County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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October 5, 2012

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
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Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

WEST COVINA GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

The Out-of-Home Care Management Division (OHCMD) conducted a review of West Covina Group Home (West Covina GH) in February 2012, at which time they had one six-bed site and five male Department of Children and Family Services (DCFS) children, two of whom had resided in the home for less than 30 days.

West Covina GH is located in San Bernardino County and provides services to Los Angeles County DCFS foster youth and Los Angeles County Probation Department youth. According to West Covina GH's program statement, its stated goal is "to help youths develop the skills and self-esteem which will enable them to become self-sufficient and productive persons in society." West Covina GH is licensed to serve a capacity of six children, ages 11 through 17, which includes children from other counties.

For the purpose of this review, three of five currently placed children's case files were reviewed, and all three children were interviewed. Case files were not reviewed for the two children who had resided in the home for less than 30 days. The placed children's overall average length of placement was seven months and the average age was 17. Three discharged children's files were reviewed to determine if they were meeting their Needs and Services Plan (NSP) goals and discharged per their permanency plan. Three staff files were reviewed for compliance with Title 22 Regulations and County contract requirements.

None of the placed children were prescribed psychotropic medication.

SCOPE OF REVIEW

The purpose of this review was to assess West Covina GH's compliance with the County contract and State regulations. The visit included a review of West Covina GH's program statement, administrative internal policies and procedures, three current children's case files, three discharged children case files, and a random sampling of personnel files. A visit was made to the site to assess the quality of care and supervision provided to the children. 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

During our review, the children interviewed reported feeling safe, being provided with good care and appropriate services, being comfortable in their environment and treated with respect and dignity.

Deficiencies were noted during the monitoring review. One child's academic performance and/or attendance did not increase. One child disclosed that consequences were not fair; and another child reported that he was not aware that he was free to receive or reject voluntary medical, dental and psychiatric care. It was also determined that West Covina GH needed to ensure children are given opportunities to participate in age-appropriate extra-curricular, enrichment, and social activities; children's on-going clothing inventories are of adequate quantity; children are encouraged and assisted to create and update a Life Book/Photo Album; and children placed at least 30 days make progress toward meeting their NSP goals. Further, West Covina GH needs to ensure employees receive timely health screening and required initial and emergency intervention training per the program statement.

The Administrator and staff were receptive to implementing systemic improvements to comply with regulations and the County contract requirements. The Administrator agreed to address the deficiencies in a Corrective Action Plan (CAP).

NOTABLE FINDINGS

The following are the notable findings of our review:

- Based on the services provided by West Covina GH, one child's academic performance and/or attendance did not improve. The Administrator stated that

West Covina GH is making every effort to facilitate the child's school attendance and to complete his homework. The child is repeatedly truant from school and a truant officer has been provided to assist and ensure the child attends school. In addition, West Covina GH provides a tutor to help the children with school work. The Administrator will continue with her efforts to ensure the child attends school and improve his academic performance.

- One 17-year old youth disclosed that he did not consider consequences were fair, as staff had placed him on "freeze" several times for no reason. While on "freeze" he cannot participate in any activity and is confined to the group home. He reported that a three-day "freeze" for any offense is unfair. The Administrator stated the consequences are fair and the 17-year old had repeatedly disregarded house rules, AWOLed repeatedly and refused to comply with any "freeze" disciplinary guidelines. This youth has since been replaced at the request of West Covina GH due to his disregard for house rules and acting-out behavior.

- One child disclosed that he was not aware of his right to reject voluntary medical, dental and psychiatric care. The Administrator stated that all children are provided a copy of their Personal Rights and are expected to sign that they have read and understand their rights. She plans to review those rights with the child and ask him to sign that he was made aware that he has rights to reject voluntary medical, dental and psychiatric care.

- One child disclosed he was not given opportunities to participate in age-appropriate extra-curricular, enrichment, and social activities in which he had an interest. The Administrator stated that the child is truant from school regularly and refuses to participate in activities. She will address this concern with the child and have him enroll in extra-curricular activities in which he has an interest.

- One child, who disclosed unfair consequences, reported that he did not have an adequate quantity of clothing. The Administrator showed the Monitor the Clothing Inventory sheet where the child had signed that he received his monthly clothing allowance as well as the inventory of clothing the child had received since placed at West Covina GH. Per the Administrator, the child has not returned all the clothing he has taken with him on weekend visits with relatives. The Administrator stated she planned to take inventory of the child's clothing and ensure he has the required clothing per DCFS clothing requirement. However, this child has since been replaced to a different home at the request of West Covina GH.

- Two children reported they were neither encouraged, nor assisted in creating and updating a Life Book/Photo Album. The Administrator stated she will ensure that all children have a Life Book/Photo album, and staff will encourage and assist all the children in creating and updating their Life Book/Photo Album.

- Two discharged children's files indicated that they had made no progress toward meeting their NSP goals during their residence that exceeded 30 days. The Administrator faulted the staff person who is responsible for documenting the children's progress toward meeting their NSP goals. The Administrator will review Discharge Summaries to ensure that they include all the progress the children make towards achieving their case plan goals.

- One staff member's initial health-screening was not completed timely. The Administrator explained that the health-screening was late as the staff was rehired, and West Covina already had past health information for him. The Administrator will ensure that in the future, rehired staff will be subjected to the same timeframes and requirements for initial health-screenings as newly hired staff.

- No documentation was found to show that two staff members had received initial training. The Administrator stated the two staff members had received most of the required initial training, but she could not locate the sign-in sheets for the training. She will require staff to sign for training they receive. She will further ensure that there is a sign-in sheet at all trainings, and copies of those sign-in sheets will be available for review in staff files.

- Records of Emergency Intervention Training were not found for two staff members. The Administrator stated that the staff members were verbally instructed that they could not restrain children until after they received the Emergency Intervention Training, and they were also required to sign letters with clear instructions that they could not restrain children until they had completed their Emergency Intervention Training. There were no incidents involving these two staff members restraining children. The Administrator submitted copies of the letters signed by the staff to the Monitor. The Administrator will ensure that a staff member trained in Emergency Intervention is on duty with the untrained staff until they complete the training.

A detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held March 14, 2012.

In attendance:

Tonya Alexander, Administrator, and Kirk Barrow, Monitor, OHCMD DCFS.

Highlights:

The Administrator was in agreement with most of the findings and recommendations. West Covina GH Administrator stated they will continue to encourage children to voice their concerns and ensure staff members receive required training.

West Covina GH provided an approved written CAP addressing each recommendation noted in this compliance report. The approved CAP is attached.

We will assess for full implementation of recommendations during our 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:RRS:KR:
EAH:PBG:kb

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

WEST COVINA GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

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

	Contract Compliance Monitoring Review	**Findings: February 2012**
I	**Licensure/Contract Requirements** (9 Elements) 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	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	Full Compliance (ALL)

III	**Maintenance of Required Documentation and Service Delivery** (13 Elements) 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Children Progressing Toward Meeting NSP Case Goals 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 Initial/Updated NSPs	Full Compliance (ALL)
IV	**Education and Workforce Readiness** (8 Elements) 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	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance
V	**Health and Medical Needs** (6 Elements) 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	**Psychotropic Medication** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	Not Applicable (ALL)

VII	**Personal Rights And Social/Emotional Well-Being** (15 Elements)	
	1. Children Informed of Home's Policies and Procedures	1. Full Compliance
	2. Children Feel Safe	2. Full Compliance
	3. Satisfaction with Meals and Snacks	3. Full Compliance
	4. Staff Treatment of Children with Respect and Dignity	4. Full Compliance
	5. Appropriate Rewards and Discipline System	5. Full Compliance
	6. Fair Consequences	6. Improvement Needed
	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 Their Medication	10. Full Compliance
	11. Children Aware of Right to Refuse Medication	11. Full Compliance
	12. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care	12. Improvement Needed
	13. Children Given Opportunities to Plan Activities	13. Full Compliance
	14. Children Participate in Activities (GH, School, Community)	14. Full Compliance
	15. Children's Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities	15. Improvement Needed
VIII	**Personal Needs/Survival and Economic Well-Being** (8 Elements)	
	1. $50 Clothing Allowance	1. Full Compliance
	2. Adequate Quantity of Clothing Inventory	2. Improvement Needed
	3. Adequate Quality of Clothing Inventory	3. Full Compliance
	4. Involvement in Selection of Clothing	4. Full Compliance
	5. Provision of Ethnic 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/Photo Album	8. Improvement Needed
IX	**Discharged Children** (3 Elements)	
	1. Children Discharged According to Permanency Plan	1. Full Compliance
	2. Children Making Progress Toward NSP Goals	2. Improvement Needed
	3. Attempts to Stabilize Children's Placement	3. Full Compliance

X	**Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)** (14 Elements) 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	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Improvement Needed 7. Full Compliance 8. Full Compliance 9. Improvement Needed 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance 14. Improvement Needed

WEST COVINA GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW

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

The following report is based on a "point in time" monitoring visit and addresses findings during the February 2012 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review, West Covina Group Home (West Covina GH) complied with five of 10 sections of our contract compliance review: Licensure/Contract Requirements; Facility and Environment; Maintenance of Required Documentation and Service Delivery; Health and Medical Needs; and Psychotropic Medication. The following report details the results of our review.

EDUCATION AND WORKFORCE READINESS

Based on our review of three children's files and/or documentation from the provider, West Covina GH fully complied with seven of eight elements reviewed in the area of Education and Workforce Readiness.

The review revealed one child's academic performance and/or attendance did not improve. The Administrator stated that West Covina GH makes every effort to get the child to attend school and to do his homework. The child is frequently truant from school and a truant officer has been appointed to assist to ensure the child attends school. In addition, West Covina GH provides a tutor to help the children with school work. The Administrator will continue with her efforts to ensure the child attends school and improves his academic performance.

Recommendation:

West Covina GH management shall ensure:

1. Services are provided to improve children's academic performance and/or attendance.

PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

Based on our review of three children's case files, and/or documentation from the provider, West Covina GH fully complied with 12 of 15 elements reviewed in the area of Personal Rights and Social/Emotional Well-Being.

One 17-year old child disclosed that he did not consider consequences were fair, reporting that staff had placed him on "freeze" several times for no reason. While on "freeze" he cannot participate in any activity and is confined to the group home. He reported that a three-day "freeze" for any offense is unfair. The Administrator stated the consequences are fair and the 17-year old had repeatedly disregarded house rules, AWOLed and refused to comply with any "freeze" disciplinary guidelines. This child has since been replaced after West Covina GH requested his replacement due to the youth's acting-out behavior.

Another child disclosed that he was not aware of his rights to reject voluntary medical, dental and psychiatric care. The Administrator stated that all the children are given their a copy of Personal Rights and are expected to sign that they read and understood their rights. She plans to review those rights with the child and have him sign that he was made aware that he has rights to reject voluntary medical, dental and psychiatric care.

One child disclosed he was not given opportunities to participate in age-appropriate extra-curricular, enrichment, and social activities in which he had an interest. The Administrator stated the child is truant from school regularly and refuses to participate in activities and this was the first time she heard he had an interest in participating in extra curricular activities. She will address his concerns and enroll him in extra-curricular activities in which he has an interest.

Recommendations:

West Covina GH management shall ensure:

2. Consequences are fair.

3. Children are free to receive or reject voluntary medical, dental and psychiatric care.

4. Children are given opportunities to participate in age-appropriate extra-curricular, enrichment, and social activities in which they have an interest.

PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

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

One child, who disclosed that consequences were not fair, also reported that he did not have an adequate supply of clothing, which was confirmed by the Monitor. The Administrator presented documents where the child had signed indicating he had received his monthly clothing allowance. She also showed the Monitor a list of clothing the child received since his placement at West Covina GH. Per the Administrator, the

child had not returned all of his clothing from visits with relatives. She had planned to check the child's clothing inventory and ensure that he has the required clothing per DCFS clothing requirements. This child has since been replaced after West Covina GH requested his replacement due to child's acting-out behavior.

Two children reported they were neither encouraged, nor assisted in creating and updating a Life Book/Photo Album. The Administrator said she will ensure all the children have a Life Book/Photo Album, and staff will encourage and assist all the children in creating and updating their Life Book/Photo Album.

Recommendations:

West Covina GH management shall ensure:

5. Children's clothing inventories are of adequate quantity.

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

DISCHARGED CHILDREN

Based on our review of West Covina GH and/or documentation from the provider, West Covina GH fully complied with two of three elements reviewed in the area of Discharged Children.

Two discharged children who had been placed to the home for at least 30 days had made no progress toward meeting their NSP goals prior to discharge. The Administrator faulted the staff person responsible for documenting the children's progress toward meeting their NSP goals. The Administrator will review Discharge Summaries to ensure they include the progress children make toward achieving their case plan goals.

Recommendation:

West Covina GH management shall ensure:

7. Children placed at least 30 days make progress toward meeting their NSP goals prior to discharge.

PERSONNEL RECORDS

Based on our review of three personnel files, and/or documentation from the provider, West Covina Group Home fully complied with 11 of 14 elements reviewed in the area of Personnel Records.

One staff member's initial health-screening was not completed timely. The Administrator explained that the health-screening was late because the staff member

was rehired, and West Covina GH had prior health information for him. The Administrator will ensure that in the future, rehired staff will be subjected to the same timeframes and requirements for initial health-screenings as newly hired staff.

No documentation was found to show that two staff members had received the required initial training. The Administrator stated the two staff members had received most of the required initial training, but she could not locate the sign-in sheets for the training. She will require staff to sign for trainings they receive. She will further ensure that there is a sign-in sheet at all trainings, and copies of those sign-in sheets will be available in staff files.

Records of Emergency Intervention Training were not found for two staff members. The Administrator stated the staff members were verbally instructed that they could not restrain children until after they received the Emergency Intervention Training. The Administrator also had the two staff members sign letters with clear instructions that they could not restrain children until they had completed their Emergency Intervention Training. She submitted copies of the signed letters to the Monitor and there were no incidents involving these two staff restraining children. The Administrator will ensure that a staff member trained in Emergency Intervention is on duty with the untrained staff until they complete the training.

Recommendations:

West Covina GH management shall ensure:

8. Staff members receive timely initial health screening.

9. Employees receive initial training.

10. Employees receive Emergency Intervention training.

FOLLOW-UP FROM OHCMD'S PRIOR MONITORING REVIEW

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 August 26, 2011.

Results

OHCMD's prior monitoring report contained 13 outstanding recommendations. Specifically, West Covina GH was to ensure the following: the exterior and grounds were well maintained; common quarters were well maintained; sufficient age-appropriate recreational equipment in good condition; development of comprehensive NSPs; monthly contacts with DCFS Children's Social Workers (CSWs) are adequately documented; all children have current court-approved authorizations for the administration of psychotropic medication; and all children on psychotropic medication have a current psychiatric evaluation. West Covina GH was to ensure that children were given opportunities to select their own clothing and were encouraged and assisted in creating a Life Book/Photo Album. West Covina GH management was to ensure that all Child Abuse Central Index (CACI) clearances for staff were submitted timely, that employees sign a criminal background statement in a timely manner and employees receive First-Aid training.

Based on our follow-up of these recommendations, West Covina GH fully implemented 12 of 13 recommendations. West Covina GH did not implement the recommendation that children shall be encouraged and assisted in creating and maintaining a Life Book/Photo Album. Corrective action was requested of West Covina GH to further address the recommendation that was not implemented.

Recommendation:

West Covina GH Management shall ensure:

11. Full implementation of the August 26, 2011 outstanding recommendation from the prior monitoring report, which is noted in this Report as Recommendation 6.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of West Covina GH was posted by the A-C on December 2, 2011. The A-C identified $2,611 in unsupported/inadequately supported expenditures. The DCFS Fiscal Monitoring Section reported that West Covina GH has fully paid off the unsupported/inadequately supported expenditures.

WEST COVINA GROUP CORP.

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

July 10, 2012

Ms. Patricia Bolanos-Gonzalez, CSA 11
Out-of Home Care Management Division
9320 Telstar Ave., #216
El Monte, CA 91731

Subject: **Corrective Action Plan (CAP) Addendum**

Dear Ms. Gonzalez:

Attached are revised CAP addendum mentioned in your letter dated June 25, 2012 regarding the 2011 Compliance Review conducted in February 2012. Attached is a copy of your June 25, 2012 letter for your reference.

I hope the attached CAP addendum meets your requirements and your approval.

Any questions, please contact me at (909)591-2589.

Sincerely,

Hardip S. Gill
Executive Director

CORRECTIVE ACTION PLAN (CAP) ADDENDUM

32. Based on the services provided by the facility has the child's academic performance and/or attendance increased (e.g. improved grades, test scores, promotion to the next level, H.S grad, IEP goals)?

CAP: *The resident [redacted] was discharged on 6/14/12 and was moved to [redacted] West Covina Group Home did the following to assist him to complete the assignments and improve his attendance:*

1. *Got help from truant officer to improve his attendance.*
2. *Contacted school teacher for his homework and daily assignment.*
3. *Got help from TBS coach.*
4. *Staff helped him completing assignments.*
5. *Facility manager visited school on weekly basis to get his attendance record.*

Group Home will hire a tutor for resident who have problem completing their assignments.

52. Are Consequences fair?

CAP: *Consequences are based on a resident's behavior. All residents receive a 24 hour freeze or 72 hour freeze. Which means that they are restricted from going on day passes until the freeze is over. The resident stated that his freeze was unfair because he was frozen when he would AWOL. The resident was AWOL'ing on a daily basis. He was going with his friends and some residents smoking marijuana. However he didn't want to be consequence. Incident reports reflect his behavior at the facility. This is an example of why the resident would get frozen: Attached are two incident reports. Report number [redacted], the resident didn't come home from school on time. An AWOL report was completed because it was unknown where the resident was after school. When he came home he was asked why he was late. He ignored the staff. He changed his clothes and AWOL'ed again, due to the resident's unknown whereabouts from school and him leaving a second time. He was given a 72 hour freeze for AWOL'ing. The residential staff is responsible for incident documentation of his behavior. The Facility Manager is responsible for reporting the incident to the appropriate agencies. Attached you will find 2 examples of the resident's incident reports and Guidelines for Token Suspension (freeze). The guidelines will be posted on the resident board.*

58. Are children free to receive or reject voluntary medical, dental and psychiatric care?

CAP: *Residents are free to receive or reject voluntary medical, dental and psychiatric care. Group Home will put a question in our resident survey. The question will state,* **"Are you aware that you are free to refuse medical, dental and psychiatric care?"** *The staff is present with all minors when they meet with the doctor. If the resident wants to discuss something confidential with the doctor and resident does not want Group home staff presence, staff will comply with the resident request.* ***Attached is a copy of Resident Survey.***

61. Are children given opportunities to participate age-appropriate extra-curricular, enrichment, and social activities in which they have an interest?

CAP; *The resident will be provided the opportunity to participate in age-appropriate extra-circular activities, enrichment, and social activities in which they have an interest. Group Home developed a memo for all residents at the time of intake asking them if they are interested in participating extra-curricular activities. The residents will be required to answer a yes or no question.* ***Attached is a copy of Extra-Curricular Activities memo****. A question will also be put on our resident survey, reminding the residents that at any time that they want to enroll in extra-curricular activities. The question will state,* **"Have you been made aware that you can participate in extra-curricular activities at school and for city sports, music, boxing lessons etc.?"** *If the resident is interested in participating in a sport it will be the Facility Manage responsibility to contact the school and the City to get the appropriate information for enrollment. The following resources will be used to accommodate the residents in reaching their goal for extra-curricular activities:*
The City of Chino – Neighborhood Activity Center at (909) 590- 5575.
Email address: www.communityservices@cityof chino.org
www.USKOkarate.com
www.YMCLA.org
Martial Arts – www.rdkchinohills.com
Universal Martial Arts Centers – www.umacfit.com
Martin Music Center 909 391 2098 223 S Mountain Avenue Ontario
Upland Community School 909 624 3012 951 W Foothill Blvd Claremont
Chino Boxing Club 5201 "D" Street, Chino www.cityofchino.org
The PM Facility Manager is responsible for enrolling residents in City activities and the AM Facility Manager is responsible for school activity sign ups.

#63 Are children's on-going clothing inventories of adequate quality?

CAP: Resident's clothes are inventoried monthly. Residents shop at the store of their choice. All resident have an adequate supply of clothes. The subject resident is no longer in the facility. This resident have adequate supply of clothing before he was discharged. **Attached are copies of his clothing Inventory Report and clothing receipts before he was discharged**.

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

CAP: Group Home will work on *Life books bi-weekly. The staff will be given a disposable camera to take pictures around the facility and during outings. In Life Book, the residents will write out the foods they like, their favorite places, Special memories and dates and facts about themselves. The PM Residential Counselor and PM Facility Manager are responsible for making sure that residents are working on their life books bi-weekly. In our resident survey a question that will address the participation of updating their life books is included.*

71. For children placed at least 30 days, did the child make progress toward meeting their NSP goals?

CAP: *Every effort was made to the above residents to meet their goals. We have groups, discussing goals. We also use a token sheet daily to track their daily goals. Both residents were also enrolled in a drug treatment program in which they made no progress. They were discharged because they needed to attend a drug treatment program that was more structured. They needed in-patient treatment. Both residents were cited several times at school and in the community for drug use. The Residential staff will be responsible for talking to the residents about their NSP goals daily. Their goals will also be posted in their room for daily viewing.*

78. Have employees received timely health-screenings?

CAP: *Our policy states that all staff must have their initial health screening within the first 30 days of hire. The staff does have a health screen however it was completed after the 30 day period. In the future it will be the responsibility of the Facility Manger and Administrator to make sure that all documentation is completed within our policy.*

81. Have appropriate employees received the required initial training?

CAP; Due to the out dated 40 hour training, the documentation and written procedures to support the training documentation will be revised. All Staff was trained when hired but there was no proper training log to support the training that is why all staff will go through the training again and sign that they have been trained and understand their job duties. The Facility is aware that all staff must have the 40 hours training the first week of getting hired. *Attached you will find the 40 hours initial training checklist. Documentation will be put in all staff files within the next 30 days.*
The Facility Manager and Administrator will be responsible for training all staff.
The training will be held at 4041 Carroll Court, Chino, CA 91710.

86. Have appropriate employees received emergency intervention training per the GH's program statement?

CAP: Attached is a copy of Professional Assault Crisis Training- Restraint certificate completed by the Administrator and copies of certificates of the staff who had received Pro-Act training in April 2012.