COUNTY OF LOS ANGELES
PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY – DOWNEY, CALIFORNIA 90242

(562) 940-2501

JERRY E. POWERS
Chief Probation Officer

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Fifth District

June 9, 2014

TO: Each Supervisor

FROM: Jerry E. Powers J.P.
Chief Probation Officer

SUBJECT: **CHILDREN OUR ARE FUTURE GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW**

The Department of Probation, Placement Permanency & Quality Assurance (PPQA), Group Home Monitoring (GHM), conducted a review of Children Are Our Future (CAOF) Group Home in January 2013. CAOF has eight (8) sites in Los Angeles County, of which seven (7) are located in the Fifth Supervisorial District and one (1) is located in the Third Supervisorial District. CAOF provides services to Los Angeles County Probation and Department of Children and Family Services (DCFS) foster children. According to the CAOF program statement, its purpose is to provide professional staff who offers children, counseling and psychotherapy to effectively restore their emotional health and development.

CAOF's eight (8) six-bed sites are licensed to serve a capacity of 48 boys, ages 13 - 17. At the time of review, CAOF was providing services to 22 Probation placed children and 21 DCFS placed children. The placed children's overall average length of placement was 4.39 months, and their average age was 17.56 years. The randomly selected interview sample size was seven (7) youth, six (6) Probation children and one (1) DCFS child, and three (3) children in the sample were prescribed psychotropic medication. These cases were reviewed to assess for timeliness of Psychotropic Medication Authorizations or sufficient documentation of psychiatric monitoring. Additionally, three (3) discharged children's files, two (2) Probation and one (1) DCFS, were reviewed to assess compliance with permanency efforts, and five (5) staff files were reviewed for compliance with Title 22 Regulations and County Contract Requirements.

SUMMARY

During the PPQA/GHM review, the children interviewed generally reported feeling safe at CAOF and that they were provided with good care and appropriate services, were comfortable in their environment and treated with respect and dignity. CAOF was in compliance with four (4) of the 10 areas of the Contract Compliance Review: Health and Medical Needs; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; and Discharged Children.

However, deficiencies were noted in the area of "Licensure Contract Requirements", in that, CAOF did not maintain their vehicles in good repair, did not have comprehensive allowance logs and were not free of substantiated Community Care License (CCL) complaints. In the area of "Facility and Environment", CAOF needed to repair the exteriors, common areas, and children's bedrooms of the Group Home sites. In the areas of "Maintenance of Required Documentation and Service Delivery" and "Educational and Workforce Readiness", the Needs and Services Plans were missing a few necessary signatures, as well as specific dates for goals; such as, Projected Completion Dates and Dates Goals Achieved, and there was not sufficient documentation of their efforts to enroll placed children in school within three (3) days of placement. Additionally, children's files were missing grade reports. Lastly, in the areas of "Personal Needs/Survival and Economic Well-Being" and "Personnel Records", CAOF did not provide children with the minimum monetary allowance and did not have sufficient documentation to show Department of Justice, Federal Bureau of Investigations and Child Abuse Clearance Index clearances prior to hire dates.

REVIEW OF REPORT

On March 7, 2013, Probation PPQA Monitor Lori Tchakerian held an Exit Conference with Executive Director Michael Linquata, Program Director Anthony Linquata, Assistant to the Directors Sandra Harris, and Case Manager Supervisor Theresa Pasqualino. Mr. Michael Linquata commented on the instrument used to determine deficiencies stating that it might be unfair due to no indication of improvement. Nevertheless, CAOF representatives agreed with the review findings and recommendations were receptive to implementing systemic changes to improve their compliance with regulatory standards and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this compliance report has been sent to the Auditor-Controller and (CCL).

CAOF provided the attached approved CAP addressing the recommendations noted in this compliance report. Assessment for implementation of recommendations during will be conducted during next monitoring review.

If additional information is needed or any questions or concerns arise, please contact Director Lisa Campbell-Motton, Placement Permanency and Quality Assurance, at (323) 240-2435.

JEP:REB:LCM:ed

Attachments (3)

c: William T Fujioka, Chief Executive Officer
Sachi A. Hamai, Executive Officer, Board of Supervisors
Brence Culp, Chief Deputy, Chief Executive Office
Wendy Watanabe, Auditor-Controller
Phillip L. Browning, Director, Department of Children and Family Services
Latasha Howard, Probation Contracts
Rhonda David-Shirley, Out-of-Home-Care Management, DCFS
Diana Flaggs, DCFS Contracts
Audit Committee
Sybil Brand Commission
Lenora Scott, Regional Manager, Community Care Licensing
Community Care Licensing
Michael Linquata, Children Are Our Future, Administrator
Georgia Mattera, Public Safety, Chief Executive Office
Chief Deputies
Justice Deputies

CHILDREN ARE OUR FUTURE GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

Chatsworth
10928 Remmet Avenue
Chatsworth, Ca 91311
Phone #: 818-709-3808
License Number: 197600743
Rate Classification Level: 12

Howard
20463 Mayall Avenue
Chatsworth, Ca 91311
Phone #: 818-709-3808
License Number: 197606680
Rate Classification Level: 12

Legg
19110 Merion Drive
Northridge, Ca 91326
Phone #: 818-709-3808
License Number: 197600298
Rate Classification Level: 12

Terry
19646 Ballinger Street
Northridge, Ca 91325
Phone #: 818-709-3808
License Number: 197601442
Rate Classification Level: 12

Harvey
19600 Superior Street
Northridge, Ca 91325
Phone #: 818-709-3808
License Number: 197605633
Rate Classification Level: 12

Kezios
20440 Keswick Street
Canoga Park, Ca 91306
Phone #: 818-709-3808
License Number: 197602059
Rate Classification Level: 12

Saticoy
17622 Lemarsh Street
Granada Hills, Ca 91344
Phone #: 818-709-3808
License Number: 197605332
Rae Classification Level: 12

West Hills
8569 Faust Avenue
West Hills, Ca 91304
Phone #: 818-709-3808
License Number: 191222605
Rate Classification Level: 12

	Contract Compliance Monitoring Review	Findings: January 2013
I	**Licensure/Contract Requirements** (9 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Transportation Needs Met	2. Full Compliance
	3. Vehicle Maintained In Good Repair	3. Improvement Needed
	4. Timely, Cross-Reported SIRs	4. Full Compliance
	5. Disaster Drills Conducted & Logs Maintained	5. Full Compliance
	6. Runaway Procedures	6. Full Compliance
	7. Comprehensive Monetary and Clothing Allowance Logs Maintained	7. Improvement Needed
	8. Detailed Sign In/Out Logs for Placed Children	8. Full Compliance
	9. CCL Complaints on Safety/Plant Deficiencies	9. Improvement Needed

II	**Facility and Environment** (5 Elements)	
	1. Exterior Well Maintained	1. Improvement Needed
	2. Common Areas Maintained	2. Improvement Needed
	3. Children's Bedrooms	3. Improvement Needed
	4. Sufficient Recreational Equipment/Educational Resources	4. Full Compliance
	5. Adequate Perishable and Non-Perishable Foods	5. Full Compliance
III	**Maintenance of Required Documentation and Service Delivery** (10 Elements)	
	1. Child Population Consistent with Capacity and Program Statement	1. Full Compliance
	2. County Worker's Authorization to Implement NSPs	2. Improvement Needed
	3. NSPs Implemented and Discussed with Staff	3. Full Compliance
	4. Children Progressing Toward Meeting NSP Case Goals	4. Full Compliance
	5. Therapeutic Services Received	5. Full Compliance
	6. Recommended Assessment/Evaluations Implemented	6. Full Compliance
	7. County Workers Monthly Contacts Documented	7. Full Compliance
	8. Children Assisted in Maintaining Important Relationships	8. Full Compliance
	9. Development of Timely, Comprehensive Initial NSPs with Child's Participation	9. Improvement Needed
	10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation	10. Full Compliance
IV	**Educational and Workforce Readiness** (5 Elements)	
	1. Children Enrolled in School Within Three School Days	1. Improvement Needed
	2. GH Ensured Children Attended School and Facilitated in Meeting Their Educational Goals	2. Full Compliance
	3. Current Report Cards Maintained	3. Improvement Needed
	4. Children's Academic or Attendance Increased	4. Full Compliance
	5. GH Encouraged Children's Participation in YDS/ Vocational Programs	5. Full Compliance
V	**Health and Medical Needs** (4 Elements)	
	1. Initial Medical Exams Conducted Timely	Full Compliance (ALL)
	2. Follow-Up Medical Exams Conducted Timely	
	3. Initial Dental Exams Conducted Timely	
	4. Follow-Up Dental Exams Conducted Timely	
VI	**Psychotropic Medication** (2 Elements)	
	1. Current Court Authorization for Administration of Psychotropic Medication	Full Compliance (ALL)
	2. Current Psychiatric Evaluation Review	

VII	**Personal Rights and Social/Emotional Well-Being** (13 Elements) 1. Children Informed of Group Home's Policies and Procedures 2. Children Feel Safe 3. Appropriate Staffing and Supervision 4. GH's efforts to provide Meals and Snacks 5. Staff Treat Children with Respect and Dignity 6. Appropriate Rewards and Discipline System 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend or not Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed About Their Medication and Right to Refuse Medication 11. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 12. Children Given Opportunities to Plan Activities in Extra-Curricular, Enrichment and Social Activities (GH, School, Community) 13. Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)	Full Compliance (ALL)
VIII	**Personal Needs/Survival and Economic Well-Being** (7 Elements) 1. $50 Clothing Allowance 2. Adequate Quantity and Quality of Clothing Inventory 3. Children's Involved in Selection of Their Clothing 4. Provision of Clean Towels and Adequate Ethnic Personal Care Items 5. Minimum Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement and Assistance with Life Book	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Improvement Needed 6. Full Compliance 7. Full Compliance
IX	**Discharged Children** (3 Elements) 1. Children Discharged According to Permanency Plan 2. Children Made Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement	Full Compliance (ALL)

X	**Personnel Records** (7 Elements) 1. DOJ, FBI, and CACIs Submitted Timely 2. Signed Criminal Background Statement Timely 3. Education/Experience Requirement 4. Employee Health Screening/TB Clearances Timely 5. Valid Driver's License 6. Signed Copies of Group Home Policies and Procedures 7. All Required Training	1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance

CHILDREN ARE OUR FUTURE GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2012-2013

SCOPE OF REVIEW

The purpose of this review was to assess CAOF's compliance with the County Contract Agreement and Title 22 State Regulations and include a review of the CAOF program statement, as well as internal Administrative policies and procedures. The monitoring review covered the following 10 areas:

- Licensure/Contract Requirements
- Facility and Environment
- Maintenance of Required Documentation and Service Delivery
- Educational and Workforce Readiness
- Health and Medical Needs
- Psychotropic Medication
- Personal Rights and Social Emotional Well-Being
- Personal Needs/Survival and Economic Well-Being
- Discharged Children
- Personnel Records

For the purpose of this review, seven (7) placed children were selected for the sample, six (6) Probation children and one (1) DCFS child. Placement Permanency & Quality Assurance (PPQA), Group Home Monitoring (GHM) interviewed each child and reviewed their case files to assess the care and services they received. Additionally, three (3) discharged children's files were reviewed, two (2) Probation and one (1) DCFS, to assess CAOF's compliance with permanency efforts. At the time of the review, three (3) placed children were prescribed psychotropic medication. Their case files were reviewed to assess for timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring.

Five (5) staff files were reviewed for compliance with Title 22 Regulations and County Contract requirements, and a site visit was conducted to assess the provision of quality of care and supervision.

CONTRACTUAL COMPLIANCE

The following six (6) areas were out of compliance.

Licensure/Contract Requirements

Eight (8) Group Home vehicles were inspected. Two (2) of eight (8) vehicles were not maintained in good repair. One (1) vehicle had excess tagging throughout, and the other vehicle had middle section seats torn apart. In discussing this matter with CAOF Administration, it was stated that the torn seat would be replaced immediately.

Allowance logs from eight (8) Group Home sites were reviewed. The Kezios site was the only site that had comprehensive allowance logs that were complete and comprehensive. Four (4) of the eight (8) Group Home sites had minor issues with the allowance logs, such as missing staff signatures. Three (3) of eight (8) allowance logs were incomplete, in that, not only did they not include staff signatures, they also did not

allowance logs, such as missing staff signatures. Three (3) of eight (8) allowance logs were incomplete, in that, not only did they not include staff signatures, they also did not include information, such as total money received and total paid out. The three (3) allowance logs were not comprehensive because they included sections for haircuts, bus money, stipends etc., making it difficult to determine if this money was coming from the children's allowance or elsewhere. Additionally, if allowance money was used as a form of a consequence, the log did not include explanations for how the allowance money was being used.

During this review period, CAOF received several CCL complaints. The following is a list of substantiated complaints on safety and/or physical plant deficiencies reported by CCL:

8/07/12, physical plant deficiencies at Terry site/repairs completed.

1/10/13, medication error at Howard site/Group Home staff terminated.

1/17/13, physical plant deficiencies at Kezios site/repairs completed.

2/25/13, physical plant deficiencies at Chatsworth site/repair completed.

Recommendation

CAOF Management shall ensure that:

1. Group Home vehicles are maintained in good repair
2. Monetary allowance logs are comprehensive and include staff signatures, as well as total money received and total money paid out clearly documented
3. The agency is free of substantiated CCL complaints

Facility and Environment

A walk through inspection was completed at all eight (8) Group Home sites. There appeared to be a significant improvement at all eight (8) Group Home sites, in that there were not as many deficiencies as the previous year. However, there were still some deficiencies noted.

The following exterior deficiencies were noted:

- **WEST HILLS:** Backyard left side protruding cable, backyard tagging near kitchen window
- **HARVEY:** Right side yard protruding cable
- **HOWARD:** Protruding cable wire on back porch
- **KEZIOS:** Right side yard protruding cable, backyard tagging on block wall, backyard block on ground needs securing

- **LEGG:** Backyard open vent, backyard open drains, backyard missing blocks at gate near slope

- **CHATSWORTH:** Backyard open drains

The following common quarter deficiencies were noted:

- **WEST HILLS:** Cracked tile around kitchen sink, dirty/stained carpet throughout, bathroom #1 mildew inside shower and shower trim, bathroom #1 scuff marks on floor, bathroom #1 missing knob on middle drawer, bathroom #1 drawers falls off track, bathroom #2 scuffed tile floors, bathroom #3 cabinet bottom wood panel falling off, bathroom #3 far left sink knob is loose/broken, staff bathroom mold like residue under sink and inside the cabinet

- **HARVEY:** Bathroom #1 dirty shower floors, bathroom #2 carpet needs cleaning

- **HOWARD:** Cracked tile at kitchen sink, cans not labeled, TV room broken/loose ceiling lamp, missing Personal Rights poster, bathroom #1 two drawers missing knobs, bathroom #1 tagging on mirror, bathroom #2 needs a window screen and patching, bathroom #2 missing drawer knob

- **KEZIOS:** Stained wood panel wall, bathroom #1 dirty under sink, bathroom #1 sink not working, bathroom #1dirty shower floors, bathroom #2 loose window screen

- **LEGG:** Living room book shelf cabinets missing knobs, living room protruding cable near patio door, bathroom #1 mold and lime build up in bathtub, bathroom #2 mold/lime build up on shower wall, bathroom #2 protruding cables/wires on ceiling, bathroom #2 missing towel rack

- **SATICOY:** TV room dirty ceiling

- **CHATSWORTH:** Kitchen oven not working, dining room torn window screen, dining room dirty window ledge, bathroom #3 bulbs not working

- **TERRY:** No Ombudsman poster, dining room ceiling protruding wires, bathroom #2 no lighting, bathroom #2 no bulb cover in shower area

The following children's bedroom deficiencies were noted:

- **WEST HILLS:** Bedroom #2 chipped paint, bedroom #3 dresser drawers off track

- **HARVEY:** Bedroom #1 dresser with visible screws, bedroom #1 closet doors off track, bedroom #1 paint needed inside the closet, bedroom #1 water damage on ceiling, bedroom #3 needs new lamp, bedroom #3 tagging on mirror closets

- **HOWARD:** Bedroom #2 paint needed on wall near closet door

- **KEZIOS:** Bedroom #1 secure "SAFE", bedroom #1 dresser has "wood chips" sticking out, bedroom #1 chipped tile near bedroom door, bedroom #2 lighting not working, bedroom #2 drawers off track/broken, bedroom #3 protruding cables

- **LEGG:** Bedroom #1 tagging on closet door and walk in closet, bedroom #2 change closet door knob Bedroom #3 missing window screen

- **SATICOY:** Bedroom #3 protruding screws in nightstands

- **CHATSWORTH:** Bedroom #1 needs lighting and lampshade

In discussing Group Home site deficiencies with CAOF Administration, it was stated that the interior of the West Hills site was scheduled to be painted and all window screens are scheduled to be replaced. Additionally, it was stated that the Harvey site had its roof repaired and that the Terry site interior was to be painted, as well.

Recommendation:

CAOF management shall ensure that:

1. All deficiencies noted above are repaired or replaced in accordance with the Community Care Licensing, Title 22 standards, which states that all Group Home sites are to be "clean, safe, sanitary and in good repair at all times".

Maintenance of Required Documentation and Service Delivery

Seven (7) children's NSPs were reviewed. It was noted that five (5) of seven (7) NSPs included the County Worker's signature authorizing the implementation of the NSPs. However, two (2) initial NSPs did not include the County Case Workers signature, but did include faxes submitted to the County Worker requesting their signatures. The issue, in this case, was that the faxes were not submitted to the County Worker's until months after the initial NSPs were due.

Seven (7) children's updated NSPs were timely and included the participation of the age appropriate child. The updated NSPs reviewed included measurable goals that were child specific and included interventions, as well as, the persons responsible in assisting the children to meet their goals. Children's progress was also documented in the updated NSPs. However, all seven (7) children's updated NSPs were not comprehensive, in that, they were missing Projected Completion Dates and Dates Goal Achieved making it difficult to determine if the goals were achievable.

Recommendation

CAOF management shall ensure that:

1. They obtain authorization and the signature of the caseworker in a timely manner in order to implement Needs and Services Plan for each child.

2. Updated Needs and Services Plans are comprehensively completed and include all required elements, specifically related to "Projected Completion Dates" and "Date Goal Achieved".

Educational and Workforce Readiness

Of the seven (7) children's files reviewed, six (6) of seven (7) children were enrolled in school within three (3) days of placement. However, for one (1) child, there was no documentation to show the reason the child was not enrolled in school within three (3) days of placement. Additionally, two (2) of seven (7) children's files were missing report cards and/or progress reports.

Recommendation

CAOF management shall ensure that:

1. Children are enrolled in school within three school days and have clear and acceptable documentation for the reason when a child was not be enrolled within the three days and all efforts made to comply with this standard.

2. Report cards and/or progress reports are maintained in children's files.

Personal Needs/Survival and Economic Well-Being

Of the seven (7) children interviewed, one (1) of seven (7) children stated that the minimum monetary allowance was not provided. This one (1) child stated that she was only receiving a $2.00 allowance. The allowance logs were reviewed and showed that children were receiving their allowance on a weekly basis. However, it was noticed at the Saticoy site that, during the weeks of 1/08/13, 1/22/13, 1/29/13, 2/06/13 and 2/19/13, two (2) to four (4) children, each of those weeks, received an allowance of $2.00-$5.00 for the week without any explanations or documentation. This matter was discussed with CAOF administration, along with the importance of further investigating this matter and returning the allowance monies was communicated. This matter will be resolved immediately, and the results of this investigation will be provided in the next review.

Recommendation

CAOF management shall ensure that:

1. Children are provided with the minimum monetary allowance of $7.00 a week as mandated by the County Contract, SOW and Title 22.

Personnel Records

Of the five (5) employee files reviewed, all five (5) employees had DOJ, FBI, and CACI clearances; however, it appeared that one (1) employee was not cleared prior to the hire date. Even though CAOF provided their Fingerprint Clearance Transfer Information form that indicated DOJ, FBI and CACI clearances, there was no official documentation to show that the clearance was submitted prior to the hire date.

Recommendation

CAOF management shall ensure that:

1. All child abuse and criminal records clearances for all employed staff, specifically DOJ, FBI and CACI, are submitted prior to hire dates, in accordance with the Master County Contract, SOW.

PRIOR YEAR FOLLOW-UP FROM PROBATION's PPQA GHM's GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

PPQA/GHM's last compliance report dated November 13, 2012, identified 21 recommendations.

Results

Based on our follow-up, CAOF Group Home fully implemented 20 previous recommendations for which they were to ensure that:

1. Community Care Licensing complaints were corrected
2. CAOF site exterior deficiencies were repaired
3. CAOF quarter deficiencies were repaired
4. CAOF children's bedrooms deficiencies were repaired
5. NSPs documented children's progress
6. Children are attending school
7. There appeared to be an increase in academic/attendance performance
8. Medical exams have been timely and information documented in NSPs
9. Follow-up medical exams have been timely and information documented in NSPs
10. Dental exams have been timely and information documented in NSPs
11. No complaints about discipline
12. Children report consequences are fair
13. Children have been able to attend religious services of their choice
14. Children have had opportunity to plan activities
15. Children have participated in extra- curricular activities
16. No complaints about the quality of clothes/closets and drawers were inspected
17. All children reported having Life Books
18. Employees received initial training/initial training form maintained
19. Child Abuse training classes were scheduled in advance
20. PROACT classes were scheduled in advance

The Group Home did not improve in the recommended area of NSPs, specifically related to obtaining the caseworkers signature to implement the NSPs and missing projected completion dates of goals achieved.

Recommendation

The Group Home shall ensure that:

1. The outstanding recommendation from the 2012 Monitoring Report, dated November 13, 2012, is fully implemented.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The most recent Fiscal Review for Children Are Our Future from the Department of Auditor Controller is dated May 12, 2011, for the fiscal period of January 1, 2009, to December 31, 2009. The report dated May 12, 2011, indicated that Children Are Our Future had questioned/disallowed costs. Children Are Our Future submitted a timely approved fiscal Corrective Action Plan (CAP), which is being monitored by the Department of Children and Family Services, Fiscal Monitoring Section.

April 5, 2013

Lori Tchakerian, DPOII
Group Home Monitoring Unit
Placement Services Bureau
Lynwood Regional Justice Center
11701 S. Alameda St. 2nd Floor
Lynwood, Ca 90262

Re: 2013 Audit CAP

Dear Ms. Tchakerian:

The following will address the Corrective Action Plan request for the above captioned Audit and will specifically address the following items:

I. **LICENSURE/CONTRACT REQUIREMENTS**

a. CAOF Group Home management shall ensure that Group Home vehicles are maintained in good repair

i. All tagging was removed from the Legg House van immediately and the Kezios van second row seat was replaced on 2-13-13.

1. To ensure that tagging is kept to a minimum and the condition of the van is within acceptable condition the following routines are performed

a. Daily Vehicle Maintenance reviews are completed by the Facility Manager and reviewed by the Site Supervisor.

b. All staff members review the vehicle prior to use and indicate problems on the vehicle inspection form which is turned into the Facility Manger immediately if there is an issue with the vehicle.

c. Standard maintenance and emergency repair issues are completed by a licensed independent vehicle mechanic. All repairs and maintenance are tracked via the work request master which is updated by the Assistant to the Directors by scanned receipts from the Accounting Department.

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b. **CAOF Group Home management shall ensure that monetary allowance logs are comprehensive**
   i. CAOF has added the Allowance Log to the Site Supervisor QA checksheet.
   ii. The Site Supervisor reviews the allowance log weekly to ensure that the minor receives the correct amount of allowance according to the policy and procedures listed in the contract, Title 22 and CAOF
   iii. Accounting will review allowance logs to ensure that form has been processed correctly. If the form is found to contain errors, a member of the accounting staff will contact staff member involved and review the form.

c. **CAOF Group Home management shall exhibit proactive measures to be free of substantiated CCL complaints**
   i. CAOF ensures that all site damage is repaired in a timely manner when it occurs.
   ii. CAOF ensures that the site is reviewed daily by assigned Site Supervisors, Facility Managers and Maintenance Personnel.
      1. CAOF ensures that all staff members are trained per Title 22, Contract and CAOF policy and procedures.
      2. And CAOF ensures that staff members are retrained if an incident occurs that violates any of the above captioned policies.

II. <u>FACILITY AND ENVIRONMENT</u>

a. **CAOF Group Home management shall ensure that the exterior deficiencies of Group Home sites are repaired**
   i. CAOF added an additional maintenance person in October 2012 to ensure that repairs are completed in a more timely fashion.
   ii. CAOF also updated our tracking/logging system to ensure deficiencies were tracked more efficiently.
      1. Currently CAOF employs a system of checks and balances that utilizes the Facility Manager and the Site Supervisor to report and follow-up on damage at the site(s).
      2. CAOF has added a system that utilizes the maintenance personnel to tour assigned sites daily to review repairs and/or document any damage and schedule repairs as needed.
   iii. The master repair list is reviewed by the Executive Director and/or Assistant to the Directors on a daily basis to ensure the timely completion of reported repair needs.

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b. **CAOF Group Home management shall ensure that the common quarter deficiencies of Group Home sites are repaired**
   i. CAOF added an additional system to ensure deficiencies were repaired in a timelier manner.
      1. Currently CAOF employs a system of checks and balances that utilizes the Facility Manager and the Site Supervisor to report and follow-up on damage at the site(s).
      2. CAOF has added a system that utilizes the maintenance personnel to tour assigned sites daily to review repairs and/or document any damage and schedule repairs as needed.
      3. The master repair list is reviewed by the Executive Director and/or Assistant to the Directors on a daily basis to ensure the timely completion of reported repair needs.

c. **CAOF Group Home management shall ensure that the children's bedroom deficiencies of Group Home sites are repaired**
   i. CAOF added an additional system to ensure deficiencies were repaired in a timelier manner.
      1. Currently CAOF employs a system of checks and balances that utilizes the Facility Manager and the Site Supervisor to report and follow-up on damage at the site(s).
      2. CAOF has added a system that utilizes the maintenance personnel to tour assigned sites daily to review repairs and/or document any damage and schedule repairs as needed.
   ii. The master repair list is reviewed by the Executive Director and/or Assistant to the Directors on a daily basis to ensure the timely completion of reported repair needs.

III. MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

a. **CAOF Group Home management shall ensure that they obtain authorization to implement Needs and Services Plans**
   i. Upon the completion of the NSP, the Case Manager will fax and/or scan-email to the County Representative for signature. Attempts to obtain the County Representative's signature will be documented in ResTrak and directly on the NSP.
   ii. Case Manager Supervisor will review documents for completion including signature to ensure accuracy and completion of the document.

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b. **CAOF Group Home management shall ensure that updated Needs and Services Plans are comprehensive**
   i. Upon completion of the NSP, the Case Manager Supervisor and the Clinical Supervisor will review the report for accuracy of content and the completion of updated goals to maintain consistent and accurate measurement of the minors' growth in the areas listed in original NSP.
   ii. Report must include information to support the start and completion of goals in addition to any modifications made to goals to ensure that the minor has goals that are achievable.

IV. **EDUCATION AND WORKFORCE READINESS**

a. **CAOF Group Home management shall ensure that children are enrolled in school within three school days**
   i. Working together with Case Manager, the Case Manager Supervisor will review school transcripts in order to recommend the most appropriate school setting for the minor.
   ii. The Case Manager will work with Group Home staff members to secure documents needed for enrollment.
   iii. Facility Manager will enroll the minor within the three days.
      1. The date of enrollment is noted on the Initial NSP. If CAOF is unable to enroll the minor within the three days the following will be documented in the minor's case notes and the NSP. Reason(s) for a delay in enrollment may be:
         a. A delay in receiving documentation needed for enrollment from the County and/or previous placement
            i. CAOF's Case Manager will immediately notify County Representative of any delay and the reason for the delay in addition to noting the information in the NSP.

b. **CAOF Group Home management shall ensure that report cards and/or progress reports are maintained in children's files**
   i. Case Managers maintain ongoing contact with each school that the minor on their caseload attends.
      1. This ensures updated information is received in a timely manner - including report cards.
      2. Report Cards will be copied and placed into the minors' case file upon receipt.
      3. Academic progress will be discussed during weekly Treatment Teams.

V. **CHILDREN'S HEALTH AND MEDICAL NEEDS**

N/A

VI. **PSYCHOTROPIC MEDICATION**

N/A

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VII. PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL BEING

N/A

VIII. PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL BEING

a. **CAOF Group Home management shall ensure that children are provided with the minimum monetary allowance**
   i. All minors receive the minimum allowance per contract
   ii. If a minor needs to pay restitution, the reason for payment will be documented and the amount deducted from his/her allowance will be documented on the Allowance Log form.
      1. All monies that have not been properly documented will be returned to the minors. CAOF will attempt to contact those minors that have left the agency to repay the amounts deducted and not properly documented.
      2. CAOF has updated our policies and procedures to include the following with regard to allowances:
         a. Allowances are to be paid to minors per the agency Program Statement/County requirements
         b. Any monies deducted from the allowance for restitution must be documented directly on the allowance form with the following:
            i. Amount repaid by minor
            ii. Why repaid by minor
            iii. How money was deducted
            iv. Where money is "stored"
            v. How money was used
            vi. How long money will be kept
            vii. Balance sheet of amount(s)

IX. DISCHARGED CHILDREN

N/A

X. PERSONNEL RECORDS

N/A

If you have any questions or concerns about this CAP, please contact me directly at the number listed below.

Respectfully Submitted,

Anthony Linquata
Deputy Director

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