



# COUNTY OF LOS ANGELES PROBATION DEPARTMENT

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**JERRY E. POWERS**  
Chief Probation Officer

May 12, 2015

TO: Supervisor Michael D. Antonovich, Mayor  
Supervisor Hilda L. Solis  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Don Knabe

FROM: Jerry E. Powers   
Chief Probation Officer

SUBJECT: **AVIVA FAMILY AND CHILDREN'S SERVICES GROUP HOME CONTRACT  
COMPLIANCE MONITORING REVIEW**

The Department of Probation, Placement Permanency & Quality Assurance (PPQA), Group Home Monitor (GHM), conducted a review of Aviva Family and Children's Services Group Home, in November 2014. Aviva Family and Children's Services Group Home has one (1) site, located in the second Supervisorial District of Los Angeles County. They provide services to Los Angeles County Probation foster children and Department of Child and Family Services (DCFS) foster children. According to Aviva Family and Children's Services program statement, its purpose is to provide a treatment-orientated residential facility for young women, ages 12-17. It seeks to rehabilitate young women who are unable to function adequately in a family setting or in a traditional high school. The period of residence at Aviva Family and Children's Services is designed to provide an opportunity to change self-destructive lifestyles, learn to cope more adequately with the traumatic past and the difficult present, enhance self-esteem, develop appropriate social skills and finish high school.

Aviva Family and Children's Services Group Home has one (1) 36-bed site and is licensed to serve a capacity of 36 girls, 12-17 years old. At the time of this review, Aviva Family and Children's Services Group Home served 14 Los Angeles County Probation children and 17 DCFS children. The placed children's overall average length of placement, based on the sample size, was five (5) months, and their average age was 16 years.

Seven (7) children were randomly selected for the interview sample, five (5) Probation and two (2) DCFS. There were four (4) children in the sample who were prescribed psychotropic medication, two (2) Probation and two (2) DCFS, and those cases were reviewed for timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring. Additionally, five (5) discharged children's files were reviewed to assess compliance with permanency efforts; two (2) Probation and three (3) DCFS. Five (5) staff files

were also 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 Aviva Family and Children's Services Group Home, and that they were provided with good care and appropriate services, were comfortable in their environment and treated with respect and dignity. Aviva Family and Children's Services Group Home was in compliance with six (6) of the 10 areas of our Contract Compliance Review: "Maintenance of Required Documentation and Service Delivery, Educational and Workforce Readiness, Health and Medical Needs, Psychotropic Medication, Discharged Children and Personnel Records.

PPQA/GHM noted deficiencies in four (4) of the 10 areas, "Licensure/Contract Requirements", in that Aviva Family and Children's Services Group Home needed to ensure that Monetary and Clothing Allowances were comprehensive. Additionally, in the area of "Facility and Environment", Aviva Family and Children's Services Group Home needed to adequately maintain the children's bedrooms.

Deficiencies were noted in the area of "Personal Rights and Social/Emotional Well-Being", in that Aviva Family and Children's Services Group Home needed to ensure that the Group Home maintains and enforces an appropriate Reward and Discipline System, children are allowed private phone calls, children are informed about their right to refuse medication and children are free to reject voluntary Medical, Dental and Psychiatric Care. Deficiencies were also noted in the area of "Personal Needs/Survival and Economic Well-Being", in that, Aviva Family and Children's Services Group Home needed to ensure that the children have an adequate quantity and quality of Clothing.

### REVIEW OF REPORT

On November 26, 2014, Probation PPQA Monitor Kedra Frelix held an Exit Conference with Aviva Family and Children's Services Group Home Administrators Jeffrey Jamerson, Vice President of Programs; Kim Farnham, Director of Quality Management; and Milton Brown, Director of Residential Services. The Administrators agreed with the review findings and recommendations and were receptive to implementing systemic changes to improve their compliance with regulatory standards, as well as address the noted deficiencies in a Corrective Action Plan (CAP).

Aviva Family and Children's Services Group Home provided the attached approved CAP addressing the recommendations noted in this compliance report. A follow-up visit was conducted and all deficiencies cited in the CAP were corrected or systems were put in place to avoid future deficiencies. Assessment for continued implementation of recommendations will be conducted during the next monitoring review.

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

Each Supervisor  
May 12, 2015  
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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:MEP:REB  
LCM:ed

#### Attachments

c: Sachi A. Hamai, Interim Chief Executive Officer  
John Naimo, Auditor-Controller  
Phillip L. Browning, Director, Department of Children and Family Services  
Public Information Office  
Audit Committee  
Sybil Brand Commission  
Latasha Howard, Probation Contracts  
Jeffrey Jamerson, Vice President of Programs  
Community Care Licensing

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

Aviva Group Home  
1701 Camino Palmero  
Los Angeles, CA 90046  
License Number: 191800285  
Rate Classification Level: 12

	<b>Contract Compliance Monitoring Review</b>	<b>Findings: November 2014</b>
I	<p><b><u>Licensure/Contract Requirements</u></b> (9 Elements)</p> <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>	<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. Improvement Needed</li> <li>8. Full Compliance</li> <li>9. Full Compliance</li> </ol>
II	<p><b><u>Facility and Environment</u></b> (5 Elements)</p> <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. Full Compliance</li> <li>3. Improvement Needed</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> </ol>
III	<p><b><u>Maintenance of Required Documentation and Service Delivery</u></b> (10 Elements)</p> <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>	<p align="center">Full Compliance (ALL)</p>

IV	<p><b><u>Educational and Workforce Readiness</u></b> (5 Elements)</p> <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	<p><b><u>Health and Medical Needs</u></b> (4 Elements)</p> <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	<p><b><u>Psychotropic Medication</u></b> (2 Elements)</p> <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	<p><b><u>Personal Rights and Social/Emotional Well-Being</u></b> (13 Elements)</p> <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. Full Compliance</li> <li>5. Full Compliance</li> <li>6. Improvement Needed</li> <li>7. Improvement Needed</li> <li>8. Full Compliance</li> <li>9. Full Compliance</li> <li>10. Improvement Needed</li> <li>11. Improvement Needed</li> <li>12. Full Compliance</li> <li>13. Full Compliance</li> </ol>

VIII	<p><b><u>Personal Needs/Survival and Economic Well-Being</u></b>          (7 Elements)</p> <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>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Improvement Needed</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> </ol>
IX	<p><b><u>Discharged Children</u></b> (3 Elements)</p> <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>	<p>Full Compliance (ALL)</p>
X	<p><b><u>Personnel Records</u></b>          (7 Elements)</p> <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>	<p>Full Compliance (ALL)</p>

**AVIVA FAMILY AND CHILDREN'S SERVICES GROUP HOME  
CONTRACT COMPLIANCE MONITORING REVIEW  
FISCAL YEAR 2014-2015**

**SCOPE OF REVIEW**

The purpose of this review was to assess Aviva Family and Children's Services Group Home's compliance with the County contract and State regulations and include a review of the Aviva Family and Children's Services Group Home 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, five (5) Los Angeles County Probation foster children and two (2) DCFS foster children, were randomly selected for the sample. Placement Permanency & Quality Assurance (PPQA), Group Home Monitor (GHM) interviewed each child and reviewed their case files to assess the care and services they received. At the time of the review, four (4) placed children were prescribed psychotropic medication, two (2) Probation and two (2) DCFS. Their case files were reviewed to assess for timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring. Additionally, five (5) discharged children's files, two (2) Probation and three (3) DCFS, were reviewed to assess Aviva Family and Children's Services Group Home's compliance with permanency efforts

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

**CONTRACTUAL COMPLIANCE**

The following four (4) areas were out of compliance.

**Licensure/Contract Requirements**

- During a review of the clothing logs and weekly allowance logs, it was revealed that Aviva Family and Children's Services Group Home had incomplete and incomprehensive monetary logs. Weekly allowance balances were written on an envelope for the children that chose to save their money; there was no back-up log/documentation if the envelope was misplaced. Some of the clothing

balances were incorrect on the log and did not match the receipts. It appears that some of the balances were rounded up or down to reflect an even balance.

### **Recommendation**

Aviva Family and Children's Services Group Home's management shall ensure that:

1. All children's files have accurate accounting of allowance and clothing allowance records, without rounding the actual amount to an even number. A weekly allowance log is developed and utilized for all children, whether they choose to save their money or spend it.

### **Facility and Environment**

An inspection of the interior of Aviva Family and Children's Services Group Home revealed some cosmetic deficiencies that require correction.

- At Aviva Family and Children's Services Group Home, Unit 1, five (5) bedrooms had missing window blind slates, and all bedrooms had defective attached wire door hangers, which pose a safety risk. One (1) bedroom had an unsecured window screen, and one (1) bedroom contained graffiti on the wall.
- At Aviva Family and Children's Services Group Home, Unit 2, one (1) bedroom had missing window blind slates.
- At Aviva Family and Children's Services Group Home, Unit 3, two (2) bedrooms had missing window blind slates.

### **Recommendation**

Aviva Family and Children's Services Group Home's management shall ensure that:

1. All of the aforementioned physical deficiencies cited in the children's bedrooms are corrected and repaired in a timely fashion.

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

- During the interview process, one (1) of the seven (7) children stated that the Group Home does not have an appropriate rewards and discipline system. The child indicated that staff do not always follow the consequence rules of the Group Home and exaggerate consequences when a child gets in trouble. In addition, the child reported that she does not feel acknowledged when she is doing well at the Group Home.
- During the interview process, one (1) of the seven (7) children stated that the Group Home does not allow the children to have private phone calls. The child indicated that, when she has monitored phone calls, they are in the staff office on



speaker phone, and other children and staff that access the office and can hear her phone calls.

- During the interview process, two (2) of the seven (7) children stated that consequences, such as reduced program status levels or activity restrictions, are given to the children, if they do not take their prescribed medication.
- During the interview process, four (4) of the seven (7) children stated that consequences, such as reduced program levels or activity restrictions, are given to the children if they refuse to attend medical appointments.

### **Recommendation**

Aviva Family and Children's Services Group Home's management shall ensure that:

1. All staff abides by and enforces the Group Home rewards and discipline system so that they are fair towards all children.
2. All children are allowed private phone calls that are not placed on speaker phone.
3. All children are informed about their medication and right to refuse medication without being subject to consequences by staff.
4. All children are free to receive or reject voluntary medical, dental and psychiatric care without being subject to consequences by staff.

### **Personal Needs/Survival and Economic Well-Being**

- During the interview process, three (3) of the seven (7) children stated that they did not have an adequate amount of clothing that fit properly. One (1) child reported that she recently lost weight and her pants were too big. One (1) child reported that since being at the Group Home, she has gained weight and her underwear and pants are too tight. One (1) child reported that she needed more pants and shirts due to weight gain. All (3) children indicated that during the next shopping trip at the Group Home, they would continue to purchase clothing that fit them properly.

### **Recommendation**

Aviva Family and Children's Services Group Home's management shall ensure that:

1. All children have an adequate amount of clothing, which fits properly.

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

PPQA/GHM's last compliance report dated July 10, 2014, identified 13 recommendations.

**Results**

Based on the follow-up, Aviva Family and Children's Services Group Home fully implemented 13 of the 13 previous recommendations for which they were to ensure that:

- Special Incident Reports (SIR) are submitted in accordance with the County contract and SIR reporting guidelines.
- The Group Home is in compliance with Title 22 Regulations and County contract requirements and free of Community Care Licensing (CCL) citations.
- The exterior and grounds of the Group Home are well maintained.
- The common quarters of the Group Home are well maintained.
- The Group Home maintains sufficient recreational equipment and an appropriate selection of reading materials and educational resources and supplies, including operable computers, which are age-appropriate and readily available to children.
- The Group Home staff obtains or documents efforts to obtain the DCFS Children Social Worker's (CSW) signature authorizing implementation.
- The DCFS and CSWs and Deputy Probation Officer's (DPO) are contacted monthly by the Group Home and the contacts are appropriately documented and maintained in the children's case file.
- Comprehensive Initial Needs and Service Plans (NSP) are developed and include all required elements in accordance with the NSP template.
- Comprehensive Updated NSPs are developed and include all required elements in accordance with the NSP template.
- All children are treated with respect and dignity.
- All children are provided with the minimum monetary allowance.
- All employees sign a criminal background statement in a timely manner.
- The outstanding recommendations from the 2013 monitoring report dated October 18, 2013, which included The Group Home is in compliance with Title 22 Regulations and County contract requirements and free of CCL citations, the Group Home staff obtains or documents efforts to obtain the DCFS CSW's

signature authorizing implementation, and comprehensive Initial and Updated NSPs are developed and include all required elements in accordance with the NSP template are fully implemented.

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

A fiscal review by the Auditor-Controller's Office is scheduled for the 2014-2015, fiscal year; however, a report has not been posted to their website.

January 7, 2015

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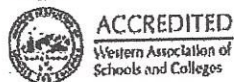
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President & CEO  
Regina Bette, LMFT



Kedra Frelix Deputy Probation Officer II  
Group Home Monitoring and Investigations Unit  
Placement Services Bureau, Los Angeles County Probation  
Lynwood Regional Justice Center

Re: Corrective Action Plan (CAP\_ -- Group Home Monitoring Review—Field  
Exit Summary 11-26 - 14

1. Licensure/Contract Requirements

Findings: #7 Are appropriate and comprehensive monetary and clothing allowance logs maintained (WELL-BEING). During review of allowance logs, The County identified that allowance balances were written on an envelope for the youth that chose to save their money; no back-up log/documentation if the envelope was misplaced. Additionally, some of the balances were rounded up or down and allowance balances should be exact.

Corrective Action Plan:

Aviva's current tracking system for saved allowance money is to write the total amount of allowance money saved on the envelope that contains the money. However, in the event the envelope is lost or misplaced, staff has created an additional tracking system for saved allowance money. A form has been implemented to document the amount of allowance money distributed to the resident and the amount of allowance money saved and will be updated by staff each time allowance is handed out. The lead staff responsible for allowance oversight was trained on the use of the form (see Appendix A for the form and training sheet).

In order to ensure that resident clothing expenditures are accurately recorded (no rounding and no mismatched balances), the Resident Clothing Expenditure Log was revised (Appendix B). The shopping receipt column now allows for resident funds to be accounted for in the total. Additionally, a column was added to indicate when a resident has requested to save their money and allows for them to initial and date this decision. All financial exchanges will be accounted for to the cent (no rounding). Training will be held for staff involved in taking residents shopping on 1/15/15 to ensure compliance with this procedure.

## 2. Facility & Environment

Findings: #12 Are children's bedrooms well maintained? (Clean/sanitary; neat; comfortable; adequate lighting, window coverings, and storage space; beds, mattresses, furniture, flooring; full complement of linens on beds, age-appropriate decorations; and appropriate sleeping arrangements (SAFETY). During a tour of the facility, The County identified bedrooms that were missing blind slats. Additionally, The County identified bedrooms that had defective wire hangers attached to the door, which posed a safety risk. One bedroom had graffiti on the wall and another bedroom had an unsecure window screen

### Corrective Action Plan

On 12/1/14 the missing blind slats were replaced by maintenance and all blinds are intact (see attached receipt, Appendix C1). The hangers were removed, the graffiti was removed, and the window screen was secured. In order to ensure bedrooms are well maintained, staff will complete a daily room check form (see Appendix C2). If there are identified issues, staff will complete a maintenance request form and maintenance will correct the problem. Additionally, maintenance conducts a monthly inspection of the facility.

## 3. Personal Rights & Social/Emotional Well-Being

Findings: #41 Is a fair rewards and discipline system in place? (WELL-BEING). During interviews with residents, it was reported by residents that staff do not consistently use the rewards and discipline system in place.

### Corrective Action Plan:

Aviva's residential program has a status system (Appendix D) which is the structure to employ rewards and discipline. An orientation and training to the status system is provided to all staff when hired. In order to ensure compliance and consistent application of the status system, all staff will be re-trained on the status system, focusing on how and when rewards and discipline are utilized. Training and re-orientation to the implementation of the status system for all staff will be conducted on 1/15/15.

Findings: #42 Unless prohibited by court order or County workers, are children allowed private visits, to make and receive private telephone calls, and to send and receive unopened correspondence/mail? (PERMANENCY). During interviews with residents, it was reported that residents do not always have privacy during phone calls because two residents will be making phone calls in the same office at the same time.

### Corrective Action Plan:

Residents at Aviva each have contact lists which indicate if a phone call and/or visit can be monitored or unmonitored. The protocol for unmonitored calls is for staff to dial the phone number and remain nearby to assure that the resident does not hang up and call an unauthorized

party. Therefore, in order to ensure privacy and safety, residents making phone calls will do so in staff offices or in rooms where other residents are not able to listen to the conversation. No two residents will make a phone call in the same room to assure that privacy is maintained. Furthermore, staff will assure that any residents making monitored phone calls (calls on speaker), have a private room so that no other residents or staff enter. These calls will be made in staff offices or conference rooms wherein doors can be closed to assure privacy and prevent other staff or residents from walking in and listening or interrupting. A training to supervisory staff will be provided on 1/8/14. Please refer to policy on resident phone calls (Appendix E).

Finding # 45 Are children informed about their medication and their right to refuse medication (WELL-BEING). During an interview with residents, it was reported that although residents know they are allowed to refuse medication, that they are receiving consequences if they do not take their prescribed medication.

Corrective Action Plan:

Any time a resident is prescribed psychotropic medication the resident must sign a consent form which reviews that the resident has the right to refuse medication (Appendix F). Please reference the policy on medication refusal/declination of medical care (Appendix G). Aviva's policies and procedures articulate that residents have the right to refuse medication. These rights and practices will be reviewed with supervising staff on 1/8/15 and all staff on 1/15/15. More specifically, training reviewed resident's rights to refuse medication and the Outpatient Medical Consent form, which must be signed by the resident in order for medication to be provided. Staff was trained on how to manage situations wherein residents refuse to take their prescribed psychotropic medication. This includes: review of the policy on declination of medical treatment and that residents are never to receive consequences if they refuse to take prescribed medication. Staff was instructed to counsel resident and ask questions about why they did not want prescribed medication, to document any refusals (on Declination of Medical Care form), and to communicate refusals to treatment team so that the resident may express thoughts/feelings/opinions about prescribed medication to the psychiatrist or doctor.

Finding #46 Are children free to receive or reject voluntary medical, dental and psychiatric care (WELL-BEING). During an interview with residents, it was reported that although residents know they are allowed to refuse voluntary dental, medical and psychiatric care, that they are receiving consequences if they do not participate in the dental, medical or psychiatric appointment.

Corrective Action Plan:

Attached is Aviva's medical care refusal policy, which indicates that all residents have the right to refuse medical care, including attending doctor or dental appointments (refer to Appendix G).

Aviva has developed a form to document medical treatment refusals, in the event that a resident elects to refuse medical treatment or assessment (attached to the medical refusal policy). Policies and procedures articulate that residents have the right to refuse medical treatment. These rights and practices will be reviewed with supervising staff on 1/8/15 and all staff on 1/15/15. More specifically, trainings reviewed the written policies and reviewed resident's rights to refuse medical, dental or psychiatric care. Staff was trained on how to manage situations wherein residents refuse to attend medical, dental or psychiatric appointments. This includes: review of the policy on declination of medical treatment and that residents are never to receive consequences if they refuse to attend medical, dental or psychiatric appointments. Staff was instructed to counsel resident and ask questions about why they did not want to attend appointments, to document any refusals (on Declination of Medical Care form), and to communicate refusals to treatment team so that the resident may express thoughts/feelings/opinions about refusals to therapist and/or nursing staff.

#### 4. Personal Needs/Survival And Economic Well-Being

Finding #50 Are children's on-going clothing inventories of adequate quantity and quality (fitted according to industry size charts, clean, in good condition, and appropriate for intended use and season)? (WELL-BEING). During an interview with the residents, three residents reported that their clothing did not fit right due to gaining or losing weight and that additional clothing was needed.

In order to ensure residents have adequate quantity and quality of clothing, monthly clothing inventories will be completed by staff with the resident. Attached is the monthly clothing inventory form (Appendix H). Staff will conduct the clothing inventory with the resident whose clothing is being inventoried in order that the resident may notify staff if any of her clothing does not fit. Training will be conducted on 1/15/15 to assure that all staff are aware of the clothing inventory procedures and timelines.

Sincerely,



Jeffrey Jamerson, MA  
Vice President Programs and Services  
Aviva Family & Children's Services