



# COUNTY OF LOS ANGELES PROBATION DEPARTMENT

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**JERRY E. POWERS**  
Chief Probation Officer

November 5, 2012

TO: Each Supervisor

FROM: Jerry E. Powers   
Chief Probation Officer

SUBJECT: **DUBNOFF CENTER CONTRACT COMPLIANCE  
MONITORING REVIEW**

Board of Supervisors  
GLORIA MOLINA  
First District  
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Second District  
ZEV YAROSLAVSKY  
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Fifth District

We have completed a review of Dubnoff Center, operated by Dubnoff Center for Child Development and Educational Therapy, Inc., a Contractor with the County of Los Angeles.

Dubnoff Center consists of two (2) six-bed facilities which provide services to boys from the Los Angeles County Probation Department and Los Angeles County Department of Children and Family Services (DCFS). The Clybourn site provides services for boys ages 13-18 and the Valley site provides services for boys ages 12-16. These Group Homes provide services for boys who exhibit severe emotional disorders and have dual diagnoses.

At the time of this monitoring review in March 2012, Dubnoff Center was providing services to six (6) children from the Los Angeles County Probation Department and three (3) children from the DCFS.

Both Dubnoff Center sites are located in Los Angeles County. The Clybourn site is located in the Third District and the Valley site is located in the Fifth District.

## **SCOPE OF REVIEW**

The purpose of our review is to determine whether the Agency is providing the services as outlined in their Program Statement. In addition, the review covers basic child safety and licensing issues and includes an evaluation of the Agency's Program Statement, internal policies and procedures, child case records, a facility inspection and interviews with children placed in the Group Home at the time of the review. Interviews with children are designed to obtain their perspectives on the program services provided by the Agency and to ensure adherence to the Foster Youth Bill of Rights. To date, a current Auditor Controller Fiscal Review has not been conducted.

## **SUMMARY**

Based on child interviews, our review of five (5) children's files, four (4) Probation and one (1) DCFS, contents of the Needs and Service Plans and/or documentation provided by the Agency, Dubnoff Center is providing the services as outlined in their Program Statement. The Group Home had deficiencies in two main areas; "Health and Medical Needs" and "Facility and Environment." The "Facility and Environment" deficiencies include issues; such as, fixing fire alarms, removing protruding wires, patching holes, and fixing window screens. Additionally, there is graffiti that needs to be painted over, blinds that need to be replaced, and a bathroom countertop that possibly requires replacement.

However, the most egregious deficiencies were found in all areas of "Health and Medical Needs" of the children. The Group Home failed to schedule and follow through with initial medical and dental appointments within 30 days of the child's placement. In addition, the Group Home failed to document important information; such as, children refusing their appointments, not receiving their "Medi-Cal" on time or unavailable appointments within the 30-day time period, all resulting in 100 percent non-compliance in this area. Additionally, Dubnoff Center needs to improve in the area of "Personnel Records" by updating important documents such as driver's licenses, filing significant information such as trainings in employee's files and attending mandated trainings, such as, "First Aid" in a timely manner.

## **NOTABLE FINDINGS**

- Initial Medical and Dental Examinations were not completed within 30 days of the child's placement.
- The Group Home failed to document efforts made to schedule medical and dental appointments.
- Create a family like environment in the family room at Clybourn
- Replace or fix cracked bathroom countertop at Clybourn site
- Replace or fix fire alarm in bedroom of Clybourn site
- Replace or fix window screen at Clybourn site
- Paint graffiti at Clybourn site
- Supply reading materials at Clybourn site
- Replace or fix torn window screen at Valley site
- Fix hole in doors at Valley site
- Fix cracked parts of bathtub at Valley Group site
- Fix loosened hallway paneling at Valley site
- Remove or secure protruding wires at Valley site
- Replace or fix fire alarm at Valley Group site

## **EXIT CONFERENCE**

### **In attendance:**

Ed Dixon, Residential Program Administrator  
Jose Castillo, Residential Program Director  
Kayako Abrams, Case Manager, LMSW

### Highlights:

The exit conference was held on March 15, 2012. The deficiencies were discussed, and the representatives present were in agreement with the review findings. Mr. Dixon, Mr. Castillo, and Mrs. Abrams understood the importance of complying with the Master Agreement Contract for Group Home Foster Care Services and agreed to make the necessary changes, as recommended. A written Corrective Action Plan was submitted on April 25, 2012, and has been approved. A follow-up visit was conducted on May 14, 2012, to ensure that all deficiencies have been corrected. The results for the follow-up visit can be found on the final page of the "Compliance Monitoring Review" section, as follows: Clybourn site has been remodeled, window screen repaired, graffiti was removed and closet door was repaired. The Valley site is in the process of being remodeled, loose paneling was repaired, protruding wires were repaired in a few of the bedrooms and the smoke detector was replaced. Dubnoff has created a new allowance log, appropriate reading material is now available at the Clybourn site, the Case Manager developed a receipt system for getting the Deputy Probation Officer's signature to implement the Needs and Services Plans, all Individualized Education Plans were maintained in the children's files, the facility nurse is documenting medical and dental examinations within 30 days, children are receiving the correct amount for their weekly allowance, the Group Home is now encouraging the children to use their Life Books, the Group Home implemented a "pre-placement" physical exam for all employees prior to working with the children, initial staff training is now properly documented in the employees files, all staff have now received the required one-hour Child Abuse training and CPR training is now implemented two times a year by the on-site Licensed Vocational Nurse.

If you need additional information or have questions or concerns, 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 Officer  
Wendy Watanabe, Auditor-Controller  
Philip L. Browning, Director, Department of Children and Family Services  
Public Information Office  
Audit Committee  
Sybil Brand Commission  
Ed Dixon, Program Administrator, Dubnoff Center  
Jean Chen, Regional Manager, Community Care Licensing  
Lenora Scott, Regional Manager, Community Care Licensing  
Georgia Mattera, Public Safety, Chief Executive Officer  
Chief Deputies  
Justice Deputies

**DUBNOFF CENTER PROGRAM CONTRACT COMPLIANCE  
MONITORING REVIEW- SUMMARY**

	<b>Contract Compliance Monitoring Review</b>	<b>Findings: March 2012</b>
I	<b><u>Licensure/Contract Requirements</u></b> (9 Elements) <ol style="list-style-type: none"> <li>1. Timely Notification for Child's Relocation</li> <li>2. Transportation</li> <li>3. SIRs</li> <li>4. Compliance with Licensed Capacity</li> <li>5. Disaster Drills Conducted/Logs Maintained</li> <li>6. Runaway Procedures</li> <li>7. Allowance Logs</li> <li>8. CCL citations for safety/plant deficiencies</li> <li>9. Detailed sign in/out log for children</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Full Compliance</li> <li>7. Needs Improvement</li> <li>8. Needs Improvement</li> <li>9. Full Compliance</li> </ol>
II	<b><u>Facility and Environment</u></b> (6 Elements) <ol style="list-style-type: none"> <li>1. Exterior Well Maintained</li> <li>2. Common Quarters Maintained</li> <li>3. Children's Bedrooms/Interior Maintained</li> <li>4. Sufficient Recreational Equipment</li> <li>5. Sufficient Educational Resources</li> <li>6. Adequate Perishable and Non Perishable Food</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Needs Improvement</li> <li>3. Needs Improvement</li> <li>4. Full Compliance</li> <li>5. Needs Improvement</li> <li>6. Full Compliance</li> </ol>
III	<b><u>Maintenance of Required Documentation and Service Delivery</u></b> (13 Elements) <ol style="list-style-type: none"> <li>1. Child Population Consistent with Program Statement</li> <li>2. Probation Caseworker Authorization to Implement NSPs</li> <li>3. Children's Participation in the Development of NSPs</li> <li>4. NSPs Implemented and Discussed with Staff/Parents</li> <li>5. Sampled children progressing towards meeting the NSP case goals</li> <li>6. Treatment team developed timely <b>initial</b> NSP with the child</li> <li>7. Treatment team develop comprehensive <b>initial</b> NSP with the child</li> <li>8. Therapeutic Services Received (individual, group, substance abuse, etc.)</li> <li>9. Recommendation Assessments/Evaluations Implemented (psychological, psychiatric, medical evaluations/assessments)</li> <li>10. Probation Caseworkers Monthly Contact Verified</li> <li>11. Agency assist the child in maintaining important relationships</li> <li>12. Treatment team develop timely <b>updated</b> NSP with the child</li> <li>13. Treatment team develop comprehensive <b>updated</b> NSP with the child</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Needs Improvement</li> <li>3. Needs Improvement</li> <li>4. Needs Improvement</li> <li>5. Full Compliance</li> <li>6. Full Compliance</li> <li>7. Needs Improvement</li> <li>8. Full Compliance</li> <li>9. Full Compliance</li> <li>10. Full Compliance</li> <li>11. Full Compliance</li> <li>12. Full Compliance</li> <li>13. Needs Improvement</li> </ol>

IV	<b><u>Education and Workforce Readiness</u></b> (8 Elements) <ol style="list-style-type: none"> <li>1. Child enrolled in school within three (3) days after placement or efforts documented</li> <li>2. Child attends school as required</li> <li>3. Agency facilitates in meeting the child's educational goals (IEP conference, tutoring, parent/teacher conference, homework, etc.)</li> <li>4. Based on services provided, has the child's academic performance and/or attendance increased (improved grades, test scores, promotion to the next level, High School graduated, IEP goals?)</li> <li>5. Current IEPs maintained</li> <li>6. Current copies of the child's report cards or progress cards maintained</li> <li>7. Group Home provides children with opportunities to participate in age appropriate youth development services (YDS) and vocational training programs</li> <li>8. Group Home encourages children's participation in YDS or equivalent programs.</li> </ol>	<ol style="list-style-type: none"> <li>1. Needs Improvement</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Needs Improvement</li> <li>6. Full Compliance</li> <li>7. Full Compliance</li> <li>8. Full Compliance</li> </ol>
V	<b><u>Health and Medical Needs</u></b> (6 Elements) <ol style="list-style-type: none"> <li>1. Initial medical examinations conducted</li> <li>2. Initial medical examinations timely</li> <li>3. Required follow-up medical examinations conducted timely</li> <li>4. Initial dental examinations conducted</li> <li>5. Initial dental examinations timely</li> <li>6. Required follow-up dental examinations conducted timely</li> </ol>	<ol style="list-style-type: none"> <li>1. Needs Improvement</li> <li>2. Needs Improvement</li> <li>3. Needs Improvement</li> <li>4. Needs Improvement</li> <li>5. Needs Improvement</li> <li>6. Needs Improvement</li> </ol>
VI	<b><u>Psychotropic Medications</u></b> (2 Elements) <ol style="list-style-type: none"> <li>1. Current Court Authorization for Administration of Psychotropic Medication or document effort to obtain</li> <li>2. Current Psychiatric Evaluation/Review for each child on psychotropic medication</li> </ol>	Full Compliance (ALL)
VII	<b><u>Personal Rights and Social/Emotional Well-Being</u></b> (17 Elements) <ol style="list-style-type: none"> <li>1. Children informed of Group Home's policies and procedures</li> <li>2. Children feel safe at Group Home</li> <li>3. Children supervised by staff</li> <li>4. Group Home provides appropriate staffing and supervision</li> <li>5. Children report satisfaction with meals and snacks</li> <li>6. Staff treats children with respect and dignity</li> <li>7. Appropriate rewards and discipline system in place</li> </ol>	Full Compliance (ALL)

	<ul style="list-style-type: none"> <li>8. Consequences fair</li> <li>9. Children allowed private visits, make and receive telephone calls and to send and receive unopened correspondence/mail</li> <li>10. Children free to attend religious services and activities of their choice</li> <li>11. Children's chores easy or hard (reasonable)</li> <li>12. Children informed about their medication</li> <li>13. Children aware of their right to refuse medication</li> <li>14. Children free to received or reject voluntary medical, dental and psychiatric care</li> <li>15. Children given opportunities to participate in planning activities</li> <li>16. Children participate in activities, including at the Group Home, in the community or school</li> <li>17. Children given opportunities to participate age-appropriate extra-curricular, enrichment and social activities in which they have an interest</li> </ul>	
VIII	<b><u>Personal Needs/Survival and Economic Well-Being</u></b> (8 Elements) <ul style="list-style-type: none"> <li>1. \$50.00 Clothing Allowance</li> <li>2. Adequate Quantity Clothing Inventory</li> <li>3. Adequate Quality Clothing Inventory</li> <li>4. Involvement in Selection of Clothing</li> <li>5. Provision of Personal Care Items</li> <li>6. Minimum Monetary Allowances</li> <li>7. Management of Allowance</li> <li>8. Encouragement and Assistance with Life Book</li> </ul>	<ul style="list-style-type: none"> <li>1. Need Improvement</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Needs Improvement</li> <li>7. Full Compliance</li> <li>8. Needs Improvement</li> </ul>
IX	<b><u>Discharge Plan</u></b> (3 Elements) <ul style="list-style-type: none"> <li>1. Children placed at least 30 days, was the child discharged according to the permanency plan</li> <li>2. Children placed at least 30 days, did the child make progress toward meeting their NSP goals</li> <li>3. Group Home using available resources to attempt to stabilize the placement prior to requesting the removal of the child</li> </ul>	Full Compliance (ALL)
X	<b><u>Personnel Records</u></b> (14 Elements) <ul style="list-style-type: none"> <li>1. DOJ submitted timely</li> <li>2. If applicable, FBI submitted timely</li> <li>3. Child Abuse Clearance Index (CACI) submitted timely</li> <li>4. Appropriate employees sign a criminal background statement timely</li> <li>5. Group Home staff who have direct contact with children meet the educational/experience requirements</li> <li>6. Employees received timely health screenings</li> </ul>	<ul style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Needs Improvement</li> </ul>

	<ul style="list-style-type: none"> <li>7. Required employees have a valid CA drivers license</li> <li>8. Appropriate Group Home employees signed copies of the Group Home policies and procedures</li> <li>9. Appropriate employees received the required initial training</li> <li>10. Appropriate employees received minimum one-hour training in the area of child abuse identification and reporting</li> <li>11. Appropriate employees received CPR training</li> <li>12. Appropriate employees received First-Aid training</li> <li>13. Appropriate employees received the required annual on-going training</li> <li>14. Appropriate employees received emergency intervention training per the Group Home's program statement</li> </ul>	<ul style="list-style-type: none"> <li>7. Needs Improvement</li> <li>8. Needs Improvement</li> <li>9. Needs Improvement</li> <li>10. Needs Improvement</li> <li>11. Needs Improvement</li> <li>12. Full Compliance</li> <li>13. Full Compliance</li> <li>14. Full Compliance</li> </ul>
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## **DUBNOFF CENTER PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW**

**Dubnoff Center, Clybourn Group Home**  
**6329 Clybourn Avenue**  
**North Hollywood, CA 91606**  
**Phone: (818) 755-4950**  
**License Number: 191201299**  
**Rate Classification Level: 12**

**Dubnoff Center, Valley Group Home**  
**1610 North Valley Street**  
**Burbank, Ca 91505**  
**Phone: (818) 755-4950**  
**License Number: 191290052**  
**Rate Classification Level: 12**

### **LICENSURE/CONTRACT REQUIREMENTS**

Based on our review of five (5) child files, four (4) Probation and one (1) DCFS, and/or documentation provided by the Agency, Dubnoff Center Group Home is in compliance with seven (7) out of nine (9) elements in the area of "Licensure/Contract Requirements". The two (2) areas of non-compliance are "Allowance Logs" and "CCL citations for safety/plant deficiencies".

The Group Homes notify the required agencies in a timely manner when a child is relocated. The Group Home provides transportation to children so that their needs are met; such as, off grounds schools, to substance abuse counseling or Regional Center appointments. The Group Home completes Special Incident Reports (SIRs) and contacts the Probation Department's "Officer of the Day" (OD) Line to report all incidents including runaways. According to the Residential Group Home Client Roster, the Group Homes are in compliance with the licensing capacity. The Group Homes conduct disaster drills monthly. The disaster drill logs for both sites were reviewed and found to be in compliance. The most recent drill for the Clybourn site was completed on February 14, 2012, and the Valley site was completed on February 8, 2012. The Group Homes maintain allowance logs that confirm children are receiving their weekly allowance. However, the allowance log was in disarray and illegible due to children signing in and out and "tagging" graffiti on the pages. In addition, it was hard to differentiate between children's signatures and staff's signatures. Although the allowance log was in disarray, it showed that children receive their allowance on a weekly basis; specifically, every Friday, with the most recent date for all five (5) children on March 16, 2012. The Clybourn site received one citation from Community Care Licensing in January 2012, concerning a wall heater inside the house that was working inconsistently, which has since been corrected. The sign-in and sign-out logs for the children are kept at the staff desk of each Group Home site and are properly maintained.

### **Recommendations:**

1. Dubnoff Center Group Homes shall ensure that children's allowance logs are organized and legible.
2. Dubnoff Center Group Homes shall ensure that all citations received by Community Care Licensing are corrected.

### **FACILITY AND ENVIRONMENT**

Based on our walk through inspection of Dubnoff Group Home sites, Clybourn and Valley, Dubnoff is in compliance with three (3) of six (6) elements in the area of "Facility and Environment". The three (3) areas of non-compliance are "Common Quarters



Maintained", "Children's Bedrooms/Interior Maintained" and "Sufficient Educational Resources".

The Clybourn site is located in North Hollywood around the corner from Dubnoff Center main offices and school. The Group Home is positioned between a residence on the left side and the Dubnoff Residential offices to the right. The Group Home is painted light gray and has a clean, manicured front yard that has a well maintained grassy area with leafy green plants that produce red and pink flowers. Recently, the Group Home planted additional green and dark purple plants in the front yard to give the house a modernized look. The backyard is simple and clean without any safety hazards. The ground is all cement with a chain link fence and cement block wall with two large old trees. The backyard includes a picnic table and barbeque. The Group Home also has a sufficient amount of recreational equipment; such as, basketballs, basketball hoops and footballs including an area for playing basketball and a weight room inside the garage. The weight room consists of dumbbells, free weights and a bench.

However, the inside of Clybourn site needs improvement. The dining room has a large wooden, walnut colored dining table and reddish purple suede type chairs that need some cleaning, due to being stained. The dining room includes two Asian inspired framed posters in addition to a white ceiling fan above the dining room table. The family room is bare and cold with no color. The walls are cream colored and the floors are beige linoleum. There are no posters or pictures on the walls to give it a "home-like" feeling. The door that leads to the backyard has broken blinds. The large tack board in the family room consists of all necessary postings such as the "Emergency Care Chart", "Client's Rights" information and the Ombudsman number. The staff bathroom had dirty linoleum floors. The laminate countertop near the sink in the children's bathroom had a large crack that is also potentially dangerous. On a positive note, the den appears comfortable with a television and has a computer with Internet access that the children use for doing homework, research and for playing games. In addition, the den is decorated with a framed poster of New York and pictures of the children from their fishing trip, prom and school luncheon.

There are three (3) bedrooms with two (2) children to a bedroom. Bedroom #1 consists of two (2) twin beds that have blue and black comforters. Each child has their own six (6) drawer light brown wooden dresser; in addition, there is a medium size walk-in closet with two smaller built in compartments. The fire alarm in bedroom # 1 is not working. Bedroom #2 also consists of two (2) twin beds with blue and black comforters in addition to each child having their own six (6) drawer light brown wooden dresser and a closet. Bedroom #2 has a torn window screen and tagging on the wall. Bedroom #3 is personalized with a large sports poster and football flags. The closet door in bedroom #3 does not slide properly making it difficult to get into the closet. All three (3) bedrooms have modern looking magnet boards for the children to decorate as they choose appropriately. The Clybourn site did not have any reading materials for the children. The Clybourn site has an adequate amount of perishable fruits and vegetables including apples, bananas, oranges, pears, tomatoes and onions. The refrigerator, which needs some cleaning, has food items such as, eggs, cheese, milk and juice. The freezer contained food items such as, chicken breasts, hamburger meat, pizza (fire roasted vegetable from Costco) and breakfast items like, waffles and French toast. The cupboard is full of canned foods including vegetable soup, sliced peaches and various vegetables; such as, sweet potatoes, beans and, carrots, peas and corn.

The Valley site is an older, light blue house located in the city of Burbank across the street from a park that has a baseball field, playground and skate area attached. The front of the Valley site has a well maintained front yard with a tree and some aloe plants. The interior of Valley site is pleasant and warm. The staff area is well organized and consists of all necessary postings, such as the disaster and evacuation plan, Ombudsman number and Foster Youth Rights. The dining area is stylish with a new dark brown wood dining table and chairs. The dining room also has sheer scarlet curtains. The den has a computer with internet access, a fish tank with a large orange fish and a good amount of books for the children to read; such as, books about basketball and football, the Harry Potter series and encyclopedias. However, there are a lot of cosmetic issues that require repairing such as; a hole in the linen closet door, loosened paneling, and cracked bathtub tiles.

The Valley site consists of three (3) bedrooms with two (2) twin beds in each room. Overall, the bedrooms are well kept, but there are some issues. Bedroom #1 has a hole in the closet door and protruding wires in addition to a torn window screen. Bedroom #2 has protruding wires and a broken fire alarm. All three bedrooms had modern magnet boards for the children to decorate as they choose. One child in bedroom #3 has a certificate in math (fractions) posted on his magnet board. The backyard was nicely landscaped with a large lemon tree, as well as aloe plants and a vegetable garden that will be tended to again in the spring of 2012. There is also a ping pong table for additional recreational activity. The Valley site had an adequate amount of perishable fruits and vegetables including apples, lettuce, tomatoes and onions. The refrigerator had food items such as bread, eggs, cheese, celery, orange juice, and milk. The freezer had items such as, hamburger meat and hot dogs. The pantry had food items such as, sliced peaches, macaroni and cheese, peanut butter, salsa and dried fruits and nuts.

The deficiencies noted are as follows:

Clybourn site, Common Quarters:

- Create a "home like" environment in family room
- Replace or fix broken blinds
- Replace or clean dining room chairs
- Clean staff bathroom
- Clean and organize storage space in staff bathroom
- Replace or repair bathroom countertop
- Clean refrigerator

Valley Site, Common Quarters:

- Fix loosened paneling in hallway
- Replace or fix bathtub tiles
- Fix hole in the linen closet door

Clybourn site, Children's Bedrooms/Interior:

- Bedroom #1 replace or fix fire alarm
- Bedroom #2 replace or fix torn window screen
- Bedroom #2 paint "tagged" wall
- Bedroom #3 repair closet door

Valley site, Children's Bedrooms/Interior:

- Bedroom #1 fix hole in closet door
- Bedroom #1 replace or fix torn window screen
- Bedroom #1 remove or secure protruding wires
- Bedroom # 2 replace or fix fire alarm
- Bedroom #2 remove or secure protruding wires

Clybourn site, Sufficient Educational Resources:

- Provide reading materials such as books and magazines

**Recommendations:**

1. For the interior of the Clybourn site, the family room shall be made to feel "home-like" and the blinds are to either be replaced or fixed. The dining room chairs shall either be replaced or cleaned. In addition, the staff bathroom shall be cleaned and the storage space shall be properly maintained. The children's bathroom countertop shall be replaced or repaired and the kitchen refrigerator shall be cleaned. The fire alarm in bedroom #1 shall be replaced or fixed. The torn window screen in bedroom #2 shall be replaced or fixed in addition to the tagged wall being painted. Lastly, the closet door in bedroom #3 shall be repaired.
2. For the interior of the Valley site, the loosened paneling in the hallway and loosened bathtub tiles in the bathroom shall be replaced or fixed. The hole in the linen closet as well as in bedroom #1 closet shall be fixed. The protruding wires in bedroom #1 and bedroom #2 shall be removed or secured. Lastly, the fire alarm in bedroom #2 shall be replaced or fixed.
3. Clybourn site shall supply the children with appropriate reading materials such as books and/or magazines.

**MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY**

Based on our review of five (5) child files and/or documentation provided by the Agency and child interviews conducted, Dubnoff Center Group Home is in compliance with eight (8) of 13 elements in the area of "Maintenance of Required Documentation and Service Delivery". The five (5) areas of non-compliance are "Probation Caseworker Authorization to Implement NSPs", "Children's Participation in the Development of NSPs", "NSPs Implemented and Discussed with Staff/Parents", "Treatment team develop comprehensive Initial NSP with the child" and "Treatment team develop comprehensive Updated NSP with the child".

The Group Home's Program Statement is consistent with the population present in the Group Home. Dubnoff Center Group Home accepts children that are dependent and delinquent wards of the court and treat children that may have a history of abuse, history of delinquency and/or mental health history.

Three (3) of the five (5) documents reviewed did not have the Caseworkers authorization to implement the children's Needs and Service Plans. In addition, the Group Home did not document any efforts to obtain the Caseworker's signature for implementation of the

Needs and Service Plan. The Needs and Service Plans are discussed with staff and the children interviewed report that they participated in their Needs and Service Plans. However, not all Needs and Service Plans had the children's signatures. Only two initial Needs and Service Plans included the child's signature. Additionally, none of the Needs and Service Plans included parent signatures. Two (2) out of the five (5) children are progressing towards meeting their goals as evidenced by one graduating from the program on the day of this monitoring interview. The child had met his goals and was reunifying with his parents. The other child who has been at Dubnoff Center Group Home since December 15, 2009, reported that he now knows how to "calm down". The other three (3) children were new to the Group Home and only had initial Needs and Service Plans making it difficult to evaluate their progress. However, it should be noted that the other three (3) children reported that they are either working on their goals or feel like they are making some progress. The Needs and Service Plans were timely and documentation on the children's goals was well written. However, the goals were not specific to each individual child, as it was lacking attention to detail and accuracy. For example, there were incorrect birthdates or indicating Quarterly report when it was an "Initial" report, in addition to not including any medical or dental information.

The children report that they are receiving services such as, individual and/or family therapy and/or substance abuse counseling. Additionally, one child reported that he has a TBS (Therapeutic Behavioral Specialist) worker who assists him. The children are assessed once they arrive to the Group Home and all other assessments are completed as necessary. Two (2) out of five (5) Needs and Service Plans show Caseworkers monthly contact with the children. The other three (3) children only had initial Needs and Service Plans. The children report that the Group Home provides and encourages them in maintaining important relationships. One child reported that since he is not allowed to visit his mother, the Group Home provides transportation for his three (3) brothers to visit him. The updated Needs and Service Plans were timely and included child specific goals, but continue to need improvement in documenting health care information.

#### **Recommendations:**

1. Dubnoff Center Group Homes shall ensure that signatures/authorization from the Probation Officer or Social Worker to implement the Needs and Service Plans are obtained or their efforts are documented.
2. Dubnoff Center Group Homes shall ensure that the children participate in their Needs and Services Plan by obtaining their signatures or document their efforts to obtain signatures.
3. Dubnoff Center Group Homes shall ensure that Needs and Service Plans are discussed with parents by obtaining their signatures or document their efforts to obtain signatures.
4. Dubnoff Center Group Homes shall ensure that initial Needs and Service Plans are child specific, comprehensive and accurate and that they include health care information.
5. Dubnoff Center Group Homes shall ensure that updated Needs and Services Plans are child specific, comprehensive and accurate and that they include health care information.

## **EDUCATIONAL AND WORKFORCE READINESS**

Based on our review of five (5) child files, child interviews conducted and/or documentation provided by the Agency, Dubnoff Center Group Home is in compliance with six (6) of the eight (8) elements in the area of "Educational and Workforce Readiness". The two (2) areas of non-compliance are "Child enrolled in school within three (3) days after placement or efforts documented" and "Current IEPs maintained".

Dubnoff Center Group Home is in compliance with children attending school. Three (3) of the five (5) children attend Dubnoff School, one (1) child attends East Valley High School and the other child attends Burbank Community Day School. However, not all children are enrolled within three (3) days of placement. Two (2) Needs and Service Plans documented reasons the children were not enrolled in a timely manner. One (1) Needs and Service Plan indicated that the child was enrolled in school nine (9) days late due to the Group Home experiencing difficulty obtaining the Individualized Education Plan (IEP). Another Needs and Services Plan indicated that the Group Home experienced some difficulties in acquiring the child's transcripts and IEP, but did not provide the enrollment date while the other Needs and Services Plan did not include any enrollment information. Dubnoff Center Group Home assists the children in meeting their educational goals. The children reported that there is a tutor who provides assistance with their homework. The Clybourn site has a tutor that provides assistance two (2) times a week, and the Valley site has a tutor that provides assistance three (3) times a week. The children reported that there is communication between the school and the Group Home staff to ensure that they are achieving academically and doing well behaviorally. Three (3) of the children reviewed were new to the Group Home making it difficult to determine their progress even though they are all attending school. However, the other two (2) children are making progress as evidenced by their Needs and Service Plans indicating that they have improved social functioning at school and are completing class assignments.

In review of the children's files, Dubnoff Center Group Home maintains copies of current and past report cards, transcripts, and/or IEPs. There was one (1) file that did not have a copy of the child's IEP. Of the children interviewed, only two (2) were of age to attend Independent Living Program (ILP) classes. The classes are held at Burbank Adult School or Valley College. One child reported that he learned about finances and was able to graduate from the program. The other child reported that classes are offered, but he does not want to attend. Dubnoff School has a Vocational Training Department for children 16 years and older. The younger children are encouraged to participate in daily living skills; for example, participate in cooking classes with a volunteer who provides this service to the Group Home sites twice a month, in addition to cooking and grilling with Group Home staff. The children are also taught basic hygiene; such as, washing their hands and face after eating or working out. The younger children are also encouraged to learn positive social skills such as peer socialization and actual participation in social activities.

### **Recommendations:**

1. Dubnoff Center Group Home shall ensure that children are enrolled in school in a timely manner and if not to document their efforts to enroll the children in school.

2. Dubnoff Center Group Home shall ensure that IEPs are maintained in children's files.

### **HEALTH AND MEDICAL NEEDS**

Based on our review of five (5) child files, child interviews conducted and/or documentation provided by the Agency, Dubnoff Center Group Home is significantly out of compliance with all six (6) elements the area of "Health and Medical Needs". The six (6) areas on non-compliance are "Initial medical examinations conducted", "Initial medical examinations timely", "Required follow-up medical examinations conducted timely", "Initial dental examinations conducted", "Initial dental examinations timely" and "Required follow-up dental examinations conducted timely".

After review of the children's files, there was no documentation to show that Dubnoff Group Home is providing or attempting to provide initial medical and dental examinations within 30 days of the child's placement. Three (3) out of five (5) children reported that they have received medical and dental care. One (1) child reported that he does not receive medical care regularly, while another child politely refused to answer the question. One child reported that he sees an "eye doctor". The children's Needs and Service Plans show no indication of children receiving health care. This issue was discussed with the facility nurse who reported that children refuse their appointments. This issue was also discussed with the Program Administrator who reported that when children are placed without Medi-Cal, they are unable to receive health services in a timely manner.

#### **Recommendations:**

1. Dubnoff Center Group Home shall ensure that initial medical examinations are conducted and/or document their efforts to provide medical examinations.
2. Dubnoff Center Group Homes shall ensure that initial medical examinations are timely; within 30 days of placement or document their efforts.
3. Dubnoff Center Group Homes shall ensure that required follow-up medical examinations are conducted in a timely manner or document their efforts.
4. Dubnoff Center Group Homes shall ensure that initial dental examinations are conducted and/or document their efforts to provide dental examinations.
5. Dubnoff Center Group Homes shall ensure that initial dental examinations are timely; within 30 days of placement or document their efforts.
6. Dubnoff Center Group Homes shall ensure that required follow-up dental examinations are conducted in a timely manner or document their efforts.

### **PSYCHOTROPIC MEDICATION**

Of the five (5) children selected for this sample, one (1) Probation child does not take psychotropic medication. Based on our review of four (4) child files, child interviews conducted and/or documentation provided by the Agency, Dubnoff Center Group Home is in compliance with the two (2) elements in the area of "Psychotropic Medication".

Based on interviews conducted with the four (4) placed children and review of their files, Dubnoff Center Group Home is in compliance with both elements in the area of "Psychotropic Medication".

All files included copies of the Psychotropic Medication Authorization forms. The children who receive psychotropic medications are routinely seen and assessed by the psychiatrist, Dr. Merchant. The children reported that they know the names of their medications, their right to refuse them and why they are taking them. The children reported that they feel "okay" or "fine" while taking their medications.

**Recommendations:**

None

**PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING**

Based on our review of five (5) child files, child interviews conducted and/or documentation provided by the Agency, Dubnoff Center Group Home is in compliance with all 17 elements in the area of "Personal Rights and Social/Emotional Well-Being"

The children reported that they were informed of the Group Home's policies and procedures. The children reported that they feel safe in the Group Home. Of the five (5) children interviewed, four (4) stated that they are supervised by at least two (2) staff during the day and one (1) at night. According to the Group Home's program description there is a 1:3 or 1:2 staff to resident ratio and an "awake" overnight staff. The children reported that they are treated with dignity and respect. The children reported that they function on a level system which means they earn points as long as they follow the program. The children reported that they receive appropriate rewards and discipline. The children receive privileges based on the point system. The children are also disciplined if they do not follow the rules and may receive consequences; such as, early bedtime, "PS" (privileges suspended) and that the child's Probation Officer or Social Worker is notified. All five (5) children reported that the consequences are fair. The children reported that they are allowed to make and receive telephone calls and unopened mail; that they have contact with family and friends, as long as it is approved by their Probation Officer or Social Worker. The children reported that they are aware of their right to participate in the religious services of their choice, however, choose not to attend.

The children reported that the chores are reasonable and that they are rotated on a weekly basis. Some examples of daily chores include living room, kitchen clean up and outdoor clean up; such as, ensuring that the living room is clean and organized, cleaning kitchen countertops, sweeping the floor, watering the lawn and taking the trash cans in and out.

The children report that they are happy with the food they receive. A menu is posted on the refrigerator that offers meals; for example, French toast, omelets, chicken stir-fry, pork burrito and rosemary chicken. Low fat milk and a salad bar are always available at meal time or for snack. Additionally, Dubnoff Center Group Home is involved with the "Harvest Support Center Program" that works with local eateries to donate certain foods and in this case, "Pizza Hut" provides free pizza to the Group Home once a week.

Three (3) out of five (5) children interviewed know their right to receive or reject voluntary medical, dental and psychiatric care, in addition to being informed about their medication and their right to refuse. It should be noted that one child was not prescribed medication and the other child politely refused to answer.

The children report that they are given the opportunity to plan and participate in activities at the Group Home and in the community, but they have to be on the right level; for example, they have to have 655 points or be on Level 5 in order to participate in dinner outings. The children gave examples of recreational activities; such as, going to the park, movies, drawing and painting. They also mentioned participating in sports; such as, basketball and handball. The Group Home is also in partnership with the Van Nuys Treatment Center who provides boxing and Karate for the children placed at the Group Home. The Group Home has also planned day trips such as fishing, hiking and days at Venice Beach. Additionally, the children go to the local YMCA to swim and attend dances with the Boys and Girls Clubs of Southern California. On the day the children were interviewed, they were going to attend a USC basketball game. The children interviewed indicated that they are offered the opportunity to participate in extra-curricular activities such as, after school sports or clubs, but choose not to.

#### **Recommendations:**

None

#### **PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING**

Based on our review of five (5) child files, child interviews conducted and/or documentation provided by the Agency, Dubnoff Center Group Home is in compliance with five (5) of eight (8) elements in the area of "Personal Rights and Economic Well-Being". The three (3) areas of non-compliance are "\$50.00 Clothing Allowance", "Minimum Monetary Allowances" and "Encouragement and Assistance with Life Book".

Dubnoff Center Group Homes provide the children with the required \$50.00 dollars monthly clothing allowance. When a child first gets to the Group Home, they receive \$250.00 dollars for clothing basics. The Group Home keeps an "Inventory of Personal Effects" that lists the articles of clothing, the value of the clothing and also includes the child's and staff signatures. The Group Home's bookkeeper keeps track of how much the children spend and what they buy. All of this information is logged and receipts maintained. The log and the receipts were reviewed and found to be accurate and in order. The children reported that they choose to receive their clothing allowance every three (3) or four (4) months, so they will have a larger amount to spend at one time. Only some children remember signing a waiver to receive their clothing allowance every three (3) to four (4) months versus monthly. There were no waivers found in the children's files to show that they signed off on not receiving their clothing allowance every month. The children receive the opportunity to select their own clothes, and the clothing appears to be of decent and sufficient quantity. The Group Home shops at places; such as, the Northridge or Burbank malls as well as, "Tilly's" "Ross Dress for Less" and "Target". One child reports that he did not like shopping at "Ross", but that he likes shopping at the mall. The children reported that they are satisfied with their choice of clothes. The children's closets and drawers had a significant amount of clothing for each child that included the basics such as underwear, socks, T-Shirts and shorts, but they also had



dress shirts, polo shirts, one child had a suit, another child had a letterman jacket and all children had brand name shoes such as "Nike", "Addidas" and "Vans".

The children reported that they have plenty of personal care items. The children have soap, shampoo, toothpaste and deodorant with brands; such as, "Dove", "Crest" and "Old Spice".

Dubnoff Center Group Homes provides most children with the required minimum weekly allowance. The children reported that they usually spend their allowance on snacks, such as, chips or sunflower seeds. The children reported they are given the opportunity to save their money by opening a bank account but they choose not to. One child, who is 15 years old, reported that he is receiving \$5.00 dollars a week, when the base allowance for a 15 year old is \$7.00 per week.

It appears that the Group Home does not encourage or assist the children in creating "Life Books". One (1) out of four (4) children stated that he keeps a "Life Book", but he was not willing to show it.

#### **Recommendations:**

1. Dubnoff Center Group Homes shall ensure that if the children choose to receive their clothing allowance every three (3) months, they must sign a waiver that is to be included in the child's file.
2. Dubnoff Center Group Homes shall ensure that the children receive the appropriate amount of weekly allowance based on their age. Dubnoff shall make up the difference of money owed to the child that has been receiving \$5.00 dollars allowance per week.
3. Dubnoff Center Group Homes shall encourage and assist the children to keep a "Life Book".

#### **DISCHARGE PLAN**

Due to the fact that there were no DCFS discharged files at the time of this review, only Probation files were reviewed. Based on our review of three (3) discharged Probation child files, Dubnoff Center Group Home is in compliance with all three (3) elements in the area of "Discharge Planning".

The children were all discharged according to their permanency plan. All three children were reunited with their families. The children were discharged towards meeting their Needs and Service Plan goals; for example, by eliminating self harm, decreasing angry outbursts, maintaining a sober lifestyle, and learning and using basic life skills; such as, increasing appropriate socialization with peers and developing interpersonal relationships. All available resources were used to assist in stabilizing the placement prior to requesting the removal of the child. For example, there is an increase in family visits and/or therapy sessions, assisting the child with maintaining their sobriety and decrease negative/delinquent behaviors. Clinicians and Group Home staff as well as substance abuse facilitators, teachers and the Vocational Education Department provided the necessary services to the children to help them reach their goals and graduate from the program.

**Recommendations:**

None

**PERSONNEL RECORDS**

Based on our review of five (5) employee records, Dubnoff Center Group Home is in compliance with eight (8) of the 14 elements in the area of "Personnel Records". The six areas of non-compliance are "Employees received timely health screening", "Required employees have a valid CA drivers license", "Appropriate Group Home employees signed copies of the Group Home policies and procedures", "Appropriate employees received the required initial training", "Appropriate employees received minimum one-hour training in the area of child abuse identification and reporting" and "Appropriate employees received CPR training".

All background checks (DOJ, FBI and CACI) were completed and all employees signed the criminal background statement. All employees met the education and experience requirements. There was one (1) employee that did not have a timely health screening on file. Two (2) out of five (5) employee driver's licenses were expired. Out of the five (5) employees, there was one (1) who did not sign the Group Home policies and procedures form. There was no evidence of initial training in any employee files in addition to one (1) employee not having proof of one hour child abuse training. All employees received their First Aid training which is to expire on October 06, 2013. Although all employees had received their CPR training, they were all expired as of October 6, 2011. All employees received their annual on-going training and appropriate employees received emergency intervention training for Professional Assault Crisis Training (Pro-ACT) which allows staff to physically contain and restrain children in emergency situations.

**Recommendations:**

1. Dubnoff Center Group Homes shall ensure that employees receive timely health screenings and that the information be updated in the employee files.
2. Dubnoff Center Group Homes shall ensure that employees have current California driver's licenses on file.
3. Dubnoff Center Group Homes shall ensure that employees sign the Group Home Policies and Procedures manual and that it be updated in all employee and future employee files.
4. Dubnoff Center Group Homes shall ensure that all employees receive initial training and that it be updated in all employee and future employee files.
5. Dubnoff Center Group Homes shall ensure that employees receive one hour training in the area of child abuse and that it is documented in employee files.
6. Dubnoff Center Group Homes shall ensure that employees receive CPR training and that it is documented in employee files.

## **AUDITOR CONTROLLER FISCAL REVIEW**

As of the date of this review, there has not been a Fiscal Review completed by the Auditor Controller Office.

### **Recommendations:**

None

## **FOLLOW-UP VISIT**

On May 14, 2012, a follow up visit was conducted at Dubnoff Center in order to verify that all recommendations were completed by the Group Home.

- Dubnoff Center created a new allowance log; "ACKNOWLEDGMENT OF CASH RECEIVED", which includes the child's name, date cash received and cash withdrawn, as well as, the child's signature and the balance, which is now being monitored by the Program Supervisor and Program Director.
- The entire Clybourn site has been remodeled and made to feel "home-like". The walls were painted bright and lively colors, the blinds were fixed and a brand new table and chairs are placed in the dining room. The staff bathroom was clean and the storage area was properly maintained. The entire children's bathroom was remodeled and kitchen repaired. The smoke detector (fire alarm) in bedroom #1 was replaced. The window screen in bedroom #2 was repaired and the tagging (graffiti) was painted. The closet door in bedroom #3 slides smoothly. In addition, the Clybourn site now has brand new sofas, wood floors, new flat screen television and pictures hanging on the walls.
- The entire Valley site was in the process of being remodeled. At the time of the follow up, the loosened paneling in the hallway was fixed. The bathroom at the Valley site is going to be replaced altogether. The hole in the linen closet was repaired and the protruding wires in bedroom #1 and bedroom #2 were repaired. The smoke detector (fire alarm) in bedroom #2 was replaced. The plan is for the Valley site to be remodeled by the end of June 2012.
- The Clybourn site now has appropriate reading material, which includes books and magazines. There were two (2) smaller book cases that were full of books; such as, Frankenstein and The Pearl, as well as, some educational books and dictionaries.
- The Case Manager is now responsible for obtaining the DPO of Record and/or Social Worker signatures in order to authorize the implementation of the Needs and Service Plans (NSP). The Case Manager has developed a "RECEIPT" to submit by facsimile in order to guarantee that the DPO of Record and/or Social Worker receive a copy of the NSP and to get their signatures. Additionally, the Case Manager has taken responsibility for obtaining the children's and parent signatures (if applicable). The Case Manager is now documenting all efforts made to obtain these signatures.

- The Case Manager has taken responsibility for ensuring that the initial and updated NSPs are child specific, comprehensive and accurate. Additionally, the Case Manager is now ensuring that the appropriate medical, dental, and psychiatric information is documented in the updated NSP.
- The Case Manager is now making every effort to enroll the children in school in a timely manner. Additionally, various resources; such as, school personnel, will be contacted to assist in the child's enrollment. If a child is not enrolled within three (3) days of placement, the Case Manager is documenting all efforts made to enroll the child in a timely manner. All school documents; such as, Individualized Education Plans (IEPs) are now maintained in the children's respective files.
- The Case Manager and Facility Nurse are now ensuring that children receive timely initial and follow-up medical and dental examinations. The Case Manager and Facility Nurse are now documenting their efforts made to ensure that the children receive their examinations. Additionally, the Case Manager is making all necessary appointments within 30 days of placement. Dubnoff Center is now utilizing supplementary health care resources if the wait at Children's Hospital is too lengthy. The one (1) child who currently remains at Dubnoff Center did receive his medical and dental examinations by the time of the follow-up.
- All children are receiving their clothing allowance at least every month or signing a waiver to receive it every three (3) months. However, during follow-up interviews with the children, most stated that they now prefer to receive their clothing allowance of \$50.00, monthly. The children are now receiving the minimum base rate weekly allowance of \$7.00 dollars, regardless of their age, which may increase in time and due to improved behavior.
- The encouragement of "Life Books" is being reinforced by staff and Administration. Dubnoff Center has created an "ACKNOWLEDGMENT OF LIFE PHOTO ALBUM" which allows the children to either accept or reject their "Life Books".
- The Human Resources Manager has ensured that employees receive timely health screenings. The staff who had not received a timely health screening is no longer employed at Dubnoff Center. Dubnoff Center has implemented a pre-placement physical exam (Treatment Authorization form) along with a TB test for all new employees.
- At the time of this follow-up visit, one (1) staff member was suspended pending proof of current driver's license. Dubnoff Center provided a current driver's license for the other staff member.
- Dubnoff Center provided a signed copy of the Group Home Policies and Procedures form (Disciplinary Procedures).
- As addressed in the Corrective Action Plan, the Human Resource Manager is now ensuring that new employees receive their initial training and that it is

updated in all employee files. All new employees will have an initial training with the Program Director and Program Supervisor. The initial training includes topics; such as, Client's Rights and Regulations, Reporting Special Incidents and Identification and Reporting of Client Abuse.

- All staff has received the Child Abuse Mandated Reporter training. Dubnoff Center is currently using the CDSS website and shall ensure that all future staff receives Child Abuse training accordingly.
- All staff is now receiving CPR training. Dubnoff Center has an on-site Licensed Vocational Nurse who conducts CPR training two (2) times a year. Training is now documented in the employee files.



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To: Lisa Campbell- Motton  
Director, PPQA & Group  
Home Monitoring Unit.  
Los Angeles County  
Probation Dept.  
From: Ed Dixon  
Residential Administrator  
Dubnoff Center.

April 26, 2012

### **LICENSURE/CONTRACT REQUIREMENTS**

#### **Recommendations:**

7. Dubnoff Center Group Homes shall ensure that children's allowance logs are organized and legible.

#### **Corrective Action Plan:**

7. The program Supervisor will be responsible for ensuring that children's allowance logs are organized and legible. New forms have been created to make it easier for residents and staff (a copy of the new form will accompany this CAP. The Director will have the responsibility of making sure that everyone is remains in place. This Cap will implement immediately.

8. Dubnoff Center Group Homes shall ensure that all citations received by Community Care Licensing are corrected.

#### **Corrective Action Plan:**

8. The Program Administrator and Director will ensure that all citations are corrected and signed off on. This CAP will be implemented immediately.

### **FACILITY AND ENVIRONMENT**

#### **Recommendations:**

2. and 3. For the interior of Clybourn site, the family room shall be made to feel "home-like" and the blinds are to either be replaced or fixed. The dining room chairs shall either be replaced or cleaned. In addition, the staff bathroom shall be cleaned and the storage space shall be properly maintained. The children's bathroom countertop shall be replaced or repaired and the kitchen refrigerator shall be cleaned. The fire alarm in bedroom #1 shall be replaced or fixed. The torn window screen in bedroom #2 shall be replaced or fixed in addition to the tagged wall being painted. Lastly, the closet door in bedroom #3 shall be repaired.

**2. and 3. Corrective Action Plan:**

The interior of Clybourn is being addressed to feel more "home-like it will be painted the blinds will be replaced along with the old dining room chairs. The staff bathroom is clean and the storage area is properly maintained. The children's bathroom is being replaced entirely the kitchen refrigerator will be cleaned and maintained no less twice weekly or as needed. The fire alarm in bedroom #1 has been replaced and all window screens are replaced or fixed. There is no tagging and the closet door in bedroom #3 is being repaired.

Even though most of the repairs are being done now all areas of concern listed above. Painting and the bathroom will be completed on or before June 1st. Once the repairs are completed the monitor will be notified immediately. The group home staff will be responsible to make sure that day to day this CAP will be maintained. The Program Director and Administrator will be responsible for making sure the CAP remains in effect. The maintenance department will be responsible for all repairs in a timely manner.

2. and 3. For the interior of Valley site, the loosened paneling in the hallway and loosened bathtub tiles in the bathroom shall be replaced or fixed. The hole in the linen closet as well as in bedroom #1 closet shall be fixed. The protruding wires in bedroom #1 and bedroom #2 shall be removed or secured. Lastly, the fire alarm in bedroom #2 shall be replaced or fixed.

**Corrective Action Plan:**

2. and 3. For the interior of Valley site, the loosened paneling in the hallway has been fixed. The bathroom at Valley is going to be replaced altogether. The hole in the linen closet has been repaired. The protruding wire in bedroom #1 and bedroom #2 has been repaired. The house is being painted all fire alarms have been replaced or repaired. The Program Manager will be responsible for the maintaining the CAP and the Program Director will make sure this CAP remains in effect.

5. Clybourn site shall supply the children with appropriate reading materials such as books and/or magazines.

**Corrective Action Plan:**

5. This area has been corrected Clybourn now has appropriate reading material which includes book and magazines. Direct Care Staff will be responsible for ensuring that books and magazines stay in good shape. Rotate and up-dated, (magazines monthly). Program Director will make sure that this CAP remains in effect.

**MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY**

**Recommendations:**

2. Dubnoff Center Group Homes shall ensure that authorization to implement the Needs and Service Plans are obtained by acquiring Probation Officer and/or Social Worker signatures or to document their efforts to obtain authorization to implement the Needs and Service Plans.

**Corrective Action Plan:**

2. The Program Case Manager will be responsible for ensuring that they get the necessary signature from the Probation Officer or/and Social Worker authorizing the implementation of the Needs and Service Plans, If the authorization can't be obtained the reason will be documented. The Program Director will have the responsibility of making sure this CAP remains in place. This CAP will be implemented immediately.

3. Dubnoff Center Group Homes shall ensure that the children participate in their Needs and Services Plan by obtaining their signatures or to document their efforts to obtain it will be documented.

**Corrective Action Plan:**

3. The Program Case Manager will be responsible for ensuring that the children participate in the Needs and Service Plan obtaining signatures, if their signatures can't be obtained it will be documented. This CAP will be implemented immediately. The Program Director and the Administrator will ensure that the CAP remains in effect.

4. Dubnoff Center Group Homes shall ensure that Needs and Services Plans are discussed with parents by obtaining their signatures or to document their efforts to obtain parent's signatures.

**Corrective Action Plan:**

4. The Program Case Manager will be responsible for ensuring that the NSP are discussed with the parents(those who have parents) and signatures are obtained, If the signature is not obtained it will be documented why. This CAP will be implemented immediately. The Program Director and the Administrator will ensure that the CAP remains in effect.

7. Dubnoff Center Group Homes shall ensure that initial Needs and Service Plans are child specific, comprehensive and accurate and that they include health care information.

**Corrective Action Plan:**

7. The Program Case Manager will be responsible for ensuring that the NSP are child specific, comprehensive and accurate and will include health care information. The Program Director and the Administrator will ensure that the CAP remains in effect. This CAP will be implemented immediately.

13. Dubnoff Center Group Homes shall ensure that updated Needs and Services Plans are child specific, comprehensive and accurate and that they include health care information.

**Corrective Action Plan:**

13. The Program Case Manager will be responsible for ensuring that all updated NSP are child specific, comprehensive and accurate and will include health care information. The Program Director and the Administrator will ensure that the CAP remains in effect.

This CAP will be implemented immediately.



## **EDUCATIONAL AND WORKFORCE READINESS**

### **Recommendations:**

1. Dubnoff Center Group Home shall ensure that children are enrolled in school in a timely manner and if not to document their efforts to enroll the children in school

### **Corrective Action Plan:**

1. The Program Case Manager along with the Administrator will make every effort to enroll children in school in a timely manner. If the process is slowed for any reason it will be documented. The Program Director will make sure that this CAP is maintained. This CAP will be implemented immediately.
5. Dubnoff Center Group Home shall ensure that IEPs are maintained in children's files.

### **Corrective Action Plan:**

5. The Program Case Manager will ensure that all IEPs are maintained in children's files, The Program Director will make sure the CAP is maintained. This CAP will be implemented immediately.

## **HEALTH AND MEDICAL NEEDS**

### **Recommendations:**

1. Dubnoff Center Group Home shall ensure that initial medical examinations are conducted and/or document their efforts to provide medical examinations.

### **Corrective Action Plan:**

1. The Program Case Manager and the facility Nurse will ensure that all initial medical examinations are conducted and all efforts will be documented. The Program Administrator will make sure the CAP is maintained. This CAP will be implemented immediately.

2. Dubnoff Center Group Homes shall ensure that initial medical examinations are timely; within 30 days of placement or document their efforts.

### **Corrective Action Plan:**

2. The Program Case Manager and the facility Nurse will ensure that all medical examinations are timely; within 30 days of placement or document efforts. The Program Administrator will make sure the CAP is maintained. This CAP will be implemented immediately.

3. Dubnoff Center Group Homes shall ensure that required follow-up medical examinations are conducted in a timely manner or document their efforts.

**Corrective Action Plan:**

3. The Program Case Manager and the facility Nurse will ensure that all required follow-up medical examinations are conducted in a timely manner or document efforts. The Program Administrator will make sure the CAP is maintained. This CAP will be implemented immediately.

4. Dubnoff Center Group Homes shall ensure that initial dental examinations are conducted and/or document their efforts to provide dental examinations

**Corrective Action Plan:**

4. The Program Case Manager and the facility Nurse will ensure that the initial dental examination are conducted and/or documented. The Program Administrator will make sure the CAP is maintained. This CAP will be implemented immediately.

5. Dubnoff Center Group Homes shall ensure that initial dental examinations are timely; within 30 days of placement or document their efforts.

**Corrective Action Plan:**

5. The Program Case Manager and the facility Nurse will ensure that initial dental examination are timely within 30 days of placement or document their efforts. The Program Administrator will make sure the CAP is maintained. This CAP will be implemented immediately.

6. Dubnoff Center Group Homes shall ensure that required follow-up dental examinations are conducted in a timely manner or document their efforts.

**Corrective Action Plan:**

6. The Program Case Manager and the facility Nurse will ensure that required follow-up dental examinations will be conducted in a timely manner or will document their effort. The Program Administrator will make sure the CAP is maintained. This CAP will be implemented immediately.

**PSYCHOTROPIC MEDICATION**

**Recommendations:**

None

**PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING**

**Recommendations:**

None

### PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

### Recommendations:

1. Dubnoff Center Group Homes shall ensure that the children receive their clothing allowance at least every three (3) months and if they chose to do so that they sign a waiver.

**Corrective Action Plan:**

1. The Program Director will ensure that all children receive their clothing allowance at least every three(3) months and have children sign waiver stating the prefer every 3 months over \$50 a month. Dubnoff Accounting Dept will keep records that this CAP has been maintained. This CAP is being implemented immediately.

6. Dubnoff Center Group Homes shall ensure that the children receive the appropriate amount of weekly allowance based on their age.

**Corrective Action Plan:**

- 6. The Program Director will ensure that all children receive the appropriate amount of weekly allowance based on their age. Dubnoff Accounting Dept will keep records that this CAP has been maintained. This CAP is being implemented immediately.**

8. Dubnoff Center Group Homes shall encourage the children to keep a "Life Book".

**Corrective Action Plan:**

- 8. The Direct Care Staff will continue to encourage the children to keep a " Life Book" This will also be reinforced by the Director, Administrator and the Case Manager, if the children decide that they choose not to participate they will sign a statement indicating that. This CAP is being implemented immediately.**

## DISCHARGE PLAN

**Recommendations:**

None

**PERSONNEL RECORDS**

**Recommendations:**

6. Dubnoff Center Group Homes shall ensure that employees receive timely health screenings and that the information be updated in the employee files.

**Corrective Action Plan:**

6. The Human Resource Manager will be responsible to ensure that employees receive timely health screenings and that the information be updated in employee files. The Program Director will ensure that this CAP is maintained. This CAP is being implemented immediately.

7. Dubnoff Center Group Homes shall ensure that employees have current California driver's licenses on file.

**Corrective Action Plan:**

7. The Human Resource Manager will ensure that all employees have current California driver's licenses on file. The Program Director will ensure that this CAP is maintained. The CAP is being implemented immediately.

8. Dubnoff Center Group Homes shall ensure that employees sign the Group Home Policies and Procedures manual and that it be updated in all employee and future employee files.

**Corrective Action Plan:**

8. The Human Resource Manager will ensure that all employees sign the Group Home Policies and Procedures manual and make sure it is updated in all employee and future employee files. The Program Director will ensure that this CAP is maintained. The CAP is being implemented immediately.

9. Dubnoff Center Group Homes shall ensure that all employees receive initial training and that it be updated in all employee and future employee files.

**Corrective Action Plan:**

9. The Human Resource Manager and the Program Director will ensure that new employees receive their initial training and that it is updated in all employee files. This CAP is being implemented immediately.

10. Dubnoff Center Group Homes shall ensure that employees receive one hour training in the area of child abuse and that it is documented in employee files.

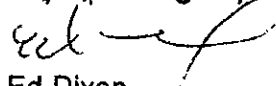
**Corrective Action Plan:**

10. The Human Resource Manager and the Program Director will ensure that all employees receive one hour training in child abuse and that it is documented in employee files. This CAP is being implemented immediately.

11. Dubnoff Center Group Homes shall ensure that employees receive CPR training and that it is documented in employee files.

**Corrective Action Plan:**

11. The Human Resource Manager and the Program Director will ensure that all employees receive CPR training and that it is documented in employee files. This CAP is being implemented immediately.



Ed Dixon  
Administrator