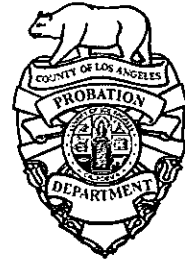




# COUNTY OF LOS ANGELES PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY – DOWNEY, CALIFORNIA 90242

(562) 940-2501



**JERRY E. POWERS**  
Chief Probation Officer

Board of Supervisors  
**GLORIA MOLINA**  
First District

**MARK RIDLEY-THOMAS**  
Second District

**ZEV YAROSLAVSKY**  
Third District

**DON KNABE**  
Chairman-Fourth District

**MICHAEL D. ANTONOVICH**  
Fifth District

June 9, 2014

TO: Each Supervisor

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

SUBJECT: **CRITTENTON SERVICES FOR CHILDREN AND FAMILIES  
GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW**

The Department of Probation, Placement Permanency & Quality Assurance (PPQA), Group Home Monitoring (GHM) conducted a review of Crittenton Services for Children and Families Group Home in March 2013. Crittenton Services for Children and Families has one site, located in the Fourth Supervisorial District of Orange County and provides services to Los Angeles County Probation and the Department of Children and Family Services (DCFS) foster children and youth. According to Crittenton Services for Children and Families Program Statement, its purpose is designed to treat clients who are physically, sexually and emotionally abused and neglected. The program is also designed to treat pregnant clients, clients who are delinquent in their behavior, clients who require psychotropic medication and clients who exhibit severe behavioral problems, confusion with sexual identity, and lack self-esteem.

Crittenton Services for Children and Families is licensed to serve a capacity of 101 female clients, ages 12 - 17 years of age. The Group Home is also licensed to accept 37 infants, age birth to four (4) years old. At the time of this review, Crittenton Services for Children and Families served 44 Probation children and five (5) DCFS placed children. The placed children's overall average length of placement was five (5) months, and their average age was 17 years. The randomly selected interview sample size was seven (7), five (5) Probation children and two (2) DCFS children. At the time of the review, one (1) placed child was prescribed psychotropic medication, and this case was reviewed to assess for timeliness of Psychotropic Medication Authorizations and sufficient documentation of psychiatric monitoring. Additionally, two (2) discharged children's files were reviewed to assess compliance with permanency efforts, both were Probation files, as there were no DCFS child files available to review during this monitoring period, and five (5) staff files were reviewed for compliance with Title 22 Regulations and County Contract Requirements.

### **SUMMARY**

During the PPQA/GHM review, the interviewed children generally reported feeling safe at Crittenton Services for Children and Families and that they were provided with good care and appropriate services, were comfortable in their environment and treated with respect and dignity. Crittenton Services for Children and Families was in compliance with seven (7) of the 10 areas of our Contract Compliance Review: Licensure/Contract Requirements; Educational and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records.

However, deficiencies were noted in the areas of Facility and Environment, Maintenance of Required Documentation of Service Delivery and Personal Rights and Social/Emotional Well-Being. With regards to Facility and Environment, some couches in the common areas need replacement and carpet needs to be shampooed in all areas, along with minor repairs and graffiti removal in bedrooms and bathrooms. Regarding Maintenance of Required Documentation of Service Delivery, one deficiency was found regarding updating Needs and Services Plans, and in the area of Personal Rights and Social/Emotional Well-Being, improvement was needed related to the snacks provided, participation in planning activities and fair consequences.

### **REVIEW OF REPORT**

On May 10, 2013, Probation PPQA Monitor RaTasha Smith held an Exit Conference with Tristyn Ingallinera, Vice President of Residential Services, Briana Wheat, Program Director and Barbara Hernandez, Vice President of Community Services. Crittenton Services for Children and Families 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). They did have a comment regarding the documentation of county workers monthly contact. Representatives reported that it is not always possible to know when the county workers are visiting with the children, since "on-site" Probation Officers do not sign in the visitation log, and other County Workers visit with the children at school and do not notify staff when they are going to have a visit. Group Home representatives were able to provide additional documentation to verify the monthly contact with the county worker.

A copy of this compliance report has been sent to the Auditor-Controller and Community Care Licensing.

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

Crittenton Services Contract Compliance Review

June 9, 2014

Page 3 of 3

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  
Community Care Licensing  
Briana Wheat, Program Director, Crittenton Services for Children and Families  
Georgia Mattera, Public Safety, Chief Executive Office  
Chief Deputies  
Justice Deputies

**CRITTENTON SERVICES FOR CHILDREN AND FAMILIES GROUP HOME  
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY**

100 E. Valley View  
Fullerton, CA 92832  
License # 300612972  
Rate Classification Level: 12

	<b>Contract Compliance Monitoring Review</b>	<b>Findings: March 2013</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 Needs Met</li> <li>3. Vehicle Maintained In Good Repair</li> <li>4. Timely, Cross-Reported SIRs</li> <li>5. Disaster Drills Conducted &amp; Logs Maintained</li> <li>6. Runaway Procedures</li> <li>7. Comprehensive Monetary and Clothing Allowance Logs Maintained</li> <li>8. Detailed Sign In/Out Logs for Placed Children</li> <li>9. CCL Complaints on Safety/Plant Deficiencies</li> </ol>	Full Compliance (ALL)
II	<b><u>Facility and Environment</u></b> (5 Elements) <ol style="list-style-type: none"> <li>1. Exterior Well Maintained</li> <li>2. Common Areas Maintained</li> <li>3. Children's Bedrooms</li> <li>4. Sufficient Recreational Equipment/Educational Resources</li> <li>5. Adequate Perishable and Non-Perishable Foods</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Improvement Needed</li> <li>3. Improvement Needed</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> </ol>
III	<b><u>Maintenance of Required Documentation and Service Delivery</u></b> (10 Elements) <ol style="list-style-type: none"> <li>1. Child Population Consistent with Capacity and Program Statement</li> <li>2. County Worker's Authorization to Implement NSPs</li> <li>3. NSPs Implemented and Discussed with Staff</li> <li>4. Children Progressing Toward Meeting NSP Case Goals</li> <li>5. Therapeutic Services Received</li> <li>6. Recommended Assessment/Evaluations Implemented</li> <li>7. County Workers Monthly Contacts Documented</li> <li>8. Children Assisted in Maintaining Important Relationships</li> <li>9. Development of Timely, Comprehensive Initial NSPs with Child's Participation</li> <li>10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation</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. Full Compliance</li> <li>8. Full Compliance</li> <li>9. Full Compliance</li> <li>10. Improvement Needed</li> </ol>

CRITTENTON SERVICES FOR CHILDREN AND FAMILIES GROUP HOME  
PAGE 2

IV	<b><u>Educational and Workforce Readiness</u></b> (5 Elements) <ol style="list-style-type: none"> <li>1. Children Enrolled in School Within Three School Days</li> <li>2. GH Ensured Children Attended School and Facilitated in Meeting Their Educational Goals</li> <li>3. Current Report Cards Maintained</li> <li>4. Children's Academic or Attendance Increased</li> <li>5. GH Encouraged Children's Participation in YDS/ Vocational Programs</li> </ol>	Full Compliance (All)
V	<b><u>Health and Medical Needs</u></b> (4 Elements) <ol style="list-style-type: none"> <li>1. Initial Medical Exams Conducted Timely</li> <li>2. Follow-Up Medical Exams Conducted Timely</li> <li>3. Initial Dental Exams Conducted Timely</li> <li>4. Follow-Up Dental Exams Conducted Timely</li> </ol>	Full Compliance (ALL)
VI	<b><u>Psychotropic Medication</u></b> (2 Elements) <ol style="list-style-type: none"> <li>1. Current Court Authorization for Administration of Psychotropic Medication</li> <li>2. Current Psychiatric Evaluation Review</li> </ol>	Full Compliance (ALL)
VII	<b><u>Personal Rights and Social/Emotional Well-Being</u></b> (13 Elements) <ol style="list-style-type: none"> <li>1. Children Informed of Group Home's Policies and Procedures</li> <li>2. Children Feel Safe</li> <li>3. Appropriate Staffing and Supervision</li> <li>4. GH's efforts to provide Meals and Snacks</li> <li>5. Staff Treat Children with Respect and Dignity</li> <li>6. Appropriate Rewards and Discipline System</li> <li>7. Children Allowed Private Visits, Calls and Correspondence</li> <li>8. Children Free to Attend or not Attend Religious Services/Activities</li> <li>9. Reasonable Chores</li> <li>10. Children Informed About Their Medication and Right to Refuse Medication</li> <li>11. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care</li> <li>12. Children Given Opportunities to <u>Plan</u> Activities in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)</li> <li>13. Children Given Opportunities to <u>Participate</u> in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)</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. Improvement Needed</li> <li>5. Full Compliance</li> <li>6. Improvement Needed</li> <li>7. Full Compliance</li> <li>8. Full Compliance</li> <li>9. Full Compliance</li> <li>10. Full Compliance</li> <li>11. Full Compliance</li> <li>12. Improvement Needed</li> <li>13. Full Compliance</li> </ol>

CRITTENTON SERVICES FOR CHILDREN AND FAMILIES GROUP HOME  
PAGE 3

VIII	<b><u>Personal Needs/Survival and Economic Well-Being</u></b> (7 Elements) <ol style="list-style-type: none"> <li>1. \$50 Clothing Allowance</li> <li>2. Adequate Quantity and Quality of Clothing Inventory</li> <li>3. Children's Involved in Selection of Their Clothing</li> <li>4. Provision of Clean Towels and Adequate Ethnic Personal Care Items</li> <li>5. Minimum Monetary Allowances</li> <li>6. Management of Allowance/Earnings</li> <li>7. Encouragement and Assistance with Life Book</li> </ol>	Full Compliance (ALL)
IX	<b><u>Discharged Children</u></b> (3 Elements) <ol style="list-style-type: none"> <li>1. Children Discharged According to Permanency Plan</li> <li>2. Children Made Progress Toward NSP Goals</li> <li>3. Attempts to Stabilize Children's Placement</li> </ol>	Full Compliance (ALL)
X	<b><u>Personnel Records</u></b> (7 Elements) <ol style="list-style-type: none"> <li>1. DOJ, FBI, and CACIs Submitted Timely</li> <li>2. Signed Criminal Background Statement Timely</li> <li>3. Education/Experience Requirement</li> <li>4. Employee Health Screening/TB Clearances Timely</li> <li>5. Valid Driver's License</li> <li>6. Signed Copies of Group Home Policies and Procedures</li> <li>7. <u>All</u> Required Training</li> </ol>	Full Compliance (ALL)

**CRITTENTON SERVICES FOR CHILDREN AND FAMILIES GROUP HOME  
CONTRACT COMPLIANCE MONITORING REVIEW  
FISCAL YEAR 2012-2013**

**SCOPE OF REVIEW**

The purpose of this review was to assess Crittenton Services for Children and Families compliance with the County contract and State regulations and include a review of the Crittenton Services for Children and Families 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, five (5) Probation children and two (2) DCFS children. 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, two (2) discharged children's files were reviewed to assess compliance with permanency efforts. Both were Probation files, as there were no DCFS child files available to review during this monitoring period. At the time of the review, one (1) placed child was prescribed psychotropic medication. This case file was reviewed to assess for timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring.

PPQA/GHM reviewed five (5) staff files for compliance with Title 22 Regulations and Los Angeles County contract requirements and conducted a site visit to assess the provision of quality of care and supervision.

**CONTRACTUAL COMPLIANCE**

The following three (3) areas were out of compliance.

**Facility and Environment**

During the facility inspection, the following deficiencies were noted in each cottage:

- **Pine Cottage-** replacement of couches in the library and removal of graffiti from window in bedroom #4
- **Aspen Cottage-** replacement of a couch in the library, a kick plate needs to be repaired in the bathroom of bedroom #5, and removal of graffiti from bathroom #7

- **Willow Cottage-** removal of graffiti from bedroom #2

The carpet and doors in all cottages needed cleaning.

#### **Recommendation**

1. Crittenton Services for Children and Families management shall ensure that the aforementioned deficiencies will be corrected or replaced in a timely manner.

#### **Maintenance of Required Documentation and Service Delivery**

During the review of documentation, there was one (1) updated NSP that contained the incorrect date of completion.

#### **Recommendation**

1. Crittenton Services for Children and Families management shall ensure that the correct date is applied to all updated NSP's.

#### **Personal Rights and Social/Emotional Well-Being**

During the child interviews, one child reported that she does not like the snacks that are provided and would like more of a variety. The Group Home provides fresh fruit, string cheese, granola bars, yogurt, and quesadillas. The child wanted more "junk food" type items, like potato chips and candy.

Related to rewards and discipline, two children reported that they did not believe that the consequences were fair. For example, the two children stated that, when a child leaves the facility without permission, there is a standard consequence. Depending on the reason for leaving, a child may not receive the same consequence. At times, the Group Home may focus on the factors that triggered the child to leave so other children get upset when they see a child who has left and returned back to the facility that did not receive the standard consequence.

One youth reported that she did not get the opportunity to participate in planning activities. However, she did not say why she wasn't given the opportunity. The other children interviewed stated that the Group Home has a recreation department and a "Girl's Counsel" that meets weekly to discuss the planned activities where all the children give their input.

#### **Recommendation**

1. Crittenton Services for Children and Families management shall ensure that the children are provided with a variety of nutritious snack, that the consequences are fair and that all children have the opportunity to participate in planning activities.



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

PPQA GHM's last compliance report dated October 12, 2012, identified (12) twelve recommendations.

**Results**

Based on the prior year follow-up, Crittenton Services for Children and Families implemented (7) seven previous recommendations, for which they were to ensure that:

- Initial NSP's were developed timely
- Initial NSP's were comprehensive
- Children were informed of the Group Home's policies and procedures
- Children were supervised by staff
- Staff treat children with respect and dignity
- Children allowed private visits, make and receive telephone calls and to send and receive unopened mail
- Children participate in activities at the group home, community or school

The following five (5) recommendations from the previous year were not corrected:

- Common quarters properly maintained
- Children's bedrooms properly maintained
- Children report satisfaction with meals and snacks/Group Home efforts to provide meals and snacks
- Children given opportunities to participate in planning activities
- Updated NSP's developed timely

**MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER**

The most recent Fiscal Review for Crittenton Services for Children and Families from the Department of Auditor Controller is dated December 5, 2007, for the fiscal period of April 1, 2005, to March 31, 2006. The report dated December 5, 2007, indicated that Crittenton Services for Children and Families had questioned/disallowed costs. Crittenton Services for Children and Families submitted a timely approved Fiscal Corrective Action Plan (FCAP), which is being monitored by the Department of Children and Family Services, Fiscal Monitoring Section.

Corporate Office  
3041 Chapman Ave.  
Fullerton, CA 92631

Fullerton Address:  
200 Box 9  
Fullerton, CA 92631-6009  
Tel: 680-9000 Fax: 714-680-6207

#### Chair of the Board

Winston Miller

#### Chair Elect

Christine Terry

#### Vice Chair Fund Development

Mark Rabin

#### Vice Chair Strategic Planning

Kevin McCarthy

#### Treasurer

James Alexander

#### Secretary

Julie Schornack

#### Immediate Past Chair

John Oates

#### Directors

Wolfgang Koeb

William Vandy

Robert McQuinn

Kimberly Nanyon DDS

John Phillips

Janet Ross

Jack Wells

#### Programs & Services

Adoption Agency

Family Preservation

Family Reunification

Foster Family Agency

Incubator Program

Refugee Minor Program

Residential Treatment

Supported Community

Therapy

Unaccompanied Children

Program

Volunteer Program

Youth Independent Living

Program

Workaround Program

#### President/CEO

Joey Capelle

Founded in 1966

501(c)(3) nonprofit

1001 N. 24th St.



Believe.  
Achieve.  
Empower.

[www.crittentonsocial.org](http://www.crittentonsocial.org)

**Crittenton**<sup>TM</sup>  
services for children and families

May 31, 2013

County of Los Angeles  
Department of Probation  
Quality Assurance Division  
c/o Ratasha Smith  
11701 Alameda Street  
Lynwood, CA 90262

RE: Group Home Annual Evaluation Review Results – **Corrective Action Plan**

Dear DPO Ratasha Smith,

Thank you for your review of our Valley View Campus earlier this year. Your observations and feedback are appreciated and have been taken into consideration. The following items have been addressed in the areas you requested:

#### Item #11 Common Areas well maintained

Currently at our facility we continue to have a number of practices in place to ensure that the grounds are well maintained. With the support of our Residential Counselors, each client placed at the facility is given a daily chore that they are expected to complete. The staff are responsible for checking off the chore each and every day and if the chore is not completed then the staff completes it for the client. In addition, once a week, on Wednesdays, each cottage completes a deep cleaning of the entire cottage, including the bedrooms. Once the deep cleaning is completed the Team Leaders complete a "walk thru checklist" in another cottage to ensure all items were addressed. The reason for having Team Leaders complete the walk thru in another cottage is to have a fresh set of eyes.

In a facility that houses up to 64 adolescent girls at one time it is expected that the items will experience a significant amount of wear and tear. As a result we do have a pecking order to the repairs, as our procedure is to repair items that are of a safety concern for the clients and staff before any cosmetic repairs. For instance, we would be repairing a broken door prior to fixing chipped paint from a client tearing down a poster in a bedroom.

The majority of our maintenance requests are repaired within a 2 week period depending on the nature of the request and the urgency.

In regards to the carpets being stained, it is common that the client and their small children often spill items on the carpet which are difficult stains to remove. Because of such, we have removed most carpets and replaced them with laminate flooring. However, each cottage has been put on a monthly rotation for carpet cleaning that is completed by our maintenance crew. As a result, each cottage has its carpet shampooed on a consistent rotation.

**Corrective Action:**

Prior to the audit we had new couches on order for both Aspen and Pine cottage that were delivered on May 9, 2013. In addition, we scheduled and have had our carpets cleaned by an outside company, on April 22, 2013, to assist in completing a deeper cleaning of the carpets.

Our maintenance department has completed all of the other concerns listed on our audit.

Responsible Party: Briana Wheat, Program Director Unit Supervisors for each cottage, Maintenance Department and Team Leaders for each cottage.

**#12 Children's bedrooms well maintained**

We continue to make strides to ensure that the girls have the opportunity to make their rooms their own and decorate it in an age appropriate manner as we have found that this helps to ground the girls and encourage investment in their program. In order to do that, when a client is placed with us they are able to pick out a Bed in a Bag that is decorative, unique and individual to that client. They are also given two different boards in their rooms in which they can post pictures and/or items to decorate their room to show their own distinct style. The clients are also asked to pick a poster for their room that they can place into a frame on display in their room. This has really made a difference with our clients and it is nice to see their individuation, in which their rooms come to life in a short time after they are placed with us.

Unfortunately, some of our girls take their desire to take ownership of their room to the point that they graffiti in the room. This is addressed in the daily room checks and with the clients themselves. We first try to encourage the client to help in cleaning the locations that they have graffitied and educate them on the cost that comes with defacing property. The ultimate goal is always to provide the client with a teaching opportunity as that is the purpose of their stay at Crittenton. In situations when more steps are needed the staff fill out a maintenance request to address the issue. However, as previously stated there is a pecking order to ensure that items that are a safety concern for the clients and staff are addressed first before cosmetic repairs.

Corrective Action:

By June 15, 2013, our Unit Supervisors and Team Leaders will be re-trained on the expectations for the client's rooms and review the "Daily Room Check forms to ensure that we are holding the clients to those standards. Furthermore, the staff will be re-trained on how to complete Daily Room Checks and how to support the clients in keeping their rooms neat and orderly.

Responsible Party: Briana Wheat, Program Director, Unit Supervisors for each cottage and Team Leaders for each cottage.

#24 Develop Timely Initial and Updated Needs and Services Plans

Crittenton has many procedures in place to make sure that case management arranges and completes Needs and Service meetings and documentation. The Needs and Services Plan in question during the audit was completed in a timely manner yet there was a mistaken entry in the date of the Needs and Service Plan, which made it appear as if it were not developed in a timely manner.

Corrective Action:

Case Plan for C. Edwards

The problem identified during the audit was that her Updated Needs and Service Plan from 12/10/ reflected the wrong dates. It should have the dates 12/10/12 to 3/10/13 and it reflected 12/10/13 to 3/10/13. It has since been replaced back in client's file.

Responsible Party: Briana Wheat, Program Director and Javina George, Case Manager Coordinator

#39 Group Homes effort to provide nutritious palatable meals and snacks

In the audit Brianna S reported that she does not like the snacks and would like more of a variety. Currently during the week we offer snacks that include but are not limited to; assorted cookies and crackers, jello, granola bar, popcorn, gram crackers, string cheese, fruit cups, yogurt, etc. We typically have snacks that are easy to transport as the girls are on the go and need something they can take to school, ILP, ROP, CD meetings, etc. However, in the cottage the girls have constant access to bread, peanut butter and jelly, yogurt, fresh fruit and milk. We also have extra snacks that we supply on the weekends such as tortillas, cheese, hot dogs, eggs, macaroni and cheese. Both the meals and snacks that we offer have to meet USDA standards and we have to keep in mind the calories being offered so that the food offered remains healthy and nutritious for our clients.

All of the clients placed here are given opportunities to offer their feedback and suggestions regarding the snacks and food being offered daily. In each cottage on a daily basis the staff conduct Community Meeting and the girls are all given the opportunity to share any concerns/feedback/suggestions they have. In recent months some of the girls shared that they wanted more "ethnic" foods and so they were asked to offer suggestions and changes were made to the menu as a result of that feedback.

In addition, the girls are all given the opportunity to participate in Client Council which meets regularly. This is equivalent to a student council that would be on a school campus and helps to give all the girls a voice on the campus. These girls are identified on the campus so their peers know who they are so that they can bring their concerns to the Council members. The Council members are then encouraged to bring those concerns up and come up with ideas/solutions. The notes to the Client Council Meetings are given directly to the Program Director who then brings those notes to Director's meeting weekly to address with the administration.

**Corrective Action:**

By June 15, 2013 all Unit Supervisors will bring the topic of snacks and food to Community Meeting to address and get the girls feedback and ideas to make changes to the current selection.

**Responsible Party:** Briana Wheat, Program Director, Unit Supervisors for each cottage and Team Leaders for each cottage.

**#41 Fair rewards and discipline system in place**

In the audit client Santana and Frett reported that they do not believe that they consequences are fair. In order to manage the day to day structure of the program at Crittenton we utilize a behavior modification program. The program is strength based and allows the clients to earn points, which then earns them a level which determines their privileges. The clients can also make choices that prevent them from earning points and/or earn a restriction which they receive consequences that will provide them a learning opportunity. Both Santana and Frett are right in the sense that consequences for clients differ depending on the situation and each client is treated based on their individual treatment plan. This plan is related to their specific needs/goals and privileges and consequences are subject to change based on the client's current level of functioning, the incident, and the individual client's treatment plan/needs. Any significant change of privileges and consequences for a specific client is developed as needed based on staff's discretion with consultation with the Treatment Team and collaboration with the Program Director as needed. Again the goal is to provide each client with the opportunity to learn and due to the many different learning styles that our girls have we do our best to help them learn valuable lessons that will improve their future.

**Corrective Action:**

In efforts to improve in this area, Unit Supervisors and Team Leaders will use the daily community meetings to open up the discussion for the clients to bring these types of concerns to the table and offer suggestions to the staff. In addition, all the clients are encouraged to run for and hold a position on the Girls Council to address ways to improve the program, campus, staffing, groups, recreational activities, etc.

**Responsible party:** Briana Wheat, Program Director, Unit Supervisors and Team Leaders

#47 Children given the opportunity to plan in age appropriate, extra-curricular, enrichment, and social activities

In the audit, client B Santana reported that they do not participate in planning activities. As an agency we value and ask for input from the clients using a variety of methods. In November 2012, we conducted a survey of the entire campus asking the clients for their input on recreational activities and what activities they would want to participate in and see more of. We will also be conducting another survey to gather the girls input regarding recreational activities as this is part of our Continuous Quality Improvement process. In addition, we have Client Council who meet each month to discuss a number of things and encourage the clients to share things they would like to see changed and/or improved upon. We then review those minutes in our Director's Meeting to take to the various departments to see how we might be able to implement the suggestions made by our clients.

**Corrective Action:**


In an effort to improve in this area we will continue have biyearly surveys to get the clients input and continue to ask the client in the Client Council meetings regarding their input on recreational activities. In addition, we will add this to the list of topics to include in our Community Meeting so that we can gather input from the campus at large.

Crittenton Services is committed to providing exceptional services to each of our clients. I am confident that the recent trainings and efforts being made to further educate our clients and staff members, in conjunction with existing policies and procedures will continue to allow us to run an effective and viable program. Should you have any additional questions or concerns regarding this response, please contact Briana Wheat at (714) 680-9057.

Sincerely,



Briana Wheat, MSW  
Program Director



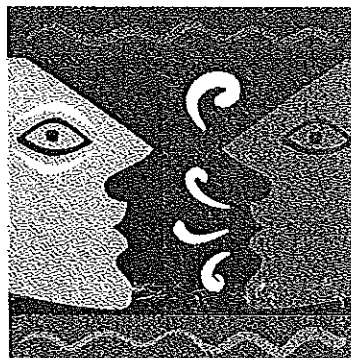
Tristyn Ingallfinera, LMFT,  
VP of Residential Services

**Attachments:**

- 1) Copy of Client Council Handbook



# Client Council



Improving client to staff and client to client relations  
through positive discussion and communication for the betterment of all.

## INTRODUCTION

### **Leadership Development**

Leadership development through Client Council is connecting clients in significant ways to the issues that affects their lives while in placement and beyond. Client Council provides the opportunities for clients to display and expand their talents, abilities, and interests while learning new skills. It is an opportunity to take ownership and be a positive participant in the program and the world around them.

### **Important of Leadership on Campus**

First and foremost, clients' input can improve and support the program in ways that staff alone cannot do. Given the opportunity, clients bring new energy and ideas to the program. Secondly, client leadership provides opportunities for clients to get involved and to learn skills that can be utilized in their own neighborhoods, workplace, and community now and in the future. Finally, client leadership can deepen each client's obligation to a broader understanding of community, the common good, and society and increases the chances that the client will continue to learn and grow.

## OBJECTIVES

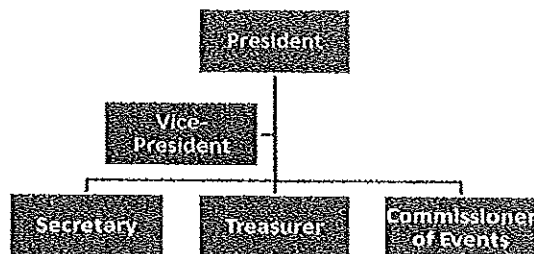
The Client Council's objectives are:

- 1) To give our clients a voice in their program
- 2) To allow clients an avenue to voice legitimate concerns regarding their community
- 3) To give all clients (members and non members) insight into what it take to be a leader
- 4) To provide clients the opportunity to actively participate in planning activities for the campus

The Client Council is a place for the clients to have a free exchange of ideas regarding the activities and programs at Crittenton Services and empower them to have a voice in the decision making process. The Client Council represents the clients of Crittenton on a variety of levels and serves as the clients' liaison to Crittenton's staff (i.e. Unit Supervisors, Program Director, Client Services Director, and Quality Assurance Director). The Council has the opportunity to learn the requirements and needs of the Crittenton community and program. The Client Council is tasked not only to understand their community but to inform the other clients and learn to problem solve and lead community/programs' situation and guidelines. The Client Council strives to make the Crittenton community as productive as possible by addressing issues in all aspects of the program including but not limited to: overall environment of the campus, curriculum and instructions of individual groups and services, recreational activities, and community socialization and social skills.

## ORGANIZATIONAL CHART

The Council will consist of: following: President, Vice- President, Secretary, Treasurer, Commissioner of Events, and Members At Large (MAL) representing each cottage.





Elections will be held every 4 months. Candidates may hold office for 2 consecutive terms.

#### ELLECTION PROCESS

1. The Resources and Activities Coordinator/Lead Recreation Specialist will announce the Client Council elections including timelines and requirements.
2. Persons interested in becoming part of Client Council will have the opportunity to participate in an application process. Applicants will have to fill out an agreement and present a 150 word speech on why they should be considered to take part in the campaign process for the position of interest to a selection panel. Should a client be unable to write a 150 word essay due to language/writing barriers, the Resource and Activities Coordinator/Lead Recreation Specialist can grant an exception. The client will give a verbal presentation only but the contents of the speech must be pre-approved. Applications will be screened by a Selection Panel. The Selection Panel will be composed of the: Program Director, Client Services Director/Assistant Program Director, Resource and Activities Coordinator, and Clinical Director.
3. The top 2-4 Candidates for each position will take part in campaigning for their position of interest. Client Council campaigning and elections will be held immediately following the selection process. We encourage 2 persons from each cottage are apart of Client Council. Applicants must also obtain a 2 letters of Recommendation prior to campaigning. Letters may come from Teachers, Therapists, and Residential Counselors, Case Managers, Rehabilitation Specialists, Unit Supervisors or TBS coaches. Note to Candidates: If you are interested in joining Client Council, pick up a nomination form in the Recreation office by given date and d return to Resource and Activities Coordinator/Lead Activities Specialist by given date.
4. Campaign Week- Candidates will have 7 days to prepare for Election Day. Candidates are encouraged to make appropriate competitive posters and campaign slogans, which must be approved by Resource and Activities Coordinator/Lead Recreation Specialist prior to posting. Posters may only be put up in outside areas of the campus (i.e. quad, soccer field). Flyers may be put up in designated areas (no tape) of the cottages (i.e. bulletin boards, refrigerator, doors). Each candidate will get a list of possible responsibilities to build campaign speech around. Speeches will be given in the Critt's Diner/Harbor Kitchen the last day of campaigning. Candidates will be given three minutes to deliver a speech to convince peers why they should vote for them.
5. Election Day- On Election Day population will be given the opportunity to vote for the favorite candidate. The population will be encourage to vote logically and fairly for who is the best for JOB! Resources and Activities Coordinator/Lead Activities Specialist and an eyewitness will count votes and submit news letter for day of or following day. Voters will receive "I Voted Stickers" and candy bag or similar products. This is to promote the voting process.

**Bylaws of the Client Council**  
**Crittenton Services For Children and Families**

**ARTICLE I**

**Name**

The name of this youth group shall be the Client Council.

**ARTICLE II**

**Objective**

1. To give our clients a voice in their program
2. To allow clients an avenue to voice legitimate concerns regarding their community
3. To give all clients (members and non members) insight into what it take to be a leader
4. To provide clients the opportunity to actively participate in planning activities for the campus.

**ARTICLE III**

**Members**

**Section 1.        Members**

Members of this youth group shall be client residents at the Valley View or Harbor Campuses.

**ARTICLE IV**

**Attendance**

**Section 1.        Member Attendance**

- A. Members shall be present at all council meetings unless the member has a valid excusable absence(i.e. ILP, ROP, School, Session, Sick Day)

**ARTICLE V**

**Officers**

**Section 1.        Officers**

The officers of this Client Council shall be a President, a Vice-President, a Secretary, a Treasurer and a Commissioner of Events.

**Section 2.        Term of Office**

Officers shall assume their duties at the close of the meeting at which they are elected. Officers shall serve for a term of 4 months or until their successors are elected. No officer shall serve for more than 2 consecutive term(s) in the same office.

Section 3. Vacancy in Office

A vacancy in any office except president shall be filled by the Members at Large (MAL Team).

Section 4. Duties

Officers shall perform the duties provided in this section and such other duties as are delegate for the officer in these bylaws.

- A) President- The President is responsible for upholding the bylaws of the Client's Council, presides at all bi monthly Council meetings; attends the Program Department meeting once a month. The President will sign all proclamations and requests passed by Council; serves as the clients' representative to the Crittenton Administration. The President meets individually with Program Director Monthly for program overview, to build rapport, and discuss the populations' suggestions and feedback.
- B) Vice President-The Vice President assists the President; presides at Council meetings in the President's absence; serves as Speaker of the Council; oversees any newly appointed personnel; conducts all forums; serves as Council and as a representative for the Crittenton Population. The Vice President also explores the populations' concerns and determines what ideas are eligible to be submitted to Crittenton Administration.
- C) Secretary- The Secretary reports and publishes the minutes of all Council meeting resolutions passed by the Council; signs off on funds necessary in absence of treasurer; maintains copies of the Client Council Bylaws; maintains a record of all correspondence of interest to Client Council; and is responsible for ordering all supplies used by Client Council.
- D) Treasurer- The Treasurer- maintains the financial reports for the Client Council Funds; holds joint custody of all Council financial records (along with Recreation Team); and files financial statements showing income and expense after each Council sponsored social event. The Treasurer also presents to the Council all monetary requests prior to Council approval of expenses; prepares and revises the Client Council budget every month; and assists the Commissioner of Events with the enforcement of event spending.
- E) Commissioner of Events- The Commissioner of Events- presents new event contracts and submits all event ideas and paperwork for approval by the Council; submits an Event Calendar list to the Secretary; maintains a calendar record of all Council activities; stimulates the interest of the population; assists in enforcing event rules and expectations; coordinates all Special events with Recreation Department; The Commissioner of Events will also oversee all dances sponsored by council or campus organizations; takes responsibility for all Council-implemented events; explores the population's interests for up-coming activities.
- F) MAL Team- Members at Large represents the general membership on issues of interest or

concern, particularly those that arise outside of the standing committee structure. MAL acts as the support of the Council. The MAL conducts projects to further the goals of the Council. The MAL listens to membership and communicate their issues, needs and interests to the Council. MAL are expected to participate in all meetings and events. They are also expected \* Identify potential problems and opportunities.

\* Work effectively toward common goals as a team member.

\* Set objectives and develop action plans for selected and/or assigned projects.

Section 5. Nominations and Elections.

- A. Nominations shall be made from the floor at the Council Meetings.
- B. Elections shall be by ballot at the Council meetings except when there is only one nominee for an office election may be by voice vote.

ARTICLE VI

Meetings

Section 1. Regular

Regular meetings of the youth group shall be held bi-monthly.

Section 2. Special

Special meetings of the Client Council may be called by the President and Resource and Activities Coordinator/Lead Recreation Specialist.

ARTICLE VII

Amendment

- Section 1. These bylaws may be amended by Crittenton Administration without notice. Crittenton Administration changes will be submitted in writing and Resource and Activities Coordinator/Lead Recreation Specialist will preside the call to the meeting.

Adopted 03/10/2011 (Date)