



PHILIP L. BROWNING
Director

County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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October 10, 2012

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

From: Philip L. Browning
Director

Board of Supervisors
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AVIVA FAMILY AND CHILDREN SERVICES GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Out-of-Home Care Management (OHCMD) conducted a review of Aviva Family and Children Services Group Home (Aviva) in January 2012, at which time they had one 36 bed-site and 19 placed DCFS children and 13 placed Department of Probation children.

Aviva is located in the Third Supervisorial District and provides services to Los Angeles County DCFS foster and the Probation Department youth. According to Aviva's program statement, the stated goal is "to provide a treatment-oriented facility for young women ages twelve to seventeen and to rehabilitate young women who are unable to function adequately in a family setting or in a traditional high school and to change self-destructive life styles and to learn to cope more adequately with the traumatic past and the difficult present; to enhance self-esteem, develop appropriate social skills and finish high school." Aviva is licensed to serve a capacity of 36 children, ages 12 through 17.

For the purpose of this review, seven placed children, five DCFS and two Probation youth were interviewed and their files were reviewed. The placed children's overall average length of placement was four months, and the average age was 16. Three discharged children's case files were reviewed to determine if the destination of placement was per their permanency plan and if the children were meeting their Needs

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and Services Plan (NSP) goals at the time of discharge. Three staff files were reviewed for compliance with Title 22 Regulations and County contract requirements.

Two sampled children were prescribed psychotropic medication. We reviewed their case files to assess timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm that documentation of psychiatric monitoring was maintained as required.

SCOPE OF REVIEW

The purpose of this review was to assess Aviva's compliance with the County contract requirements and State regulations. The visit included a review of Aviva's program statement, administrative internal policies and procedures, seven placed children's case files, three discharged children's case files and a random sampling of personnel files. A visit was made to the group home site to assess the quality of care and supervision provided to children, and we conducted interviews with 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, Aviva was providing good quality care to placed children and the services were provided as outlined in the program statement. The children interviewed stated that they felt safe and liked residing in the group home. The children also reported they were treated with respect and dignity.

Our review revealed that Aviva needed to ensure Special Incident Reports (SIRs) are appropriately documented and cross-reported timely and Children's social Workers' (CSWs') authorizations to implement the NSPs are obtained or that staff efforts to obtain the authorizations were documented.

Aviva also needed to ensure children are free to attend religious services and activities of their choice; children are encouraged and assisted in creating and updating a Life Book/Photo Album; employees sign criminal background statements in a timely manner; and the development of comprehensive NSPs.

Aviva's Vice President of Programs and Services (V.P. of Program and Services) and the Clinical Director were receptive to implementing systemic changes to improve compliance with Title 22 Regulations and County contract requirements. The Clinical Director stated she understood the findings and would develop a plan to correct the deficiencies.

NOTABLE FINDINGS

The following were the notable findings of our review:

- On or about June 9, 2011, CCL cited Aviva as a result of deficiencies noted during an investigation, which involved an allegation of personal rights violations. CCL substantiated the allegation, as staff had blocked doors to prevent a child from leaving. Non-physical interventions and strategies to de-escalate a situation should be used; however, blocking the door is not an acceptable non-physical intervention.

The V. P. of Programs and Services has informed the Monitor that Aviva is appealing this finding. The OHCMD Monitor has followed up with CCL regarding the outcome of this investigation; the Monitor was informed that the file for this incident remains open and is pending the assignment of a new Licensing Analyst for Aviva.

- SIRs were not cross-reported/submitted to OHCMD as required. The Clinical Director immediately rectified the situation. SIRs are now being submitted to OHCMD in accordance with the SIR guidelines.
- The CSWs' authorizations to implement the NSPs were not obtained timely. The Clinical Director reported that they will do a better job of timely obtaining the CSW's signatures.
- Seven initial NSPs and six updated NSPs were reviewed; five initial NSPs and two updated NSPs were not comprehensive. The NSPs were missing concurrent case plans, as well as the CSWs' signatures. Aviva reported they will continue to work to improve in this area. Aviva staff attended the NSP training conducted by the OHCMD in January 2012.
- Children reported they were not free to attend religious services of their choice. The V. P. of Programs and Services reported that children are not denied religious services; however, he was unable to provide records or information regarding Sunday services routines or attendance. He stated that Aviva makes religious services available to residents and added that Aviva also encourages families to attend religious services with their children.

The V. P. of Programs and Services stated that effective immediately, all children will be informed of the weekly Sunday services agenda during the group home's Friday forum, which all children attend. He also reported that the agency will rotate services for the denominations, which the children have expressed interest in attending.

- Children were not encouraged or assisted in creating and updating a Life Book/Photo Album. During the Exit Conference, the Monitor verified that Aviva had issued a Life Book/Photo Album to all of the children reviewed that did not have one.

The Clinical Director reported that the children will be encouraged to work on their respective books weekly.

- One employee did not sign a criminal background statement in a timely manner. The V. P. of Program and Services reported that the employee had signed the background statement timely, but she had written the incorrect date. The agency will ensure that all documents are timely and accurately signed.

A detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit conference held June 22, 2012.

In attendance:

Ira Kruskol, Vice President of Programs and Services; Kirsten Anderson, Clinical Director, Aviva Children and Family Services Group Home; and Sonya Noil, Monitor, DCFS OHCMD.

Highlights:

The V.P. of Programs and Services was in agreement with all but one of the findings. He did not feel that the finding in which three children reported that they were not free to attend religious services and activities of their choice should have been a finding. He felt that it was difficult to decide what denomination would take precedence over another. He further stated that the acuity of the children and staffing are sometimes an issue.

The V.P. of Programs and Services and the Clinical Director agreed to submit a Corrective Action Plan (CAP) to address each of the findings. They were open to discussion, as well as to making any necessary changes in efforts to obtain a better outcome.

Aviva provided an approved CAP addressing each recommendation noted in this compliance report. The CAP is attached.

We will assess for full implementation of the recommendations during our next review.

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

PLB:RRS:KR
EAH:PBG:sn

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
- Ira Kruskol, Vice President of Programs and Services, Aviva Group Home
- Lenora Scott, Regional Manager, Community Care Licensing
- Angelica Lopez, Acting Regional Manager, Community Care Licensing
- Deborah Santos, Acting Regional Manager, Community Care Licensing

**AVIVA CHILDREN AND FAMILY SERVICES GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW**

1701 Camino Palmero
Los Angeles, CA. 90046
License Number: 191800285
Rate Classification Level: 14

	Contract Compliance Monitoring Review	Findings: January 2012
I	<p><u>Licensure/Contract Requirements</u> (9 Elements)</p> <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. Transportation 3. SIRs 4. Compliance with Licensed Capacity 5. Disaster Drills Conducted & Logs Maintained 6. Runaway Procedures 7. Allowance Logs 8. CCL Citations/OHCMD Investigation Reports on Safety/Plant Deficiencies 9. Detailed Sign In/Out Logs for Placed Children 	<ol style="list-style-type: none"> 1. N/A 2. Full Compliance 3. Improvement Needed 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed 9. Full Compliance
II	<p><u>Facility and Environment</u> (6 Elements)</p> <ol style="list-style-type: none"> 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 	<p>Full Compliance (All)</p>
III	<p><u>Maintenance of Required Documentation and Service Delivery</u> (13 Elements)</p> <ol style="list-style-type: none"> 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. Children Progressing Toward Meeting NSP Case Goals 	<ol style="list-style-type: none"> 1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance

	<ul style="list-style-type: none"> 6. Development of Timely Initial NSPs 7. Development of Comprehensive Initial NSPs 8. Therapeutic Services Received 9. Recommended Assessment/Evaluations Implemented 10. DCFS CSWs Monthly Contacts Documented 11. Children Assisted in Maintaining Important relationship 12. Development of Timely Updated NSPs 13. Development of Comprehensive Updated NSPs 	<ul style="list-style-type: none"> 6. Full Compliance 7. Improvement Needed 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Improvement Needed
IV	<p><u>Education and Workforce Readiness</u> (8 Elements)</p> <ul style="list-style-type: none"> 1. Children Enrolled in School Timely 2. Children Attending School 3. GH Facilitates in Meeting Child's Educational Goals 4. Children's Academic or Attendance Increase 5. Current IEPs Maintained 6. Current Report Cards Maintained 7. YDS/Vocational Programs Opportunities Provided 8. GH Encourages Children's Participation in YDS 	Full Compliance (ALL)
V	<p><u>Health And Medical Needs</u> (6 Elements)</p> <ul style="list-style-type: none"> 1. Initial Medical Exams Conducted 2. Initial Medical Exams Timely 3. Follow-up Medical Exams Timely 4. Initial Dental Exams Conducted 5. Initial Dental Exams Timely 6. Follow-Up Dental Exams Timely 	Full Compliance (ALL)
VI	<p><u>Psychotropic Medication</u> (2 Elements)</p> <ul style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 	Full Compliance (ALL)

VII	<p><u>Personal Rights And Social/Emotional Well-Being</u> (15 Elements)</p> <ol style="list-style-type: none"> 1. Children Informed of Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Staff Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Fair Consequences 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed About Their Medication 11. Children Aware of Right to Refuse Medication 12. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 13. Children Given Opportunities to Plan Activities 14. Children Participate in Activities (GH, School, Community) 15. Children's Given Opportunities to Participate in Extra Curricular, Enrichment and Social Activities 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance 14. Full Compliance 15. Full Compliance
VIII	<p><u>Personal Needs/Survival And Economic Well-Being</u> (8 Elements)</p> <ol style="list-style-type: none"> 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 Ethnic Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance/Earnings 8. Encouragement and Assistance with Life Book/Photo Album 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed
IX	<p><u>Discharged Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. Children Discharged According to Permanency Plan 2. Children Making Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement 	<p>Full Compliance (ALL)</p>

<p>X</p>	<p><u>Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)</u> (14 Elements)</p> <ol style="list-style-type: none"> 1. DOJ Submitted Timely 2. FBI Submitted Timely 3. CACIs Timely Submitted 4. Signed Criminal Background Statement Timely 5. Education/Experience Requirement 6. Employee Health Screening Timely 7. Valid Driver's License 8. Signed Copies of GH Policies and Procedures 9. Initial Training Documentation 10. One-Hour Child Abuse and Reporting Training 11. CPR Training Documentation 12. First-Aid Training Documentation 13. On-going Training Documentation 14. Emergency Intervention Training Documentation 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance 14. Full Compliance
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**AVIVA CHILDREN AND FAMILY SERVICES GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW**

**1701 Camino Palmero
Los Angeles, CA. 90046
License Number: 191800285
Rate Classification Level: 14**

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the January 2012 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review, Aviva Children and Family Services (Aviva) was in full compliance with five of 10 sections of our contract compliance review: Facility and Environment; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; and Discharged Children. The following report details the results of our review.

LICENSURE/CONTRACT REQUIREMENTS:

Based on our review of seven children's case files and/or documentation from the provider, Aviva fully complied with six of eight elements reviewed in the area of Licensure/Contract Requirements, as Timely Notification of Child's Relocation was Not Applicable.

We noted that SIRs were not cross-reported/submitted to OHCMD as required. The Clinical Director immediately rectified the situation. SIRs are now being submitted to OHCMD as required.

Community Care Licensing (CCL) had cited Aviva as a result of deficiencies noted during a CCL investigation. The incident involved a substantiated allegation of personal rights after it was determined that staff had blocked doors to prevent a child from leaving the group home. Non-physical intervention strategies to de-escalate a situation should be used; blocking the door is not an approved non-physical interventions.

The V. P. of Programs and Services has informed the Monitor that Aviva is appealing this finding. The OHCMD Monitor has followed up with CCL regarding the outcome of this investigation; the Monitor was informed that the file for this incident remains open and is pending the assignment of a new Licensing Analyst for Aviva.

Recommendations:

Aviva's management shall ensure:

1. SIRs are appropriately documented and cross-reported to all required parties via I-Track, in a timely manner.
2. Full compliance with Title 22 Regulations and County contract requirements.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of seven children's case files and/or documentation from the provider, Aviva fully complied with 11 of 13 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery.

We noted that the treatment team did not develop comprehensive initial and updated NSPs. The review further revealed that the CSWs' authorizations to implement the NSPs were not obtained timely, or efforts to obtain the CSWs' authorizations were not documented. Some NSPs did not include the CSWs' signatures. The Clinical Director reported that Aviva will do a better job of timely obtaining the CSWs' signatures. The Clinical Director reported that the treatment team will ensure that all NSPs/Quarterly reports are comprehensive.

Recommendations:

Aviva's management shall ensure:

3. CSWs' authorizations to implement the NSPs are timely obtained and efforts are documented.
4. The treatment team develops comprehensive initial NSPs.
5. The treatment team develops comprehensive updated NSPs.

PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

Based on our review of seven children's case files and/or documentation from the provider, Aviva fully complied with 14 of 15 elements reviewed in the area of Personal Rights and Social/Emotional Well-Being.

Children reported they were not free to attend religious services of their choice. The V. P. of Programs and Services reported that children are not denied religious services; however, he was unable to provide records or information regarding Sunday services routines or attendance. He stated that Aviva makes religious services available to residents and added that Aviva also encourages families to attend religious services with their children.

The V. P. of Programs and Services stated that effective immediately, all children will be informed of the weekly Sunday services agenda during the group home's Friday

forum, which all children attend. He also reported that the agency will rotate services for the denominations which the children have expressed interest in attending.

Recommendation:

Aviva's management shall ensure:

6. Children are free to attend religious services and activities of their choice.

PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

Based on our review of seven children's case files and/or documentation from the provider, Aviva fully complied with seven of eight elements reviewed in the area of Personal Needs/Survival and Economic Well-Being.

Five children reported they were neither encouraged nor assisted in creating a Life Book/Photo Album. At the conclusion of the Exit Conference, the Monitor verified that the children reviewed had received a Life Book/Photo Album. The Administrator reported that the children will be encouraged to work on their respective books weekly.

Recommendation:

Aviva's management shall ensure:

7. Children are encouraged and assisted in creating and updating a Life Book/Photo Album.

PERSONNEL RECORDS

Based on our review, Aviva fully complied with 13 of 14 elements in the area of Personnel Records.

During our review, it was noted that one staff person did not sign a criminal background statement in a timely manner. The V. P. of Program and Services reported that the employee had signed the background statement timely, but she had written the incorrect date. The agency will ensure that all documents are timely and accurately signed.

Recommendation:

Aviva management shall ensure:

8. Employees sign a criminal background statement in a timely manner.

FOLLOW-UP FROM THE OHCMD'S PRIOR MONITORING REPORT

Objective

Determine the status of the recommendations reported in our prior monitoring review.

Verification

We verified whether the outstanding recommendations from our prior review were implemented. The last report was issued February 28, 2011.

Results

The OHCMD's prior monitoring report contained no outstanding recommendations.

Recommendation:

None

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A current fiscal review of Aviva Family and Children Services has not been posted by the Auditor-Controller.

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President & CEO
Regina Bette, LMFT

August 6, 2012

Sonya Noil, CSA 1
Out of Home Care Management Division
County of Los Angeles
Department of Children and Family Services
9320 Telstar Avenue #206
El Monte, California 91731

Re: **Group Home Monitoring Review
Aviva Family and Children's Services
DCFS Annual Review Residential Treatment
Program – January 30, 2012
Corrective Action Plan – Amended/Updated – 8-17-
2012**

Dear Ms. Noil:

I am enclosing the Corrective Action Plan (CAP) as a result of the DCFS Annual Review for Aviva Family and Children's Services Residential Treatment Program which was conducted on January 30, 2012. Thank you for your collaborative work with our agency.

I. Licensure/Contract Requirements

3. Are all special incident reports (SIRs) appropriately documented and cross-reported timely?

Corrective Action Plan

During the site visit, Aviva staff was informed that SIRs/I-tracks needed to be cross reported to the OHC Management Division-Sonya Noil for all DCFS cases. It was the agency's understanding that this documentation was to be provided within the next business day. As we were informed that this was a protocol not yet in effect, Aviva has since cross reported all SIRs/I-tracks for DCFS clients to OHC Management Division-Sonya Noil the day of the incident. The Program Secretary and Residential Supervisors, whom enter the information into the I-track system, will continue to be responsible for ensuring that SIRs/I-tracks for DCFS clients are cross reported as per contract expectation.



ACCREDITED: Council on Accreditation • Western Association of Schools and Colleges
MEMBER: Association of Community Human Services Agencies • California Alliance of Child and Family Services • United Way • Jewish Federation Council
Founded in 1913, formerly known as The Ida Strauss Day Nursery & Settlement, and later Jewish Alliance

4. **This item was added on 8/16/2012: CCL cited that agency for violation of personal rights. Agency appealed, awaiting results.

Corrective Action Plan

On 8-16-2012, OHC – Management Division Group Home Monitor, Sonya Noil, sent an “updated version” of this report adding the above item. Mr. Kruskol, Vice President, Programs and Services, and Ms. Noil discussed the fact that this item had resulted in a citation from CCL, and the agency was appealing the decision. To date, the agency has not received a decision on the appeal.

II. Maintenance of Required Documentation and Service Delivery

17. Did the group home obtain or document efforts to obtain the DCFS CSW’s authorization to implement the Needs and Services Plan?

The NSP/Quarterlies were not faxed to the CSW within 10 business days of their completion.

Corrective Action Plan

The therapist will complete the NSP/Quarterly by the due date. The Clinical Director will review the report and print the completed report. The completed report will be faxed to the County Worker within one week of the report due date. Aviva’s efforts to submit the report to the County Worker will be documented on the signature page of the report and by the fax confirmation sheet attached to the end of the report. If the County Worker does not return the signed signature page, the therapist will be responsible for faxing the signature page to the County Worker 2 more times, documenting these efforts to get County Worker’s signature on the signature page and by attaching the fax confirmation sheets. The fax confirmation sheets will be maintained in the resident’s case file.

22. Did the Treatment team develop comprehensive initial Needs and Services Plans (NSP) with the child?

On 2 of the NSP’s, there was no Concurrent Plan listed.

Corrective Action Plan

The therapist will be responsible for requesting the Case Plan Goal and Concurrent Plan are for each client from the County Social Worker. The therapist will enter this information on the Case Plan Goal and Concurrent Plan documents. If the County worker does not provide the Case Plan Goal and/or Concurrent Plan to the therapist, the therapist will ask the client and family (if there is family involvement) their goals for discharge. The therapist will then enter this information on the NSP/Quarterly. The Clinical Director will be responsible for reviewing the NSP/Quarterly to ensure that the Case Plan Goal and Concurrent Plan sections are completed for each NSP/Quarterly.

28. Did the treatment team develop comprehensive updated Needs and Services Plans (NSP) with the child?

On 3 of the NSP/Quarterly's, there was no Concurrent Plan listed.

Corrective Action Plan

The therapist will be responsible for asking the County Worker if there is an update and/or change in the Case Plan Goal and Concurrent Plan for each client. The therapist will enter this information on the Case Plan Goal and Concurrent Plan if there is a change. If the County worker does not provide information about updates and/or changes in the Case Plan Goal and/or Concurrent Plan, the therapist will ask the client and family (if there is family involvement) their goals for discharge. The therapist will update the information if indicated. The Clinical Director will be responsible for reviewing the NSP/Quarterly to ensure that the Case Plan Goal and Concurrent Plan sections are completed for each NSP/Quarterly.

VII Personal Rights and Social/Emotional Well-Being

54. Are children free to attend religious services and activities of their choice?

Corrective Action Plan

Aviva's practice is to encourage families to attend religious services with their children when going on home visits on the weekend. In addition, Aviva will encourage families to take their children with them to the religious service of their choice, when they come to visit their child at the agency. Aviva makes religious services available to the residents, and will continue to make every effort to ensure that the religious denomination of the individual resident's choice will be an option for the residents. This will include seeking out various options of location, times of days and days of the week where staff can take the residents to those religious services. The caveat will always need to take into account the safety of the residents and the appropriate supervision of the residents. On Friday, the activities for the weekend are reviewed by staff with the residents, at which time the residents are informed about what the various religious services (days and times). The residents are given the opportunity to sign up at that time if they wish to attend. The religious services will also listed on the daily activity schedule which is posted each week, so the residents can know in advance the opportunities available to them. On that day, those residents who expressed an interest are given the opportunity to attend the services but are not required to if they change their mind. Each week, the residential supervisors inform administrators which residents chose to attend religious services to ensure that residents are given the opportunity to attend. In addition, Aviva collects feedback from the residents about whether they enjoyed the particular service so that Aviva can make arrangements to send residents to those denominations that the residents find meaningful. In addition, should the need arise, Aviva will explore the option of inviting clergy to come to the treatment center to provide this religious experience.

VIII. Personal Needs/Survival and Economic Well-Being

69. Are children encouraged and assisted in creating and updating a life book/photo album?

Corrective Action Plan

The Residential Supervisor will be responsible for giving the client a copy of their Life Book at intake. The Residential Supervisor will explain to the client the use and purpose of the Life Book. During orientation group with the new residents, the staff will again review the purpose of the Life Book and how to make entries in it. The clients will be given the opportunity to update their Life Books with pictures, awards, school information, important documents and reflections about their experience in the group home. One of the Expressive Arts Therapists will be available to facilitate an activity two times per month so that the clients can maintain their Life Book. The therapist will also ask the client about her Life Book and review it with her monthly during therapy sessions, encouraging her to identify items that she can put in the Life Book.

X. Personnel Records

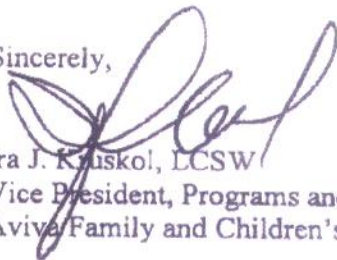
76. Did appropriate employees sign a criminal background statement in a timely manner?

Corrective Action Plan

The protocol is for candidates to meet with HR prior to the hire date and complete the Criminal Record Statement LIC 508 and the Health Screening LIC 503 form. They are given directions for getting the Livescan completed. They are not sent to Livescan or given paperwork without first completing the LIC 508 form. The employee who "misdated" her criminal background statement met with HR on 9/13/11 and was hired on 9/27/11. The employee misdated the document as 12/13/11 rather than 9/13/11 (a "human" error). The HR staff will double check the documents to ensure that the accurate date is recorded.

I am confident that this Corrective Action Plan responds to the comments in the Exit Interview. Please contact me should you have any further questions regarding this CAP.

Sincerely,



Ira J. Kniskol, LCSW
Vice President, Programs and Services
Aviva Family and Children's Services

Cc: Regina Bette, LMFT
President/CEO
Aviva Family and Children's Services