff Person: Gerri Monohan

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II. FACILITY AND ENVIRONMENT

#10 Are the group home's exterior and grounds well maintained?

Hillsides overall, as indicated consistently in audits and program reviews, has attractive, well-maintained facilities and grounds. On the other hand, specific deficiencies were noted by the reviewer. Numerous windows at both Girls Satellite Home and Boys Satellite home did not properly open, several blinds needed repair or replacing, the fence was leaning and missing a stave, and a fire escape landing had a collection of dirt, leaves and pine needles.

Plan: The maintenance staff have been notified of these deficiencies and the problems have been repaired or resolved. Maintenance has a system of routine checks of each site and a checklist of items to monitor. The windows described by the reviewer either became stuck due to routine weathering or were inadvertently sealed when painting was done at each location. Maintenance has added to their check-list the testing of windows to insure that they are able to be opened, and the fire escape. In addition, staff working at the sites are required to do a weekly check for repairs and the windows opening has been added to their routine examination. The fire escape has been added to the list of maintenace duties.

Responsible Staff Person: Group Home Administrator, Ramona McGee and Maintenance Foreman, Joe Holguin

#11 All repairs have been completed: linoleum in Family Cottage laundry room, along with walls, screens and windows in Girls' Satellite bathrooms and laundry room. See above for system for checking and completing repairs, and the staff responsible.

#12 All repairs have been completed: bedroom walls in Redwood have been patched and repainted, and the defective drawer replaced. In Canyon Cottage, the defective drawer has been replaced. In Arroyo Cottage, the bedrooms cited have been repainted. The defective blind at Girls' Satellite has been repaired.See above for system for checking and completing repairs, and the staff responsible.

#15 Does the group home maintain adequate perishable and non perishable foods?

All expired and undated food has been discarded. For the main campus food service, Hillsides provides meals through an independent contractor, Chartwells. During the review it was noted that the contractor staff had failed to follow the required procedure for dating of individual food items as they are received and stored. As well, some of the items were outdated.

Plan: The Director of Operations, Gerri Monohan has met with the lead management of the food service company and informed them that future violations of proper and mandated procedures cannot be permitted and will jeopardize our contract. The contractor service is well-informed of the requirements as they are active in other facilities similar to Hillsides. In addition, the Director of Operations has established a regular schedule of drop in

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inspections of the area to insure that food is being dated, stored properly and discarded if unused before the manufacturer's date of expiration.

Responsible Staff Person: Director of Operations, Gerri Monohan

#22a Comprehensive NSPs

Subsequent to the Performance Review, revised training was provided by the Director of Treatment Services to the staff to ensure compliance with requirements and to improve the quality of NSPs. Specifically, all boxes will be checked, and when N/A is checked, an explanation will follow. Where it was noted that N/A for GPA and Credits were not explained, in fact the "Addendum" box was checked and the explanation was added to the addendum at the end of the report. In the future, staff will circle the box to make sure it is easily identified. Additional training was provided to teach appropriate goal setting and to ensure that goals appropriate to the client, clear to the child and reader of the report, and are measurable. Staff have been instructed to update the child's progress or lack of progress with regard to academics and attendance, as well as all other pertinent behaviors. Particular emphasis in training was on the repetition of information from one NSP to the next. Staff has been informed that this is unacceptable, and NSPs will be carefully reviewed to ensure that this does not happen in the future. On going training will continue on a quarterly and as-needed basis. The guidelines for completion of the NSP will be reviewed, and the existing self-checklist of common problems will be revised to include the above issues. The final NSP draft will be reviewed by the Director of Treatment Services or her designee who will sign the document when it is in compliance.

Responsible Staff: Jean Williams, Director of Treatment Services

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

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

In one instance, one of the authorizations was not requested until just several days before the due date. This resulted in the authorization not being received in a timely manner. The Medical Office Manager reports that she has been discouraged by the Court staff from making submissions too early. However, the Office Manager, Erica Cervantes, has established a reminder system that will take into account the Court's policy that submissions cannot be made too early and still insure that all authorizations are received before the due date.

#s 34 and 37 Are initial medical and dental exams timely?

It was noted in the review that several initial medical exams and four initial dental exams had not occurred within the deadline. Looking into this matter it would appear that a wide range of issues have at times interfered with appointments that had been scheduled.

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In two instances the doctors office postponed the appointment, in two cases children's anxiety caused them to refuse dental examinations, two appointments were delayed due to children being in crisis, exhibiting unsafe behavior causing the delay of any trips into the community.

Plan: A plan was made to increase the priority of these visits, to increase the communication by alerting staff to the fact that a deadline exists, and scheduling additional staff as needed to meet the deadlines.

There certainly may still be occasions when the child refuses the appointment. In those instances the refusal will be documented and the DCFS worker notified.

Staff Person Responsible: R.N. Supervisor, Kim Weleba

VII. PERSONAL RIGHTS

#40 Do children feel safe in the group home?

It is of course the highest priority of all programming to insure that children feel safe at Hillsides. The staff mentioned in this complaint are two of the most experienced staff and have not had prior complaints made about them. On the other hand children's voices must be listened to with great care.

Plan: The Cottage Supervisor and the Director of Program Services have addressed the concerns that two staff do not speak respectfully to one of the children and that the clocks in the cottage are not synchronized in a way that makes the child feel that decisions are unfair. These issues are also being addressed in on-going staff training. Of course there are times when staff must raise their voice or speak firmly particularly regarding issues of safety.

Staff Responsible: Tom Johnson, Director of Program Services and Ramona McGee, Group Home Director

#41 Do children report satisfaction with meals and snacks?

Two children report not being satisfied with the food at Hillsides. A weekly meeting at Hillsides reviews the number of children who ate each meal, the children who chose an alternative meal instead of the one offered, and the reasons or complaints that children had about each meal.

Plan: The supervisors of each cottage attend this meeting along with the Director of Operations and the Manager of the Kitchen. In this way, meals can be adapted in response to complaints. To increase the opportunity for the children's voices to be heard regarding this issue, child representatives are now included in this meeting. The representatives bring feedback directly from children in their cottages.

The preferences of the children cannot be the sole consideration in menu planning and adapting as balanced meals and nutritional standards must remain a primary consideration. Hillsides continues to work actively with staff and children to provide healthy and appealing meals.

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Staff Responsible: Gerri Monohan, Director of Operations and Tom Johnson, Director of Program Services

#42 Is staff treating children with respect and dignity?

One child reported that they were not treated by a staff in a respectful way.
Plan: The specific complaint has been investigated both by Hillsides and by outside representatives and it has not been possible to verify the information reported by the child. Video camera's have recently been added to additional locations at Hillsides in order to enhance the ability to monitor the key living environments. Staff training continues to focus on the children's rights and the empowering of children in healthy ways.

Staff Responsible: Tom Johnson, Director of Program Services

#44 Are children free to receive or reject voluntary medical, dental and psychiatric care?
One of the children reported that he/she is not allowed to refuse care. All children at Hillsides are allowed to refuse medical care and, in fact, some of the children do refuse.
Plan: Staff are required to document when a child refuses as in some cases, repeated refusal may result in a medical or health concern. At the time of intake all children and their representatives/parents are informed of the child's right to refuse care and the children sign a statement that they understand this right. The nursing staff and the child's individual therapist regularly repeat the children's rights to them as issues come up. Staff will document these conversations.

Staff Responsible: Jean Williams, Director of Treatment and Kim Weleba, Nursing Supervisor

#48 Are children informed about their psychotropic medication?
Children are regularly informed about their medication by the doctor who prescribes the medication, by the nursing staff who dispense the medication and by the therapist who helps to monitor the overall effects and side effects of medication. One of the children reported in the review that they are not told about their medication.
Plan: Because of this, staff will make concerted effort, as indicated above, to communicate in a manner that is clear to the children and encourage children to express any concerns. Staff will be asked to document these conversations as children may forget what they have been told.

Staff Responsible: Kim Weleba, Nursing Supervisor

49 Are children aware of their right to refuse medication? Four children reported not being informed of their right to refuse their medication. As indicated above, children are informed at intake and asked to sign a statement that they understand this right. In addition, the children see other children refusing their medication. On the other hand, some children appear to still be unaware of this right.
Plan: Refusals are routinely documented in incident reports due to the health risk that can be created by inconsistency in taking a medication. Staff will be asked to document conversations that they have with children reminding them of their personal rights..

Staff Responsible: Jean Williams, Director of Treatment and

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Kim Weleba, Nursing Supervisor

#57 Are children encouraged and assisted in creating and updating a life book/photo album? Hillsides' recognizes the importance of life books, photos and other remembrances in the lives and treatment of these children. Therapists and others, such as TBS workers and re-hab staff assist clients in different aspects of these projects. This item is also part of our current intake assessment. To ensure that all children are specifically informed of this program, our intake worker will go over it with them during the intake process. The Clinical Director will follow up with therapists to make sure all clients are involved in this activity.

Staff Responsible: Renee Walker, Intake Coordinator
Jean Williams, Director of Treatment

IX. PERSONNELL RECORDS

#58 Do group home staff meet the educational/experience requirements?

We have received employment verification for RC. Regarding CE, the requirements for Hillsides Program Director, in the correct job description submitted in the CAP dated 7-27-11, notes that either a BA or one year' experience qualifies.

Staff Responsible: HR Director Carmela Bozulich

#59 Were criminal record cards submitted timely?

Current HR procedures prevent proceeding with hiring prior to criminal record check. HR must receive the results, and hiring supervisors must get the OK from HR before taking the next steps in the sign up process.

Staff responsible: HR Director Carmela Bozulich

#61 Did appropriate employees sign a criminal background statement in timely fashion?

HR has prospective employees fill out the criminal background statement prior to sending them to be livescanned.

Staff Responsible: HR Director Carmela Bozulich

#62 Have employees received timely initial health screenings?

Current procedures require prospective staff to bring proof of a TB test within the prior year, or go to our nurse to get the test, and have it read, and found negative before returning to work or proceeding with hiring. The hiring supervisors must receive notification from the nurse before continuing. Staff and their supervisors are notified when re-tests are needed at two year intervals. Staff failing to get the re-test on time may not work until they get re-tested.

Staff Responsible: RN Supervisor Kim WelebaRN

#64 Have appropriate employees received the required initial training?

CL, the staff cited as having incomplete orientation, actually finished the training. HR checks the files of new staff to make sure supervisors have turned in orientation check lists, and that they are correctly filed in personnel files.

Staff Responsible: RN Supervisor Kim Weleba

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#66 Have appropriate employees received CPR training?

#67 Have appropriate employees received First Aid training?

The Program Supervisor who conducts CPR/First Aid training has created a data base, effective September 1, to track initial and re-certifications. Supervisors get this information, and follow up with staff, informing them that they either need to attend a scheduled training here, or in the community. New hires and existing staff may not be alone with the children until they have completed the required CPR/First Aid training.

Staff Responsible: Program Supervisor Ed Mahoney

#68 Have appropriate employees received the required on-going training?

As noted in the CAP dated 7-27-11, CE received 47.5 hours of training between May 2009 and March of 2010, recorded in his personnel file in six month increments.

Staff Responsible: HR Director Carmela Bozulich

#69 Have appropriate employees received emergency intervention training?

Effective September 1, The Program Supervisor responsible for providing and tracking ProAct training has maintained a data base to track initial certification, re-certification and refresher courses. Staff whose certificates have expired, or who have not had ProAct training, may not work alone with clients. The staff cited have received the required training to bring them up to date.

Staff Responsible: Program Supervisor Rob DaSilva

Summary of HR and Program Supervisor Procedures to maintain CAP, effective 9-1-11(items # 58 through 69):

- HR uses the Stafftrack system to record and monitor hiring steps, and on-going training and re-certification. Documents must be received by HR prior to hiring, including proof of experience, applicable degrees, criminal record cards, Livescan results from the DOJ and health screenings. Hiring may not proceed until these steps are completed, and hiring supervisors must wait until they get clearance from HR.
- Stafftrack used by HR, and data bases created by Program Supervisors, are used to monitor initial training, on going training and re-certifications: ProAct (EIP), First Aid and CPR. HR runs Stafftrack reports, and advises supervisors and Program Supervisors of deficiencies. Supervisors and staff are notified of training deadlines, and must complete the required training prior to expiration.
- Staff with expired certificates may not work alone with children until the have been re-certified.

Persons Responsible: Carmela Bozulich, HR Director
Rob DaSilva, Program Supervisor
Ed Mahoney, Program Supervisor

DCFS Sign-in and out log

Date:	Time:	DCFS worker: (first/last name)	Client(s) (first/last names)	Type of visit (On-campus or Off-campus)	Leave sign (DCFS worker)

PASADENA UNIFIED SCHOOL DISTRICT
HEALTH SERVICES
351 S. HUDSON AVE.
PASADENA, CA 91109

[redacted] 01/31/1986
NAME BIRTHDATE

YOUR TUBERCULIN TEST (MANTOUX)

GIVEN ON NOV 10 2010

MANTOUX #56

RESULT [redacted] mm INDURATION

DATE READ NOV 12 2010 TO 5 TU PPD.

IF YOU HAVE A SIGNIFICANT REACTION, YOU MUST HAVE A CHEST X-RAY.

Date: 8-7-10

Record of Telephone Check
With Applicant's Previous Employer(s)

Applicant's name: [redacted]

Company Name: Hathaway-Sycamores Phone: (626) 395-7100 x 6122

Address for Human Resources/Personnel: _____

Information Received From: [redacted]

Title: Supervisor

Did this person directly supervise the applicant? ☐... Yes ☐... No

Dates of employment: 07 to 10

Employee's Position/Title: Behavior Specialist

Employees duties/responsibilities: [redacted] is Counselor, assist in the implementation of plans for supervision.

Performance evaluation (initiative, attitude, capabilities): Very good

Attendance Record: Great

How did the employee get along with other employees? Very well

...with his/her supervisor?: Very well

...with clients, customers, etc.? Clients responded well

Were there any problems with his/her employment? none

Would you rehire? ☑... Yes ☐... No

Additional Comments: _____

Telephone Check By: Joseph White

Title: On call Supervisor Name Printed: Joseph White

CHILD CARE / RECREATION
Orientation Checklist

NAME: [redacted] SUPERVSIOR [redacted]

HIRE DATE: 3-19-2010 COTTAGE/UNIT BSH

Training Performed by Supervisor					
SUBJECTS		Hours	Date Completed	Supervisor's Initials	Staff Initials
Group Support for Children	[redacted]				
Training Unit - 1	(11 hrs)				
Group Supervision (2)					dl
Discipline (3)					dl
Counseling (2)					dl
Children's Rights (1)					dl
Boundary and Confidentiality Issues (2)					dl
Suicidal Behavior (1)					dl
Training Unit - 2	(9 hrs)				
Treatment Issues (1)					dl
Team Work (1)					dl
Behavioral Plan (1)					dl
AWOLs (1)					dl
Logging (1)					dl
Incident Reports (1)					dl
Routines & Transitions (2)					dl
Hygiene (1)					dl
Training Unit - 3	**(15 hrs)**				
Nutrition (1)					dl
Housekeeping (1)					dl
Day Rehab (1)					dl
Community Activities (1)					dl
Bookkeeping (1)					dl
Support Services (1)					dl
Community Resources (1)					dl
Review (1)					dl
Child Development Materials (7)					dl

Training Performed by Agency Instructor/Trainer
(Separate training log maintained by Instructor/Trainer)

SUBJECTS	Scheduled Hours	Completed	Instructor/Trainer
Medication Orientation	1		Nursing Department
Vehicle Orientation	1.5		Van Safety Trainer
New Employee Orientation	4.5		HR & Administration
	Total Hours 42		

RECEIVED HUMAN RESOURCES

RECEIVED JUL 28 2011 HUMAN RESOURCES

For Office Use Only

☐ *Remove staff from Initial Training Log*

May 2007

HILLSIDES
Training History Report
by Staff Member
05/01/09 to 05/01/10

Staff Name: Engel, Charles
Hire Date: 05/02/00
Employment: FT

Training Period:

Class Number	Training Date	Training Type	Class Title	Instructor	Class Hours
100046	05/07/09	Agency	OST- BPD InChldrn&Adolescnts	Carolyn Clegg	1.00
100046	07/09/09	Agency	OST- DiferentAproachSameResult	Carolyn Clegg	1.00
100046	09/17/09	Agency	OST- Domestic Violence	Carolyn Clegg	1.00
100046	10/01/09	Agency	OST- Children's Court	Carolyn Clegg	1.00
100046	10/29/09	Agency	OST- Broken Child	Carolyn Clegg	1.00
100046	11/12/09	Agency	OST- Children And Sleepwalking	Carolyn Clegg	1.00
100046	11/10/09	Agency	OST- Medicating Children	Carolyn Clegg	1.00
100046	01/21/10	Agency	OST- MusicTherpyW/ ED Chldrn	Carolyn Clegg	1.00
100046	02/22/10	Agency	OST- Misunderstood Minds	Carolyn Clegg	1.00
100046	03/25/10	Agency	OST- Orphan Train	Carolyn Clegg	1.00
100046	04/29/10	Agency	OST- Adoles&YourthSuicdePreven	Carolyn Clegg	1.00
100079	07/22/09	Agency	Sexual Harassment	S Crummey,A Aikins,	1.50
100093	05/17/09	Agency	PDT- CommMgmtOfAdolW/Psychosis	Joseph White	1.00
100093	05/17/09	Agency	PDT- Enviornmnt&ReadngProblems	Joseph White	1.00
100093	05/17/09	Agency	PDT- Learning Disabilities	Joseph White	1.00
100093	05/17/09	Agency	PDT- Problem Solving Skills	Joseph White	1.00
100093	05/18/09	Agency	PDT- WhatTypeOfParentAreYou?	Joseph White	1.00
100093	05/19/09	Agency	PDT- VicariousTraumatization	Joseph White	1.00
100093	05/19/09	Agency	PDT- VicariusTraumatizOf MHP	Joseph White	1.00
100093	05/19/09	Agency	PDT- Solutions To ODD	Joseph White	1.00
100093	05/20/09	Agency	PDT- WhtIsAttachmentDisorder?	Joseph White	1.00
100093	05/20/09	Agency	PDT- OpositionlDefintDisorder	Joseph White	1.00
100093	05/20/09	Agency	PDT- What Is Attachment?	Joseph White	1.00
100093	06/14/09	Agency	PDT- Teen Suicide Overview	Joseph White	1.00
100093	06/14/09	Agency	PDT- WarningSignsOfTeenSuicide	Joseph White	1.00
100093	06/15/09	Agency	PDT- Teens&Suicde:WhtToLookFor	Joseph White	1.00
100093	06/15/09	Agency	PDT- Destructive Thinking	Joseph White	1.00
100093	10/19/09	Agency	PDT- Death Of A Parent	Joseph White	1.00
100093	10/19/09	Agency	PDT- HlpngChildDealWithDeath	Joseph White	1.00
100093	10/21/09	Agency	PDT- ChldrnW/AutismWshYouKnew	Joseph White	1.00
100093	10/21/09	Agency	PDT- Tips For Working W/ ASD	Joseph White	1.00
100093	11/17/09	Agency	PDT- Fetal Alcohol Syndrome	Joseph White	1.00
100093	11/17/09	Agency	PDT- GettingPastThePrejudices	Joseph White	1.00
100093	11/19/09	Agency	PDT- Child Abuse And Neglect	Joseph White	1.00
100093	11/19/09	Agency	PDT- WhenYelling Is A Pattern	Joseph White	1.00
100093	12/15/09	Agency	PDT- Behavior Modification	Joseph White	1.00
100093	12/15/09	Agency	PDT- Nightmare Remedies	Joseph White	1.00
100093	12/17/09	Agency	PDT- Lying	Joseph White	1.00
100093	12/17/09	Agency	PDT- Depression In Children	Joseph White	1.00

HILLSIDES
Training History Report
by Staff Member
05/01/09 to 05/01/10

2/16/2	02/16/10	Agency	PDT - LonelinessInYoungChldren	Joseph White		1.00
2/16/2	02/16/10	Agency	PDT - Anger Management 1	Joseph White		1.00
2/18/2	02/18/10	Agency	PDT - Anger Management 2	Joseph White		1.00
2/18/2	02/18/10	Agency	PDT - RevCrisisProcedWthChldrn	Joseph White		1.00
3/16/2	03/16/10	Agency	PDT - PassiveAggressiveChildBx	Joseph White		1.00
3/7/20	03/07/10	Agency	PDT - KidsWhoAreVerbalyAbusive	Joseph White		1.00
3/8/20	03/08/10	Agency	PDT - Child Out Bursts	Joseph White		1.00
3/9/20	03/09/10	Agency	PDT - KidsWhoIgnoreConsequnces	Joseph White		1.00
					Total Hours:	47.50
					Report Totals:	47.50

Hillsides
Creating safe places for children

Job Description

Title: Program Director (PD)

Department: Residential Programs

Reports to: Director, Residential Programs

Reg. Hours Worked: 40/week

Employment Status:

Regular	X
Temporary	☐
Full-time	X
Part-time	☐
Volunteer	☐
Exempt	☐
Non-exempt	X

ESSENTIAL FUNCTIONS:
To perform this job successfully, an individual must be able to perform each essential duty satisfactorily. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions. Other duties may be assigned.
The essential functions include:

- Responsible for the overall supervision, care & protection of clients while on duty
- Involved in social skills training for resident clients when necessary
- Assist clients in handling problems in the living group, unit & on campus
- Apply appropriate discipline & set limits on acting out behavior of resident clients
- Involved in crisis interventions
- Assume administrative & supervisory responsibility for the agency and grounds
- Make routine checks of the grounds & cottages to establish whereabouts of clients & staff
- Screen all off-campus trips in collaboration with Cottage Coordinators
- Be made aware of & screen visitors to the campus
- Be available for emergency calls after regular hours
- Be aware of staff on duty & assign staff when necessary to secure coverage when needed
- Coordinate disaster preparedness procedures in the event of natural disasters, medical emergencies & fire
- Assist staff with client disciplinary problems, runaways & drug involvement
- Check in overnight Child Care staff
- Other duties as required

SKILLS AND ABILITIES REQUIRED TO PERFORM THE ESSENTIAL JOB FUNCTIONS:

Communication Skills and Abilities:

- Ability to effectively present information and respond to questions from clients, office personnel, other employees and the general public

- Ability to read, analyze and interpret manuals and office documents
- Ability to speak a language other than English a plus

Mental/Interpersonal Skills and Abilities:

- Ability to define problems, gather, transcribe and post data, analyze, synthesize and classify information, and draw valid conclusions
- Ability to work independently and with others – including other employees, clients and members of the public -- in face-to-face and telephonic contexts
- Ability to multi-task, establish priorities and manage time, meet deadlines and perform duties under time constraints
- Ability to be flexible and adapt to changing work demands
- Maintain high level of concentration and attention to detail for extended periods of time
- Ability to respond effectively to sensitive inquiries or complaints
- Maintain a high level of ethical and professional standards in accordance with agency and community policy

Physical Skills and Abilities:

- Ability to talk or hear in order to give and receive information and instructions
- Ability to stand, walk, sit, , use hands to finger, handle or feel objects, tools or controls
- Ability to reach with hands and arms
- Ability to use computer keyboard up to 50% of the day
- Visual acuity, ability to adjust focus and peripheral vision for work on a laptop or other computer equipment
- Lift and/or move up to 60 pounds

Equipment and Computer Software Skills and Abilities:

- Computer literate (basic working knowledge of Microsoft WORD, Excel, and Outlook) and Sigmund data/electronic records program
- Able to use telephone, typewriter, office copier, calculator, fax machine, computer printer and scanner, or other equipment as required

ADDITIONAL DUTIES & RESPONSIBILITIES:

None

WORK ENVIRONMENT:

- Regularly work indoors or outdoors in a variety of environments
- Potential exposure to blood born pathogens

EDUCATION, EXPERIENCE, CERTIFICATES & TRAINING

- Bachelors degree and/or equivalent related experience
- Minimum 1 year experience working with children in a child care agency preferred
- Demonstrated ability to supervise staff & provide leadership

- Valid California drivers license and personal vehicle insurance acceptable to Hillsides' insurance carrier

CQI STATEMENT

Every employee has the opportunity and responsibility to participate in one or more activities each year that support the continuous quality improvement (CQI) of Hillsides' programs & services. Activities might involve membership on a CQI committee or work group, service as a peer reviewer, data collection for CQI and evaluation purposes, completion of CQI questionnaires and surveys or participation in focus groups, or other activities as identified by CQI committees or work groups.

OSHA CATEGORY:

This position performs tasks that may involve exposure to blood, body fluids, or tissues. All Hillsides employees are offered the opportunity to receive the Hepatitis B vaccination series.

APPROVED BY:

_____ _____

Director, Residential Programs Date Revised

_____

Human Resources Director

Hillsides is an Equal Opportunity Employer