

# **COUNTY OF LOS ANGELES** PROBATION DEPARTMENT

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November 13, 2012

TO:

Each Supervisor

FROM:

Jerry E. Powers

Chief Probation Officer

SUBJECT:

AIMING HIGH TREATMENT CENTER SITES I & II CONTRACT

J.P. D

COMPLIANCE MONITORING REVIEW

**Board of Supervisors** GLORIA MOLINA First District MARK RIDLEY-THOMAS Second District ZEV YAROSLAVSKY Chairman - Third District DON KNABE Fourth District MICHAEL D. ANTONOVICH Fifth District

We have completed a review of Aiming High Treatment Center Group Home, operated by ASHE, Inc. The Group Home contracts with the Los Angeles County Probation Department.

Aiming High Treatment Center Group Homes Sites I & II, consist of two (2) six-bed facilities, which provide services and care for boys ages 10-17 years old, placed by the Los Angeles County Probation Department and Out-of-County Probation Departments, who exhibit behavioral, social, emotional, and psychological difficulties.

At the time of this monitoring review in December 2011, Aiming High Treatment Center Group Homes were providing services for 10 children from the Los Angeles County Probation Department, one (1) child from the San Diego County Probation Department, and (1) child from the Alameda County Probation Department. For this review, six (6) case files were reviewed, and 6 (six) child interviews were conducted. Three (3) discharge files were reviewed, and five (5) personnel files were reviewed. Additionally, one (1) child was taking psychotropic medications, and their file was reviewed for timely Psychotropic Medication Authorizations and required monitoring.

Both Aiming High Treatment Center Group Home sites are located in San Bernardino County. Site I is located in the city of Yucaipa, in the Third District of San Bernardino County and Site II is located in the city of San Bernardino, in the Fifth District of San Bernardino County.

#### 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 Each Supervisor November 13, 2012 Page 2 of 4

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. In addition, a review of the most current Auditor Controller Fiscal Review was conducted.

#### **SÚMMARY**

Based on child interviews, our review of six (6) Probation children's files, contents of the Needs and Services Plans (NSP) and/or documentation provided by the agency, Aiming High Treatment Center Group Home is providing the services as outlined in the Program Statement. However, there were numerous deficiencies in the "Notable Finding" section that requires a Corrective Action Plan (CAP). All compliance deficiencies can be found in detail under, "Licensure/Contract Requirements" related to the allowance logs and sign-in/sign-out log for children, "Facility and Environment", which required immediate attention, "Maintenance of Required Documentation and Service Delivery", related to the NSPs, "Personal Rights and Social/Emotional Well-Being", related to meal/snacks, religious services and social activities, "Personal Needs/Survival and Economical Well-Being", clothing allowance, personal care items, allowance, and Life Books, "Personnel Records", related to clearances and missing documents.

#### **NOTABLE FINDINGS**

- There were several issues with the children's allowance log, and there was no sign-in/sign-out log for the children, detailed in the "Licensure/Contract Requirements" section of the Compliance Monitoring Review; such as, the children were not receiving their allowances weekly and Site I did not have a sign-in/sign-out log for children's visitors.
- Numerous minor physical deficiencies were found at both sites that require repair, correction or replacement, as detailed in the "Facility and Environment" section of the Compliance Monitoring Review; such as, replace a worn mattress, repair exposed wires from a door bell, repair a cracked concrete driveway, repair of broken dresser tracks, repair damaged drywall, replace light and cable wall plate covers, and repair the fire extinguisher mount.
- There were several deficiencies with most of the NSPs in the child files that were reviewed and required correction as described in the "Maintenance of Required Documentation and Service Delivery" section of the Compliance Monitoring Review; such as, initial 30-Day Reports and updated NSPs were missing from the children's files at both sites, required signatures from child, parent, the Probation Caseworker, and Group Home Administrator were missing on the initial 30-Day Report and updated NSPs at both sites and updated NSPs were not comprehensive and not specific to the individual child for both sites.

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- There were issues discovered during child interviews as detailed in the "Personal Right and Social/Emotional Well Being" section of the Compliance Monitoring Review; such as, children only eating cereals for breakfast during weekdays, children given snacks on a weekly basis, children not receiving a nutritious lunch during non-school day, and children not being provided sufficient social activities.
- There were major deficiencies revealed during child interviews as detailed in the "Personal Needs/Survival and Economic Well-Being" section of the Compliance Monitoring Review; such as, non-compliance with the clothing allowance, generic personal care items, management of children's weekly allowances and the children still not receiving Life Books.
- There were deficiencies found upon review of the employee files, detailed in the "Personnel Records" section of the Compliance Monitoring Review; such as, documents not updated, in that current CPR/First Aid cards were expired for some staff, and the Department of Justice transfer and Child Abuse Central Index clearance were missing from one file.

#### **EXIT CONFERENCE**

#### In attendance:

Claudius Wright, Administrator
John Brantley, Site I & II Facility Manager
Shakir Al-Khaliq, Site II Evening Facility Manager
Norman Williams, Assistant Administrator

#### Highlights:

The exit conference was held on May 24, 2012. The deficiencies were thoroughly addressed, and the representatives present were in agreement with the review findings. Administrator Wright, Assistant Administrator Williams and Facility Managers Brantley and Al-Khaliq all understood the importance of compliance with the Master Agreement Contract for Group Home Foster Care Services and agreed to make the necessary corrections, as recommended. A CAP was received on June 28, 2012. Also, a follow-up visit was conducted on June 28, 2012, to ensure that all deficiencies have been corrected. The results of the follow-up visit, which can be found in detail on the final page of the "Compliance Monitoring Review" section, are as follows: mattress was replaced, exposing wires from the doorbell repaired, fire extinguisher has been mounted in the hallway, damaged drywall has been patched and repaired, broken dresser repaired, bathroom light plates replaced and secured to the wall, cracked driveway was repaired, sign-in/sign-out log was present at both sites, the NSPs reflected comprehensive goals and was child specific, plan to obtain all signatures on the NSPs was in place, children reported more nutritious meals (breakfast and lunch) and name brand snacks are given in the mornings and evenings, children now go to the religious services of their choice, clothing allowances reflect the children are receiving their \$50.00 dollar monthly clothing allowance or the option of saving it on a quarterly basis, the children reported going on more outings, children

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now have brand name personal care items, children are receiving their personal allowances on a weekly basis to spend how they choose, children have received Life Books, and all missing personnel documents were updated and placed in the respective employee's file.

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
Phillip L. Browning, Director, Department of Children and Family Services
Public Information Office
Audit Committee
Sybil Brand Commission
Jean Chen, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing
Claudius Wright, Administrator, Aiming High Treatment Center
Georgia Mattera, Public Safety, Deputy Chief Executive Officer
Chief Deputies
Justice Deputies

# AIMING HIGH TREATMENT CENTER GROUP HOME PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW- SUMMARY

	Contract Compliance Monitoring Review	Findings: May/2012
[	<u>Licensure/Contract Requirements</u> (9 Elements)	
	<ol> <li>Timely Notification for Child's Relocation</li> <li>Transportation</li> <li>SIRs</li> <li>Compliance with Licensed Capacity</li> <li>Disaster Drills Conducted/Logs Maintained</li> <li>Runaway Procedures</li> <li>Allowance Logs</li> <li>CCL citations for safety/plant deficiencies</li> <li>Detailed sign in/out log for children</li> </ol>	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Needs Improvement 8. Full Compliance 9. Needs Improvement
11	Facility and Environment (6 Elements)	
	<ol> <li>Exterior Well Maintained</li> <li>Common Quarters Maintained</li> <li>Children's Bedrooms/Interior Maintained</li> <li>Sufficient Recreational Equipment</li> <li>Sufficient Educational Resources</li> <li>Adequate Perishable and Non Perishable Food</li> </ol>	Needs Improvement     Needs Improvement     Needs Improvement     Full Compliance     Full Compliance     Needs Improvement
Ш	Maintenance of Required Documentation and Service Delivery (13 Elements)	
	<ol> <li>Child Population Consistent with Program Statement</li> <li>Probation Caseworker Authorization to Implement NSPs</li> <li>Children's Participation in the Development of NSPs</li> <li>NSPs Implemented and Discussed with Staff/Parents</li> <li>Sampled children progressing towards meeting the NSP case goals</li> <li>Treatment team developed timely initial NSP with the child</li> <li>Treatment team develop comprehensive initial NSP with the child</li> <li>Therapeutic Services Received (individual, group, substance abuse, etc.)</li> <li>Recommendation Assessments/Evaluations Implemented (psychological, psychiatric, medical evaluations/assessments)</li> <li>Probation Caseworkers Monthly Contact Verified</li> <li>Agency assist the child in maintaining important relationships</li> <li>Treatment team develop timely updated NSP with the child</li> </ol>	1. Full Compliance 2. Needs Improvement 3. Needs Improvement 4. Needs Improvement 5. Full Compliance 6. Needs Improvement 7. Needs Improvement 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Needs Improvement

:	13. Treatment team develop comprehensive <b>updated</b> NSP with the child	13. Needs Improvement
IV	Education and Workforce Readiness (8 Elements)	
	<ol> <li>Child enrolled in school within three (3) days after placement or efforts documented</li> <li>Child attends school as required</li> <li>Agency facilitates in meeting the child's educational goals (IEP conference, tutoring, parent/teacher conference, homework, etc.)</li> <li>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>Current IEPs maintained</li> <li>Current copies of the child's report cards or progress cards maintained</li> <li>Group Home provides children with opportunities to participate in age appropriate youth development services (YDS) and vocational training programs</li> <li>Group Home encourages children's participation in YDS or equivalent programs.</li> </ol>	Full Compliance (ALL)
V	Health and Medical Needs (6 Elements)	
	<ol> <li>Initial medical examinations conducted</li> <li>Initial medical examinations timely</li> <li>Required follow-up medical examinations conducted timely</li> <li>Initial dental examinations conducted</li> <li>Initial dental examinations timely</li> <li>Required follow-up dental examinations conducted timely</li> </ol>	Full Compliance (ALL)
VI	Psychotropic Medications (2 Elements)	
	<ol> <li>Current Court Authorization for Administration of Psychotropic Medication or document effort to obtain</li> <li>Current Psychiatric Evaluation/Review for each child on psychotropic medication</li> </ol>	Full Compliance (ALL)
VII	Personal Rights and Social/Emotional Well-Being	
	(17 Elements)	
	<ol> <li>Children informed of Group Home's policies and procedures</li> <li>Children feel safe at Group Home</li> <li>Children supervised by staff</li> </ol>	Full Compliance     Full Compliance     Full Compliance

	Group Home provides appropriate staffing and supervision	4. Full Compliance
•	5. Children report satisfaction with meals and snacks	5. Needs Improvement
	6. Staff treats children with respect and dignity	6. Full Compliance
	7. Appropriate rewards and discipline system in place	7. Full Compliance
	8. Consequences fair	8. Full Compliance
	Consequences fall     Section 2. Children allowed private visits, make and receive	9. Full Compliance
	telephone calls and to send and receive unopened	o. i un compilance
	correspondence/mail	10 Noode Improvement
	10. Children free to attend religious services and activities of	10. Needs Improvement
	their choice	11 Full Campulance
	11. Children's chores easy or hard (reasonable)	11. Full Compliance
	12. Children informed about their medication	12. Full Compliance
	13. Children aware of their right to refuse medication	13. Full Compliance
	14. Children free to received or reject voluntary medical,	14. Full Compliance
	dental and psychiatric care	
	15. Children given opportunities to participate in planning	15. Needs Improvement
	activities  16. Children participate in activities, including at the Group	16 Nooda Improvement
	16. Children participate in activities, including at the Group	16. Needs Improvement
	Home, in the community or school	47 Full Camerillan
	17. Children given opportunities to participate age-	17. Full Compliance
	appropriate extra-curricular, enrichment and social	
	activities in which they have an interest	
VIII	Personal Needs/Survival and Economic Well-Being	
	(8 Elements)	
	1 \$50.00 Clathing Allawanes	1 Needs Improvement
	1. \$50.00 Clothing Allowance	1. Needs Improvement
	2. Adequate Quantity Clothing Inventory	2. Full Compliance
	3. Adequate Quality Clothing Inventory	3. Full Compliance
	4. Involvement in Selection of Clothing	4. Full Compliance
	5. Provision of Personal Care Items	5. Needs Improvement
	6. Minimum Monetary Allowances	6. Full Compliance
	7. Management of Allowance	7. Needs Improvement
	8. Encouragement and Assistance with Life Book	8. Needs Improvement
IX	<u>Discharge Plan</u> (3 Elements)	Full Committee (ALL)
	A Obligation of and of food 200 to 20	Full Compliance (ALL)
	Children placed at least 30 days, was the child  discharged according to the parameters of the pa	
	discharged according to the permanency plan	
	2. Children placed at least 30 days, did the child make	1
	progress toward meeting their NSP goals	1
	Group Home using available resources to attempt to	
	stabilize the placement prior to requesting the removal of	
	the child	
Χ	Personnel Records (14 Elements)	
	DOJ submitted timely	1. Needs Improvement
	2. If applicable, FBI submitted timely	2. Full Compliance
	3. Child Abuse Clearance Index (CACI) submitted timely	3. Needs Improvement
	O. Crima / Ibado Oldaranos mada (Orton) dasmittos timony	1

4.	Appropriate employees sign a c	riminal background
	statement timely	

- 5. Group Home staff who have direct contact with children meet the educational/experience requirements
- 6. Employees received timely health screenings
- 7. Required employees have a valid CA drivers license
- 8. 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
- 11. Appropriate employees received CPR training
- 12. Appropriate employees received First-Aid training
- 13. Appropriate employees received the required annual ongoing training
- 14. Appropriate employees received emergency intervention training per the Group Home's program statement

- 4. Full Compliance
- 5. Full Compliance
- 6. Full Compliance
- 7. Full Compliance
- 8. Full Compliance
- 9. Full Compliance
- 10. Full Compliance
- 11. Needs Improvement
- 12. Needs Improvement
- 13. Full Compliance
- 14. Full Compliance

# AIMING HIGH TREATMENT CENTER GROUP HOME PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

Aiming High Treatment Center, Site I 34201 Fifth Place Yucaipa, CA 92399 License Number: 366402773 Rate Classification Level: 12

Aiming High Treatment Center, Site II
715 S. Sutter Avenue
San Bernardino, CA 92410
License Number: 366403887
Rate Classification Level: 12

#### LICENSURE/CONTRACT REQUIREMENTS

Based on our review of six (6) children's files and documents provided by the agency, Aiming High Treatment Center Group Homes were in compliance with seven (7) out of nine (9) elements in the area of "Licensure/Contract Requirements". The two (2) areas of non-compliance were, "Allowance Logs" and "Detailed sign in/out log for children".

The Group Home notifies all required agencies in a timely manner when a child is relocated. The Group Home provides all transportation needs for the children; such as, to and from schools, medical appointments, substance abuse counseling, community activities, clothing purchases, outings, and activities. The Group Home documents and completes all Special Incident Reports (SIRs) in a timely manner and submits the SIR through the I-Track reporting system. In addition to submitting the I-Tracks, the Group Home also contacts the Probation Department's Group Home Monitoring (GHM) Officer of the Day (OD) Line to report the incident. A review of the "Client Roster" population chart reflects that the Group Home is in compliance with the licensing capacity with (6) children at each site. The Disaster Drill Logs for both sites were reviewed and in compliance. The most recent drill conducted for Site I was completed on December 31, 2011, and Site II was completed on November 10, 2011. The Group Home conducts a fire/emergency drill every three (3) months.

The Group Home maintains a binder on "Runaway Procedure" for both sites, and the guidelines are in accordance with the Probation Department's, Placement Coordinating Memorandum (PCM). The Group Home maintains an allowance log that reflects the amount of weekly allowances provided and spent, but the agency is not in compliance with the delivery of the children's allowances on a weekly basis, specifically on every Friday. The allowance log shows that the children did not receive their weekly allowances as required on more than six (6) different occasions where the allowances were then doubled up on the following Friday. Although the children's allowances were doubled up and paid up to par, the agency was not in full compliance with the allowance log.

Aiming High Treatment Center Group Home did not receive any Community Care Licensing (CCL) citations for safety/plant deficiencies in 2011 to present. According to the CCL Licensed Program Analyst (LPA), the Group Home is currently in good standing. The Group Home was not in compliance with the sign-in and sign-out log for

Probation Caseworkers. The agency maintains a separate sign-in and sign-out log specifically for each visit; such as, Probation Caseworkers, therapists/treatment team and visitors from other agencies at site II. However, at Site I, the Group Home does not utilize a sign-in and sign-out log for Probation Caseworkers similar to Site II. Probation Caseworkers were not required to sign-in or sign-out while visiting children at Site I. Instead, the Group Home employee notes the Probation Caseworker's name and visit date on their daily log.

#### Recommendations:

- Aiming High Treatment Center Group Homes shall comply with the Los Angeles County Group Home Foster Care Services Master Contract, which requires the Group Home to provide children with an allowance on a weekly basis. The Group Home Administrator shall designate a staff member to coordinate the distribution of weekly allowances in a timely manner in the absence of the Administrator.
- 2. Aiming High Treatment Center Group Homes shall create and maintain a separate Sign-In/Sign-Out Log for the Probation Caseworkers at Site I.

#### FACILITY AND ENVIRONMENT

Based on our walk through inspection at Sites I & II, Aiming High Treatment Center Group Homes were in compliance with two (2) of six (6) elements in the area of "Facility and Environment". The four (4) areas of non-compliance were, "Exterior Well Maintained", "Common Quarters Maintained", Children's Bedrooms/Interior Maintained", and "Adequate Perishable and Non-Perishable Food".

Aiming High Treatment Center Group Homes, Sites I & II, are both located in a residential community in the County of San Bernardino. Site I is located in the City of Yucaipa and is in a neighborhood that is located on a hilltop, which provides a panoramic view of the San Bernardino mountains. Site I was built in the 1960's and consists of a front and back house, which resides on over 10,000 square feet of land. The front house is utilized as the Group Home (Site I), while the back house was converted into an Administration office and conference room for the Group Home Administrator and treatment team. The Group Home exterior is painted a light mocha color with dark brown trim and has two (2) behemoth pine trees located in the front of the The massive grassy front and backyard are both well manicured and landscaped. The front yard consists of a long concrete driveway leading to the garage. However, the long concrete driveway has a small section of cracked concrete that needs repair. There are also numerous perennial shrubs planted alongside the front of the house. The backyard appears to be free from any safety hazards and consists of a citrus tree, several evergreen trees and shrubs planted throughout the backyard. There is a free weight Olympic bench and complete weight set in the back patio area, where the children workout during recreational hours. In addition, there is also a full size basketball court for the children to enjoy shooting hoops.

The interior of the Group Home is bright and airy. The entire interior walls are painted an off white color. The living room consists of two (2) newer green couches that were purchased by the Group Home last year and has a brick fireplace. The adjacent den has two (2) additional brown couches where the children can relax and watch television

from a new 32' Samsung LCD Flat Screen television. The staff's desk is located in the center of the living room and provides full visual of the children while they are in the kitchen, living room, or in the den. The living room interior wall lacks wall paintings but is decorated with an abundance of glass framed "Certificates of Achievement" from past placed children who graduated the program. In addition, there are also "Encouragement" posters with words; such as, Brilliance, Focus, Success, Achievement, Change and Teamwork. There is a large tack board in the family room that consists of all required compliance postings; such as, Clients Personal Rights, Ombudsman Information and Number and the Emergency Evacuation Plan. The living room floors are synthetic slate vinyl tiles and appeared to be very clean. The kitchen consists of a wooden rectangular dining table with 6 (six) metal folding chairs for easy maintenance. The oak kitchen cabinets and laminate countertops both appeared to be outdated but still functional. There is a refrigerator, new stove with a bottom oven, microwave and a toaster oven, all in great working condition. However, the common quarters had one issue; the fire extinguisher was left on the living room floor by the staff's desk and was not properly mounted to the wall.

There are three (3) bedrooms at Site I with two (2) children to each room. Each bedroom consists of two (2) twin beds that were fully complemented with pillows, bed sheets and a comforter. Each child was provided with their own six (6) drawer wooden dresser to store their clothes in addition to a small size walk-in closet, where the children would hang their shirts, jackets, pants and jeans. Each child's room was also painted an off white color, and each room has a ceiling fan with three (3) light outlets. The floors in each room are 16 x 16 brown ceramic tiles. The windows in each of the children's rooms are covered with mini window blinds. In addition, each child's room is personalized with pictures of family members, posters or cut outs of various sports athletes and cars. However, the interior of the children's bedrooms are in need of a few minor repairs or replacements. The mattress in bedroom #1 appears to be worn out by sinking deeply in the middle. There is also a hardwired mounted door bell located inside the walk-in closet in bedroom #1 that is loose and has exposing wires protruding out.

The Group Home provides the children at Site I with adequate perishable and non-perishable foods. However, there is an inadequate amount of fresh fruits for the six (6) children placed at the Group Home during the time of this review. The monitor observed only one (1) small apple and three (3) oranges in the fruit basket. On a positive note, the refrigerator contained two (2) gallons of milk, two (2) gallons of fruit juices, cheese, lettuce, tomatoes, pre-washed salad bags, bacon, eggs, sausage patties, chicken thighs, and ground beef. The top freezer contained frozen pizzas, corn dogs, ground beef, pork chops, chicken wings and drumsticks, waffles, and bread. The non-perishable foods consists of mostly canned food such as peas, corn, carrots, pineapples, soups, broths, ravioli, sauces, spices and nuts. There are also two (2) additional freezers and one (1) refrigerator located the garage where the Group Home keeps an abundance of frozen meats and extra perishable foods. The two (2) freezers contained, frozen lasagna, hot dogs, ground beef, pork chops and loins, chicken wings, breasts and thighs, bacon, and various cuts of beef. The extra refrigerator contained frozen lemon juice, two (2) gallons of milk, one (1) gallon of orange juice, sausages, bacon, eggs and chicken wings.

Site II was built in the 1960's and is a single family home located in the City of San Bernardino in a residential neighborhood. The exterior of the Group Home is painted beige in color with dark green trims. The front yard of the home's landscape consists mainly of grass and a huge tree located in the middle of the yard. Along side

the front landscape of the house are various colors of rose bushes, two (2) Sega palm trees, numerous evergreen shrubs and decorative river rocks. The backyard is of average size compared to Site I and is also mainly grass. There is a higher level tier planter at the end of the yard where there is a queen palm tree, lemon tree and small evergreen trees.

The living room appears to be somewhat dark, lacking in sufficient lighting from the red curtains covering the big living room window. The entire interior of the Group Home is painted in a tan color. The living room consists of one (1) synthetic faux leather couch, two (2) particle board book shelves, a small computer desk with one (1) computer and a printer, and a gas fireplace located in the middle. The flooring in the living room and throughout the hallway is 12 x 12 vinyl slate tiles. The living room interior walls similar to Site I, lacks decorative wall paintings; however, one wall was completely covered with 12 x 12 mirror tiles while the other walls were decorated with glass framed "Certificates of Achievement" recognitions awards hung side by side from past placed children who have graduated the program. There is a pin-up board by the hallway that consists of all required documents and postings; such as, the evacuation plan and the Ombudsman toll free number.

The common quarters are in need of repair in the living room where a small area on the edge of the corner wall has damaged plaster and is exposing the metal drywall corner. Following the living room is a wall that separates the kitchen from the living room. There is a fairly large wooden dining table to the left of the kitchen. Above the dining table is a beautiful crystal chandelier with small lights. The wooden oak cabinets and laminate countertops in the kitchen also appear to be outdated but are in good condition. The kitchen consists of a recently purchased stove with a bottom oven, microwave, refrigerator and a toaster oven. Behind the dining table is a French sliding glass patio door that leads into the "Entertainment Room", where the children can watch television, play video and board games or shoot pool. The "Entertainment Room" consists of a full size billiard table, 32' Samsung LCD Flat Screen television, DVD player, and an X-Box video gaming system. For recreational use, there is a weight bench with a full set of weights located in the garage. Since the Group Home lacks a sufficient amount of front and backyard space, the children are transported to the local park located within five (5) minutes from the Group Home to play basketball.

There are four (4) bedrooms at Site II with one (1) bedroom being used as the staff's office. Similar to Site I, the other three (3) bedrooms have two (2) children to each room. Each bedroom also consists of two (2) twin beds that are fully complemented with pillows, bed sheets and a comforter. Each child was also provided with their own four (4) to six (6) drawer wooden dressers, in addition to a small closet. The children's bedrooms were all painted a beige color and all have light brown vinyl tile flooring. Each child's room is also personalized with pictures of family members, friends, and posters of athletes and cars. However, the interior of the children's bedrooms are in need of several minor repairs or replacements. In bedroom #2, there is a broken dresser drawer track that needs repair in order for the drawer to be operable. In bedroom #3, there is a loose cable wall plate cover that needs to be securely mounted and a cracked bathroom light plate cover that needs replacement.

There is also an adequate amount of perishable fruits and vegetables at Site II, which includes; bananas, oranges, apples, bread, bagels, lettuce and tomatoes. The refrigerator in the kitchen contained food items; such as, eggs, milk, cheese, juice,

bacon, sandwich meats, lettuce, tomatoes, chicken wings and ground beef. The top freezer contained frozen foods; such as, corn dogs, pizzas, chicken breast, hamburger patties, waffles and French toast. The non-perishable foods in the kitchen cabinets are mainly canned soups, beans, corns, peas, carrots, spices and Hamburger Helper. In addition, there is an additional refrigerator and commercial type freezer in the garage that also contained an abundance of frozen meats including chicken, pork, and beef, pizzas, bread, corn dogs, juices, milk, eggs, and bacon.

The Group Home provides the children at both Sites (I & II) with a variety of age appropriate reading and educational materials. Reading material includes; music (The Source), sports magazines (Sports Illustrated), Holy Bibles, dictionaries, cook books, literatures, fiction and non-fictional books with authors; such as, J.K. Rawlings, Arthur Bell and Stephen King.

#### Recommendations:

- 1. Site I: Replace the sinking mattress in bedroom #1, repair loose hardwired doorbell and eliminate exposing wires in the closet of bedroom #1. Properly mount and secure fire extinguisher to wall and repair cracked concrete driveway.
- Site II: Repair small area of damaged/missing drywall in the living room. Repair
  or replace broken dresser tracks in bedroom # 2. Secure cable wall plate mount
  cover flushed against the wall and replace cracked bathroom light plate cover in
  bedroom #3.

#### MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of six (6) children's files, child interviews conducted and documentation provided by the agency, Aiming High Treatment Center Group Homes were in compliance with six (6) of 13 elements in the area of "Maintenance of Required Documentation and Service Delivery". The seven (7) areas of non-compliance were, "Probation Caseworker Authorization to Implement Needs and Services Plans (NSPs)", Children's Participation in the Development of NSPs", "NSPs Implemented and Discussed with Staff/Parents", "Treatment team developed timely initial NSP with the child", "Treatment team develop comprehensive initial NSP with the child", "Treatment team develop comprehensive updated 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. Aiming High Treatment Center Group Homes accept children that are wards of the delinquency court on a Suitable Placement Order and provides treatment for children with a history of abuse, delinquency, and mental/psychological health issues.

Three (3) of the six (6) children's files reviewed did not have the Probation Caseworker's authorization to implement the children's NSPs. The Group Home provided the monitor with email documentations on making efforts to obtain the Probation Caseworker's signature for implementation of the NSPs. However, there were five (5) updated NSPs that could not be found in the children's files and were unable to be reviewed; therefore, the monitor was unable to determine if there was authorization from the child's Probation Caseworker to implement the NSP. The NSPs are discussed with staff and parents, and the children interviewed report that they participated in their NSPs. However, not all of

the NSPs had the child's signature. One (1) of the NSPs reviewed did not include the child's signature, while five (5) of the NSPs could not be found in the children's files for review. Additionally, three (3) of the NSPs reviewed also did not include the parent's signatures, and the Group Home did not provide any proof of effort on obtaining the parent's signatures.

Four (4) out of the six (6) children are progressing towards meeting their goals as evidenced by their improving grades, negative drug tests and graduation from the program. Three (3) of the children had met their goals and were reunified with their parents. The other two (2) children reported that they are working towards their goals and stated that they have stopped abusing drugs. The initial NSPs were timely and documentation pertaining to the children's goals was well written. However, the children's goals were not specific to each child's treatment plan and appeared to be "cookie cutter". The therapists lacked effort by cutting and pasting goals from one child's NSP to the next with all having the same similar goals. The initial NSPs were not comprehensive; lacking pertinent information from the therapists; such as, dates when the child was enrolled in school, first seen for his medical, dental, and vision appointments. In addition, there were three (3) child's Initial NSPs that could not be found in the children's files for review.

The children reported that they are receiving therapeutic services such as individual therapy bi-weekly, family therapy bi-monthly, group therapy weekly and substance abuse counseling bi-weekly. Children are assessed upon arriving to the Group Home and any additional or further recommended assessments/evaluations are provided to the children by the designated mental health professionals. All six (6) NSPs that were reviewed and interviews conducted with children reflected that the Probation Caseworkers made monthly contact with the children. The children reported that their Probation Caseworker visits them either at the Group Home or at school. The children report that the Group Home provides and encourages them in maintaining important relationships with their family members, staff members, peers and friends. The updated NSPs present in the children's files were timely, with the exception to one (1) NSP that was two (2) days late. However, there were five (5) updated NSPs that could not be found in the children's file and were unable to be reviewed to determine the timeliness.

The updated NSPs for six (6) children were prepared by two (2) different therapists for each Group Home and were not comprehensive as required. The goals on the NSPs were not specific to each individual child, as it was lacking attention to detail and accuracy. For example, each child's goals were similar to one another. The therapists did not make any effort by contacting the Group Home to obtain dates and document health care information, school enrollment dates, or checked off boxes on the "psychotropic medical section" of the NSPs. Instead, the therapists indicated "refer to the Group Home staff" or "see facility report" and provided no further details. On one (1) child's updated NSP, the therapist referred to the child as "her" instead of "him"; failed to complete the "Concurrent Case Plan Goal" and did not provide the date when the report was completed. Additionally, nearly all of the updated NSPs lacked pertinent detailed information pertaining to the child's quarterly progress, adjustment, and outcome on areas; such as, school, substance abuse counseling, SIR, therapy sessions, and visitations.

#### Recommendations:

- Aiming High Treatment Center Group Homes shall ensure that all Initial NSP must be immediately placed in the children's file upon completion by the therapist and readily accessible to any contracting agencies for viewing in accordance with the Los Angeles County Group Home Foster Care Services Master Contract.
- 2. Aiming High Treatment Center Group Homes shall ensure that all Updated 30-Day Reports must be immediately placed in the children's file upon completion by the therapist and readily accessible to any contracting agencies for viewing in accordance with the Los Angeles County Group Home Foster Care Services Master Contract.
- 3. Aiming High Treatment Center Group Homes shall ensure that the Initial and Updated Needs and Service Plans are discussed with the Probation Caseworkers by obtaining their signatures or document their efforts to obtain signatures.
- 4. Aiming High Treatment Center Group Homes shall ensure that the children participate in their NSP by obtaining their signatures or document their efforts to obtain signatures.
- 5. Aiming High Treatment Center Group Homes shall ensure the NSP are discussed with parents by obtaining their signatures or document their efforts to obtain signatures.
- 6. Aiming High Treatment Center Group Homes shall ensure that the Initial NSP is child specific, fully completed and comprehensive.
- 7. Aiming High Treatment Center Group Homes shall ensure that each child's Updated NSP are child specific, fully completed, comprehensive, and include detailed information on the child's progress, adjustment and outcome.
- 8. Aiming High Treatment Center Group Homes shall ensure that all Updated NSP are completed by the therapist in a timely manner.

#### **EDUCATIONAL AND WORKFORCE READINESS**

Based on our review of six (6) children's files, child interviews conducted and documentation provided by the agency, Aiming High Treatment Center Group Homes were in compliance with all eight (8) elements in the area of "Educational and Workforce Readiness".

Aiming High Treatment Center Group Homes are in compliance with children enrolling and attending schools within three (3) days after placement. All six (6) children interviewed attended different schools. Three (3) of the six (6) children attended a regular high school, while two (2) attended a regular middle school and one (1) attended a continuation school. The Group Home provided documented efforts that two (2) children were not enrolled in school within three (3) days due to the school being out for the summer break, and one (1) child was experiencing difficulty obtaining his transcript and Individualized Education Plan (IEP).

Aiming High Treatment Center Group Homes assists the children in meeting their educational goals. The children all reported that there is a tutor that comes to the Group Homes twice a week and provides assistance with their homework, in addition to tutoring services already provided by the after-school program. The children reported that they also enlist the Group Home staff for assistance with their homework or difficult assignments. The children reported that there is communication between the Group Home staff and the school to ensure that they are progressing academically and behaviorally; such as, attending their teacher/parent conferences and meetings with the principal for negative behavior. Two (2) of the children reviewed were new to the Group Home making it difficult to determine their progress. Of the other four (4) children, all were attending school daily; however two (2) children had a difficult time progressing academically by demonstrating defiant behavior towards school officials and refusing to complete class assignments, and the other two (2) children were making progress by improving their attendance and completing class assignments as evidenced by their Five (5) of the six (6) children interviewed reported that they planned on graduating high school and enrolling in a college or trade school, while one (1) child plans to enlist in the military. The children reported having future goals of becoming a graphic artist, architect, photographer, work in law enforcement and a professional football player.

Aiming High Treatment Center Group Home maintains copies of current and past report cards and IEPs. Of the six (6) children's files reviewed, there is one (1) child that required an IEP, which was maintained in the file. This child reported that his needs are being met through both the school and the Group Home. Of the six (6) children interviewed, only one (1) was of age to attend Independent Living Program (ILP) classes. Children that are eligible for ILP classes attend an eight (8) week course at the Redland's Young Men's Christian Association (YMCA) offered through San Bernardino County. The eight (8) week courses includes classes; such as, "Money Budgeting", "Life After Foster Care", and "Employment Workforce". The one (1) child eligible for ILP completed his eight (8) week course and received a signed Certificate upon completion. The children that are not eligible for ILP reported that they are encouraged to participate in youth development and daily living skills, such as learning positive behavior, personal interactions with staff and peers; basic hygiene by washing, grooming, and bathing. In addition, the children are also taught how to perform daily chores such as mopping, sweeping, cleaning, and washing laundry.

#### Recommendations:

None

#### **HEALTH AND MEDICAL NEEDS**

Based on our review of six (6) children's files, child interviews conducted and documentation provided by agency, Aiming High Treatment Center Group Homes were in compliance with all six (6) elements in the area of "Health and Medical Needs".

Of the (6) children interviewed, all reported that they have been seen by the physician, optometrist, and dentist within 30-days after being placed. All six (6) children reported that they did not have any medical related issues that required a follow-up appointment. One (1) child reported that his initial dental appointment revealed several cavities that required follow-up dental work. The child reported he received his follow-up dental

appointment in a timely manner and received several fillings for his cavities. A review of the Group Homes medical charts confirmed that the children all were seen for medical and dental appointments within 30 days of their placement.

#### Recommendations:

None

#### **PSYCHOTROPIC MEDICATION**

Based on our review of six (6) children's files, child interviews conducted and documentation provided by the agency, Aiming High Treatment Center Group Homes were in compliance with both elements in the area of "Psychotropic Medication".

Of the six (6) children interviewed, only one (1) child had a current court ordered authorization for psychotropic medication. The child's file reviewed also contained a complete copy of the court filed Psychotropic Medication Authorization (PMA) form. The child reported he is routinely seen and assessed by his psychiatrist, and the child reported that the medication is helping him cope with his mental health issues. In addition, he reported that he knows that he has the right to refuse his medication if he no longer wants to continue using it.

#### Recommendations:

None

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

Based on our review of six (6) children's files, child interviews conducted and documentation provided by the agency, Aiming High Treatment Center Group Homes were in compliance with 13 of the 17 elements in the area of "Personal Rights and Social/Emotional Well-Being". The areas of non-compliance were, "Children report satisfaction with meals and snacks", "Children free to attend religious services and activities of their choice", "Children given opportunities to participate in planning activities", and "Children given opportunities to participate in activities, including at the Group Home, in the community or school".

The children at Sites I & II all reported that they were informed of the Group Home's policies and procedures. The children reported they were given a copy of the Group Home's policies and procedures to sign, acknowledging that the policies and procedures were reviewed with them by the Group Home Administrator. The children reported that they all feel safe at the Group Home and free from intimidation or bullying. The children all reported that they are always supervised by at least two (2) to three (3) staff throughout the day and one (1) staff overnight, which meets their Program Statement on staff to client ratio of 1:3.

The children at both Sites I & II report that they are not completely satisfied with the meals and snacks they receive at the Group Homes. All six (6) children reported that they are not provided with nutritional lunches cooked by Group Home during non-school days. Children reported eating ramen noodles, canned raviolis, frozen pizzas, burritos, and corndogs. All children interviewed from Site II reported that they only eat cereal with

milk for breakfast during the weekdays and were only provided with a complete breakfast option that includes eggs, ham and bacon on the weekends. This issue was discussed with the Group Home Administrator and both Facility Managers, whom reported that the Group Home does provide the children with nutritious meals but the children choose to eat frozen food for lunch all the time. Also, another Facility Manager reported that the staff has in the past cooked a complete breakfast for the children on a daily basis, but the children also chose to skip breakfast leaving the breakfast to go to waste; therefore, the Group Home discontinued providing children with a complete breakfast. However, all children reported that they are satisfied with the dinner meals being provided to them on a daily basis. The children reported eating meals; such as, lasagna, fried chicken, hamburgers, hot dogs, tacos, burritos, rice, beans, ribs, spaghetti, pastas, pork chops, sausages, steaks, and beef stew.

All six (6) children at Sites I & II reported that they are dissatisfied with their snacks. The children reported that they receive a full snack bag at the beginning of the week and it gets filled up on a weekly basis. However, the children reported that their snack bags are sometimes filled later than a week, leaving them without any snacks to eat. The children reported that the snacks they received do not consist of any name brand chocolate candy bars; such as, Kit Kat, Snickers, Twix, or M&M's; and the chips and cookies are a generic brand that are not from Frito Lay or another name brand. In addition, the children all reported that they are not provided with a variety of fruits to eat other than the usual bananas, oranges, pears and apples. The children interviewed also reported that the fruits are not always fresh, and they would like the Group Home to provide them with seasonal fruits; such as, strawberries, blackberries, raspberries, cherries, nectarines, pineapples, peaches, plums, watermelons and grapes.

The children report that they are treated with dignity and respect by the Group Home staff. The children reported that they receive appropriate rewards and discipline. The children reported that they are placed on a three (3) tier level system, which consists of "Entry Level Functioning", "Growing" and "Self Reliance". The children receive privileges based on the point system earned and deducted. Discipline is enforced if they do not follow the rules by having their points deducted and loosing certain privileges. The children report that the consequences are fair. The children reported that they are allowed to make and receive telephone calls in private and receive unopened mail, as long as it is from their approved contact list. The children reported that they are aware of their right to participate in the religious services of their choice. However, all children from Site I reported that they wanted to attend different churches but were all subjected to attend only one (1) particular non-denominational church that worships all religious faith. One (1) child, whose religious faith was "Catholic", reported that the Group Home refused to allow him to attend a Catholic church. The children reported that their chores are easy and their assignments varied by week. Examples of daily chores include; cleaning, sweeping, and mopping of the living room, kitchen, bathrooms and taking out the trash.

The children reported that they are informed of the names of their medications and why they are taking it. The children reported that they are also aware of their right to refuse medication. One child taking psychotropic medication, "Fluoxetire" and "Benadryl", reported that he was aware what the medications were for and felt that the medication was helping him cope with his mental health issues. Also, children reported that they are aware of their right to receive or reject voluntary medical, dental and psychiatric care.

Four (4) of the six (6) children interviewed reported that they were given opportunities to participate in planning activities, while the other two (2) children reported that the Group Home staff would usually plan their activities for them. However, all children reported that their participation in activities, including at the Group Home, in the community or school, are provided to them if they choose to participate. One (1) child participated in a community art class while another child attends after school basketball practices and games. The children reported that recently, they have only been going to the movies on the weekends. The children reported that they have experienced very few outings on the weekends while at the Group Home, even prior to going on their home passes. The children gave examples of current and past activities and outings which they have been out on; such as, playing basketball at the nearby park, Magic Mountain, skating rink, baseball game, UCLA football game, movies, library, horseback riding, Knott's Berry Farm and a local recreational center. A review of the Group Home's recreational activity log at Site I reflects that there was only four (4) major outings dating from 9/03/11 through 10/31/11, and one (1) movie activity on 8/20/11. Site II revealed two (2) major outings in the month of October 2011, and nine (9) movie activities dating from 5/29/11 In addition, the Group Home does not have a recreational activity through 1/22/12. calendar posted at the Group Home.

The children indicated that they are offered the opportunity to participate in age-appropriate, extra-curricular enrichment and social activities in which they have an interest. Four (4) of the six (6) children interviewed choose not to participate in the activities. One (1) of the two (2) children is a member of the basketball team at his high school while the other child is enrolled in a community art class at Rachel's Art Studio.

#### Recommendations:

- 1. Aiming High Treatment Center Group Homes shall provide children with nutritious lunch meals during non-school days in accordance with the Los Angeles County Group Home Foster Care Services Master Contract.
- 2. Aiming High Treatment Center Group Homes shall provide children with a variety of breakfast selections or options, which includes eggs, ham and bacon on a daily basis.
- 3. Aiming High Treatment Center Group Homes shall introduce children to a variety of seasonal fruits other than bananas, pears, apples and oranges.
- 4. Aiming High Treatment Center Group Homes shall provide children with quality brand name chips and chocolate candy bars in accordance with the Los Angeles County Group Home Foster Care Services Master Contract. The Group Home shall no longer utilize the weekly "fill up" snack process to avoid theft and overeating. The Group Home shall designate a staff member to distribute the snacks on a daily basis.
- Aiming High Treatment Center Group Homes shall allow and transport children to attend any religious church of their choice in accordance with the Los Angeles County Group Home Foster Care Services Master Contract.
- 6. Aiming High Treatment Center Group Homes shall allow children to plan and participate in weekly Recreational, Social, and Educational activities in

accordance with the Los Angeles County Group Home Foster Care Services Master Contract. Group Home Facility Managers shall maintain and post a monthly calendar of pre-planned weekly activities.

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

Based on our review of six (6) children's files, child interviews conducted and documentation provided by the agency, Aiming High Treatment Center Group Homes were in compliance with four (4) of the eight (8) elements in the area of "Personal Needs/Survival and Economic Well-Being". The four (4) areas of non-compliance were, "\$50.00 Clothing Allowance", "Provision of Personal Care Items", "Management of Allowances", and "Encouragement and Assistance with Life Book".

The Group Home does not comply with the required \$50 monthly clothing allowance as required by the Los Angeles County Group Home Foster Care Services Master Contract. Rather, the Group Home chooses to provide the children with their own clothing allowance system, which is on a bi-annual basis. The children interviewed at Sites I & II all reported that they do not receive a monthly clothing allowance in the amount of \$50.00. The children reported that they received a \$550.00 clothing allowance upon arrival at the Group Home and another \$300.00 clothing allowance every six (6) months after. The Group Home utilizes a "gift card" system in lieu of cash to avoid monetary theft where newly placed children receive a \$350 Visa gift card, a \$100 gift card to "Wal-Mart", and a \$100 gift card for shoes, which exceeds the minimum required amount of \$250. In addition, the Group Home provides the children with additional clothing allowance if needed to purchase school uniforms or any unexpected clothing costs. The children then receive a \$300 clothing allowance in "gift cards" every six months.

The Group Home maintains a "Clothing Inventory" that lists the articles of clothing, the value of the clothing and also the purchase date of the clothing. The children reported that they are provided with the opportunity to select their own clothing as long as the clothing is size appropriate, free from offensive language and non-gang related. The children reported shopping for clothing at stores; such as, "Burlington Coat Factory", "American Eagle", Aeropostle", "Vans Shoe Store", "Foot Locker", "Wal-Mart", "Levis Store", "Street Dreams", "H&M Clothing" and the "Nike Store". The children reported that they have adequate amounts of clothing; including, socks, underwear, jeans, shorts, shirts and jackets. The children also reported that they like the quality of their clothing items that are name brands from the above mentioned stores they shopped at.

The Group Home provides the children with adequate personal care items. However, all children from Sites I & II reported that the Group Home provides them with cheap quality generic brand personal care products purchased from the 99 Cents Only Stores. Children reported that the generic brand personal care items; such as, lotion, deodorant, and shampoos were ineffective when used or applied on their person. The children reported that the generic brand body soaps have caused their skin to break out in rashes. In addition, African-American children reported that the generic brand body lotion supplied does not provide adequate protection or the dermis penetration required for their ethnic skin type. The children reported that they have been using their personal weekly allowances to purchase quality brand name personal care items; such as, "Axe" deodorant, "Dove" body soaps, "Johnson & Johnson" lotion and special "Coco Butter" lotion.

Aiming High Treatment Center Group Homes provides all children with the required minimum weekly allowances. All children interviewed reported that they received at least \$7.00 dollars for their weekly allowance. The children reported that they are offered the opportunity to earn up to \$15.00 dollars for their weekly allowance by performing extra chores at the Group Home or remain at the level of "Self Reliance". However, the children reported that they are not free to manage or spend their weekly allowances as they choose, as required by the Los Angeles County Group Home Foster Care Services Master Contract. The children also reported that the Group Home withholds their weekly allowances and prohibits them from withdrawing any funds until they have reached the "Growing" level status. Four (4) of the six (6) children interviewed reported that even when they have reached the "Growing" level status, they were not allowed to withdraw any funds to purchase snacks at school. The children were only allowed to withdraw funds for their weekend home passes or during an outing.

The children reported using their allowances to purchase popcorn and candies at the movies; such as, Cheetos, chewing gum, Twix, Kit Kat, Snickers, ice cream at Dairy Queen, burgers at Jack in the Box and McDonald's, Chinese Food and name brand quality personal care items. One (1) child reported that he choose not to spend his money and wanted to save all of his weekly allowances. However, the child's money was not saved in his own personal bank account. It was reported by the Group Home Administrator that the child's allowance money was saved in the Group Home's bank account. Lastly, all children reported that their weekly allowances were not always distributed on a weekly basis as required. The children reported that their weekly allowances have been late at least one (1) week on numerous occasions. A review was conducted of the weekly allowance log, which reflected that the children's weekly allowances were late on more than six (6) different occasions despite the allowances paid up to par by doubling up on the following week.

The Group Home does not encourage or assist in creating and maintaining "Life Books", as required by the Los Angeles County Group Home Foster Care Services Master Contract. This area of deficiency is a continuance of non-compliance by the Group Home that was addressed during the December 2010 monitoring review with a Corrective Action Plan (CAP). All children interviewed from Sites I & II reported that they were never given a "Life Book" or "Photo Album" during their placement at the Group Home, as stated in their 2010 CAP.

#### Recommendations:

- 1. The Group Home shall comply with the Los Angeles County Group Home Foster Care Services Master Contract, which requires the Group Home shall provide a regular monthly allocation starting not more than 30 days following the date of placement in the amount of at least \$50 to be spent on clothing. Group Home shall no longer continue to utilize a "semi-annual" basis clothing allocation not authorized or approved by the Probation Monitor. The Group Home shall also create and maintain a "Clothing Allowance Deferment Waiver" form, which requires both signatures from the child and the Group Home representative when the child elects to "defer" his monthly clothing allowances and receive it on a quarterly basis to spend a larger amount versus monthly.
- 2. The Group Home shall comply with the Los Angeles County Group Home Foster Care Services Master Contract, which requires the Group Home to provide

children with quality and appropriate ethnic care products. The Group Home shall also immediately terminate the use of generic brand personal care items and prohibit children from purchasing quality care items with their weekly allowances.

- 3. The Group Home shall comply with the Los Angeles County Group Home Foster Care Services Master Contract, which requires the Group Home to provide children with an allowance on a "weekly" basis. The Group Home shall also designate a staff to coordinate the distribution of weekly allowances in a timely manner in the absence of the Administrator.
- 4. The Group Home shall comply with the Los Angeles County Group Home Foster Care Services Master Contract, which requires the Group Home to provide each child with a "Life Book" and encourages them in the assisting, creating and updating of their Life Books. The Group Home shall also schedule a routine "Group Home Activity" on updating the child's Life Books.

#### **DISCHARGE PLAN**

Based on our review of three (3) discharged Probation children's files, Aiming High Treatment Center Group Home was in compliance with all three (3) elements in the area of "Discharge Plan".

Two (2) of the three (3) children were discharged according to their permanency plan for family reunification. Although one (1) child was not discharged according to his permanency plan due to the child going AWOL on his own, the child was meeting all his goals as reported in his NSP report. The other (2) two children were meeting their NSP goals by maintaining sobriety and progressing at school. The two (2) children were reunited with their families and met their NSP goals by controlling their anger management, maintaining sobriety, progressing at school and developing interpersonal relationships with family. The Group Home uses all available resources in attempt to stabilize the child's placement prior to requesting the removal of the child. Examples are implementing team meeting strategies with The Administrator, Facility Manager, and parents' participation to increase placement stabilization and decrease runaways for each child as noted in the program statement.

#### Recommendations:

None

#### PERSONNEL RECORDS

Base on our review of five (5) staff's files, Aiming High Treatment Center Group Home was in compliance with 10 of the 14 elements in the area of "Personnel Records". The areas of non-compliance were, "Department of Justice (DOJ) submitted timely", "Child Abuse Clearance Index (CACI) submitted timely", "Appropriate employees received CPR training", and "Appropriate employees received First-Aid training".

All background checks with DOJ, Federal Bureau of Investigations, and CACI were completed and submitted in a timely manner, and all employees signed the criminal background statement. However, the DOJ transfer and CACI clearance for one (1)

employee was not in the file at the time of this review. All employees met the educational and experience requirement. A review of the employee's experience reflects education ranging from high school graduates to college graduates with bachelor's degrees. There were two (2) employees who had received their health screening on time, but the health screening clearances were not in the employee's files at the time of this review. All employees possess a current valid California Driver's License, and all employees signed copies of the Group Home's policies and procedures. All employees received the required initial training and one-hour training in the area of "Child Abuse Identification and Reporting". Three (3) of the five (5) employees' CPR cards were expired and not valid. One (1) of the five (5) employees' First-Aid training card was expired and not valid. All employees had received their annual on-going training of 20 hours and received emergency intervention training for Professional Assault Crisis Training.

#### Recommendations:

- 1. The Group Home shall provide proof of DOJ/CACI clearance for one (1) employee's DOJ/CACI clearance not on file as required by the Los Angeles County Group Home Foster Care Services Master Contract. DOJ/CACI clearance must be placed in the employee's personnel file and readily accessible by contracting agencies for viewing in accordance with the Los Angeles County Group Home Foster Care Services Master Contract.
- 2. The Group Home shall provide proof of the Initial Health Screening clearance for one (1) employee as required by the Los Angeles County Group Home Foster Care Services Master Contract. Initial Health Screening clearance must be placed in the employee's personnel file and readily accessible by contracting agencies for viewing in accordance with the Los Angeles County Group Home Foster Care Services Master Contract.
- 3. The Group Home shall provide proof of CPR training for three (3) employees as required by the Los Angeles County Group Home Foster Care Services Master Contract. Proof of valid CPR cards must be placed in the employee's personnel file and readily accessible by contracting agencies for viewing in accordance with the Los Angeles County Group Home Foster Care Services Master Contract.
- 4. The Group Home shall provide proof of First-Aid training for one (1) employee as required by the Los Angeles County Group Home Foster Care Services Master Contract. Proof of a valid First-Aid card must be placed in the employee's personnel file and readily accessible by contracting agencies for viewing in accordance with the Los Angeles County Group Home Foster Care Services Master Contract.

#### AUDITOR CONTROLLER FISCAL REVIEW

The most recent Fiscal Review for Aiming High (Ashe Inc.) from the Department of Auditor Controller is dated December 13, 2010, for the fiscal period of July 1, 2007, to June 30, 2008. The report dated December 13, 2010, indicated that the Aiming High (Ashe, Inc.) had questioned/disallowed costs. Aiming High (Ashe, Inc.) submitted a timely approved Fiscal Corrective Action Plan, which is being monitored by the

Department of Children and Family Services, Fiscal Monitoring Section. However, ASHE Inc. has a balance due of overpayments, and Placement Administrative Services reports issues with timely payments and cooperation of payment on a consistent basis.

#### Recommendations:

1. ASHE Inc. must ensure payments for overpayments due to Probation in a cooperative and timely manner.

#### **FOLLOW-UP VISIT**

On June 28, 2012, a follow-up visit was conducted at Aiming High Sites I & II, to verify that all recommendations had been completed.

- A complete follow-up walk through inspection of the interior and exterior of Sites I & II was conducted and all recommendations have been repaired or replaced. The interior deficiencies had been corrected. The mattress was replaced in the month of January 2012. The exposing wires from the door bell have been covered with a new door bell cover. The fire extinguisher has been safely mounted in the hallway. The damaged drywall exposing the drywall corner has been patched up and repaired. The broken dresser drawer tracks in bedroom #2 have been repaired. The cable wall plate and bathroom light plate covers were all replaced and secured to the wall. The exterior deficiency was also corrected. The severely cracked concrete driveway was repaired in the month of June 2012.
- At the time of the review, Aiming High Treatment Center Group Home did not have a separate Probation Caseworker's Sign In/Out log at Site I. A new Probation Caseworker's Sign In/Out log was presented to the monitor by the Group Home Administrator for verification.
- The missing NSPs and 30-day Initial Reports were hand delivered to the monitor for review during the follow-up visit. The monitor visually verified that the NSPs and 30-day reports were actually placed in each child's respective files for accessibility upon request. However, since the review, three (3) of the six (6) children sampled have been discharged and the Group Home Administrator was unable to obtain the child's and parent's signatures as part of the Corrective Action Plan. The Group Home Administrator has been formally addressed by the monitor regarding this deficiency and has agreed in their Corrective Action Plan to immediately obtain the child's and parent's signatures on all future NSPs and Initial 30-day reports once the NSPs have been completed by the therapists. Also, the non-comprehensive NSPs were addressed by the Group Home Administrator with the therapists. The therapists have since attended the "Needs & Services Plan/Quarterly Report Training" provided by the Department of Children & Family Services and the Probation Department on January 10, 2012, to ensure that all guidelines and expectations are fully met. A review of the most recent completed NSP reflects that the NSP was thoroughly completed and comprehensive.
- Both sites were not providing children with nutritional lunches and children at Site
   Il reported only eating cereal with milk for breakfast. At the time of the follow-up

inspection, the monitor conducted interviews with all children at both sites including children that were not sampled. All children reported that they have been receiving nutritious home cooked lunches unless they request for frozen food. The children at Site II also reported eating a complete breakfast with options of having bacon, eggs, ham and sausages. The children also confirmed that they have been receiving a variety of fresh seasonal fruits; such as, nectarines, plums, watermelons, pineapples and grapes as verified by the monitor during the follow up inspection. Additionally, the Group Home Administrator has since eliminated their weekly snack bag "fill-up" process and is currently distributing snacks to the children in the mornings and evenings on a daily basis. Children interviewed during the follow-up inspection reported that they are now receiving quality brand snacks; such as, Frito Lays, Doritos, Snickers, Kit Kat, M & M's and Oreos Cookies.

- Children at Site I reported being denied from attending the religious services of their choice. The monitor confirmed through child interviews during the follow-up inspection that they have since been attending the churches of their choices every Sunday.
- Children from both sites reported that they receive their clothing allowances every six (6) months instead of the required \$50 monthly clothing allocation as verified by reviewing the clothing allowance log. The Group Home no longer provides children with their clothing allowances on a "6 months" basis. The Group Home Administrator has agreed in their Corrective Action Plan to provide children with an optional clothing allowance selection upon being placed. Option #1 allows a child to receive a \$550.00 in gift cards and \$50 per month after the first three (3) months, which allows the child to receive an additional \$150.00 from Option #2. Option #2 allows a child to receive the minimum required clothing allowance in the amount of \$250.00 in gift cards and \$50 per month thereafter. Children also reported that they are given the opportunity to make clothing purchases at the stores of their choices.
- The Facility Managers at Sites I & II have since been designated by the Group Home Administrator to maintain a weekly recreational calendar to be posted at each site that consists of various community activities and outings. Children interviewed during the follow-up inspection reported that they have recently been going on outings and activities every week. Children at both sites reported that they had gone to "Raging Waters" amusement park two (2) days ago. Children reported that they recently have been to Raging Waters, Museum of Tolerance, Science Museum, Basketball game, Car shows, Mexican Music Art Show, movies, Los Angeles Zoo, swimming, local gym to work out, Marshal's Air Show, arcade and parks to play basketball. Children reported that they feel they have more input when planning activities or outings. During the follow-up walk through, the monitor verified that there is a recreational calendar posted at each site.
- A follow-up interview was conducted with each child including children that were not in the original sample (newer to the Group Home), to ensure that the Group Home has since provided the children with quality brand personal care items. Children reported that they have recently received brand name personal care

items; such as, Speed Stick deodorant, Dove body soap, Colgate toothpaste, Suave shampoo and conditioner and Vaseline body lotion. The Group Home Administrator has agreed to accommodate children with certain health issues; such as, excessive dry skin, eczema, or has an adverse reaction with quality non-allergenic brand products.

- The Group Home Administrator has agreed in their Corrective Action Plan to allow children to manage their weekly allowances by withdrawing the funds at anytime when they choose to and distribute the allowances in a timely manner each week on Friday mornings to avoid being late. All children interviewed during the follow-up inspection reported they are now free to withdraw their weekly allowances to make purchases at the school's snack shop or whenever they want. In additional, children also reported that they are receiving their weekly allowances on time.
- The children also reported during follow-up interviews that they all have recently received a life/photo book from the Group Home Administrator. The children also brought out their life/photo book for the monitor to review and reported that Group Home staff assists them on maintaining and updating their life/photo books by providing them with developed photographs taken during their outings. Additionally, the Group Home Administrator presented the monitor with two (2) newly purchased digital cameras for each site that will be used to take photographs during outings and activities.
- All missing documents from the Personnel files at the time of review were updated with the missing documents and presented to the monitor for review and filed back in the staff's file for accessibility upon request.



Airring High Tucotment Centers

June 28, 2012

Dear DPO Lim,

Herein please find the 2012 Corrective Action Plan for Aiming High Treatment Centers, Site I and Site II.

Respectfully submitted,

Claudius Wright

"The lineau family can make a difference."

ASHÉ Inc. (Aiming High Treatment Centers)
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# Aiming High Treatment Center, Sites I & II, Deficiencies for 2012 Monitor Review

# I. <u>Licensure/Contract Requirements:</u>

1. No separate Probation Caseworker's Sign In/Out Log at Site I.

Recommendation: Create a separate Sign In/Out Log for the probation officer to sign.

Correction: Separate Sign In/Out Log created for probation officer to sign.

## II. <u>Facility and Environment:</u>

1. Site I: Mattress in bedroom #1 sinks tremendously in the middle.

Recommendation: Replace mattress.

Correction: Mattress replaced. See attached receipt and photo.

2. Site I: Door bell located in the closet of bedroom #1 has exposing wires.

Recommendation: Repair, cover, and properly mount door bell from exposing wires.

**Correction: Doorbell repaired.** 

3. Site I: Fire extinguisher sitting in living room and needs to be properly mounted to wall.

Recommendation: Properly mount fire extinguisher to wall.

Correction: Fire extinguisher properly mounted to wall.

4. Site I: Small section on the exterior concrete driveway severely cracked.

Recommendation: Repair cracked concrete.

Correction: Concrete repaired.

5. Site II: Small area of damaged drywall exposing metal in living room.

Recommendation: Repair drywall and cover up exposing metal.

Correction: Drywall and exposed metal has been repaired.

6. Site II: Broker dresser drawer tracks in bedroom #2.

Recommendation: Repair or replace broker dresser tracks.

Correction: Dresser repaired.

7. Site II: Cable wall plate mount cover needs to be secured from exposing hole in bedroom #3.

**Recommendation:** Secure cable wall plate mount cover flushed against wall from moving.

Correction: Cable wall plate mount secured.

8. Site II: Bathroom light plate cover cracked in bedroom #3.

Recommendation: Replace bathroom light plate cover.

Correction: Bathroom light plate cover replaced.

# III. <u>Maintenance of Required Documentation and Service</u> Delivery:

1. Initial 30-Day Report not on file for children 1, 2, and 3.

**Recommendation:** Initial 30-Day Report must be immediately placed in each child's file upon completion by the therapist and readily accessible by any contracting agencies for viewing in accordance with the Master Agreement Contract for Foster Care Services.

Correction: Initial 30-Day Report placed in each child's file.

2. Updated NSPs not on file for the following children: child 1 (1/26/12), child 2 (2/02/12), child 3 (10/18/11), child 4 (7/12/11), and child 5 (1/24/12).

**Recommendation:** Updated NSPs must be immediately placed in each child's file upon completion by the therapist and readily accessible by any contracting agencies for viewing in accordance with the Master Agreement Contract for Foster Care Services.

Correction: Updated NSPS placed in each child's file.

3. Updated NSP dated 11/04/11 for child 1 was two (2) days late.

**Recommendation:** Updated NSP must be completed in a timely manner in accordance with the Master Agreement Contract for Foster Care Services.

Correction: All updated NSP will be completed in a timely manner in accordance with the Master Agreement Contract for Foster Care Services.

 Initial 30-Day Report for child 1 missing parent and DPO's signature. Updated NSP dated 10/26/11 missing parent, DPO, GH Administrator, and child's signature.

**Recommendation:** Provide proof of effort to obtain required signatures by group home.

Correction: Proof has been provided.

5. Initial 30-Day Report for child missing parent and DPO's signature.

**Recommendation:** Provide proof of effort to obtain required signatures by group home.

Correction: Please see attached.

6. Initial 30-Day Report for child missing parent and DPO's signature.

**Recommendation:** Provide proof of effort to obtain required signatures by group home.

Correction: Proof has been provided.

7. All Updated NSPs appeared to be "cookie cutter" and were not comprehensive. NSPs were not tailored to be "child specific" and therapist lacks pertinent information by making no effort to obtain and list treatment assessments pertaining to the youth's adjustment and progress.

**Recommendation:** NSPs must be completed filled out by the therapist and the NSP must be comprehensive to be "child specific" as per recent NSP training guidelines provided by DCFS and Probation.

Correction: The Aiming Treatment Centers therapeutic team met to review protocol regarding the reporting process for client NSP. The meeting included all contracted therapists. Guidelines were refreshed to reiterate what needs to be detailed in all client NSPs.

All therapists have been notified to customize all NSPs to the individual child. All NSPs will be thoroughly reviewed to ensure that they are child specific.

# IV. Personal Rights and Social /Emotional Well-Being:

1. All children reported that they do not get a nutritional lunch cooked by staff at the group homes during non-school days and weekends. Children reported eating ramen noodles, frozen pizzas, frozen burritos, frozen corndogs, and Ravioli from the can.

**Recommendation:** Group Home is to provide nutritious lunch meal for children during non-school days in accordance with the Master Agreement Contract for Foster Care Services.

Correction: Administrator has reviewed the lunch menu with facility managers to ensure that all children are provided with a nutritional lunch.

Please note that clients often request frozen food for lunch such as corn dogs, taquitos and top ramen versus a prepared lunch by staff. Consideration has been taken to ensure that children are provided with a variety of options.

Children at Site II reported that they only eat cereal and milk for breakfast during the weekdays and were only provided with a full breakfast that included bacon, eggs, and ham on the weekends.

**Recommendation:** Group Home is to provide variation of nutritious breakfast for children in accordance with the LA County Master Agreement Contract for Foster Care Services.

Correction: Administrator has reviewed the breakfast menu with facility managers to ensure that all children are provided with a nutritional breakfast.

3. All children reported that they do not receive a variety of fruits other than oranges, bananas, pears, and apples. Children reported that fruits were also not fresh and soft. Monitor observed minimal fruits (3 oranges and 1 small apple) available for 6 youths at Site I and appeared to be fresh.

**Recommendation:** Provide sufficient amount of fruits for 6 children and introduce child to variety of seasonal fruits such as strawberries, blueberries, raspberries, cherries, nectarines, peaches, plums, watermelons, grapefruits, and grapes.

Correction: Administrator has reviewed the snack menu with facility managers to ensure that all children are provided with nutritional a snack which is to include a variety of fresh fruits.

4. All children reported that they received insufficient amount of snacks and that their snack bags were not always filled up on a weekly basis by the facility manager. Children reported receiving generic brand chips and no chocolate candy bars. Monitor inspected children's snack bags and observed generic brand chips and no chocolate candy bars.

**Recommendation:** Group Home is to provide children with quality brand chips and chocolate candy bars. Group Home shall no longer utilize the weekly "fill up" snack process to avoid theft and overeating. Snack is to be distributed by staff on a daily basis.

Correction: The snack bags have eliminated. All children are provided with the option of selecting healthy and nutritional snacks on a daily basis.

5. Children at Site I reported that they were only allowed to attend one (1) specific Christian church. Children reported that they were denied by staff from wanting to attend different churches on the weekends. One (1) child reported that his religion is Catholic and was denied by staff from attending a Catholic church. **Recommendation:** Group Home must provide and transport children to attend any religious churches of their choices in accordance with the Master Agreement Contract for Foster Care Services.

Correction: Group home provides all children access to transportation to attend any religious service of their choice in accordance with the Master Agreement Contract for Foster Care Services.

If a situation arises where there is a conflict in scheduling due to transportation, Agency will rotate transportation so that each child can have the opportunity to attend a service of their choice.

6. All children reported that they participated in minimal Recreational, Social, and Educational activity planning. Children at Site I reported that they go to the same park once a week to play basketball, which was located a block from the group home. All children reported that they have never been to a museum since being placed. All children reported that most of their weekend activity was going to the movies. All children reported that they have gone on only a few major outings since being placed.

**Recommendation:** Group Home must allow children to plan and participate in weekly Recreational, Social, and Educational activities as required by the Master Agreement Contract for Foster Youth Services. Group Home facility manager shall maintain and post a monthly calendar containing various pre-planned weekly activities.

Correction: Children are allowed to plan and participate in weekly Recreational, Social, and Educational activities as required by the Master Agreement Contract for Foster Youth Services. Group Home facility manager shall maintain and post a monthly calendar containing various pre-planned weekly activities.

## V. Personal Needs/Survival and Economical Well-Being:

 All children reported that they received their clothing allowances every six (6) months and it was not distributed on a monthly basis as required by the Master Agreement Contract for Foster Care Services.

**Recommendation:** Group Home is to comply with the Master Agreement Contract for Foster Care Services, which states that the group home shall provide a regular monthly clothing allocation starting

not more than 30 days following the date of placement in the amount of at least \$50 to be spent on clothing. Group Home shall no longer continue to utilize the "semi-annual" basis clothing allocation not authorized nor approved by the probation monitor. Group Home shall also create and maintain a "Clothing Allowance Deferment" form requiring both signatures from the youth and group home staff in the event the youth elects to defer his monthly \$50 clothing allowance.

Correction: Group Home has created a form, Client Clothing Allowance Agreement, to allow each child to determine how they prefer to receive their clothing allowance. The options are as follows:

### Option 1:

Client agrees to receive a total of \$550.00 in gift cards allotted as follows: 1. One (1) \$100.00 Wal-Mart gift card, 2. One (1) \$100.00 Footlocker gift card and 3. One (1) \$350.00 Visa Money Card. After the initial three month period, client will receive \$50.00 per month.

### Option 2:

Client agrees to receive a Visa money card for \$250.00 and \$50.00 per month clothing allowance.

#### Please refer to attached form.

2. All children reported that they are subjected by the group home to shop at only certain stores for the purchase of their clothing due to the group home utilizing their Burlington Coat Factory and Nike Store gift cards in lieu of monthly cash clothing allowances as required by the Master Agreement Contract for Foster Care Services. All children reported that they would prefer to clothing shop elsewhere other than Burlington Coat Factory due to their dislike of clothing choices there.

Recommendation: Group Home is to comply with the Master Agreement Contract for Foster Care Services and provide children with cash clothing allowances in lieu of their Burlington Coat Factory and Nike Store gift cards, which will allow children opportunity to purchase clothing items of their preference. Group Home shall terminate the use of any gift cards used as a clothing allowance system.

Correction: Please see above. All children are given the option to determine where purchases are made. Please note that the Los Angeles County Contract requires after provide \$250.00 upon

initial intake and \$50.00 a month thereafter. Aiming High has elected to provide each child with the option to increase that amount based upon their selection of "Option 1" as outlined before which gives each child \$550.00 in gift cards and \$50.00 a month thereafter after the first three (3) months.

3. All children reported that personal care items provided by the group home are of cheap quality generic brand purchased from the 99 Cents or Dollar Tree Stores, which when used or applied on were ineffective. Children reported that cheap body soaps have caused them to break out in rashes. Children of African-American descent reported that the generic brand body lotion does not provide adequate protection or penetration required for their ethnic skin type. All children reported that they have been using their weekly clothing allowances to purchase quality brand name personal care items.

**Recommendation:** Group Home is to comply with the Master Agreement Contract for Foster Care Services, which requires the group home to provide children with quality and appropriate ethnic care products. Group Home shall immediately terminate the use of generic brand personal care items and prohibit children from purchasing quality items with their weekly allowances.

Correction: Clients are provided with standard hygiene items which includes various brands. Aiming High also purchases bulk items for efficiency purposes. If the client would like a specific brand of hygiene items they are permitted to purchase those items with their gift cards and or allowances.

If the client has a health problem, such as eczema or has adverse reaction to a particular product, Agency will provide a suitable replacement for the client.

4. All children reported that they are not free to manage their weekly allowances as required by the Master Agreement Contract for Foster Care Services. All children reported that their weekly allowances were frozen and they were able to access it only when they have reached the level of "Growing". All children reported that even when they have reached the "Growing" level, the group home prohibits them from spending their weekly allowances as they choose such as purchasing snacks at school. All children reported that the group home only allows them to access their allowances prior to going on home pass.

Recommendation: Group Home is to comply with the Master Agreement Contract for Foster Care Services, which requires the group home to allow children to freely manage their allowances as they choose. Group Home shall immediately terminate the use of their current system, which only allows children to access their weekly allowance when they have reached the level of "Growing". Group Home shall not use any levels of restrictions to deny children from accessing and managing their allowances as they choose.

Correction: Staff memo has been distributed advising them that all clients are allowed to have \$5,00 on their person when going to school. This has always been the case. Furthermore all LA Clients receive seven dollars from the moment they enter the program.

Please note that Aiming High operates on a level system and clients must be on the requisite level to be permitted to go on special food runs, etc. (e.g. McDonalds, Burger King, etc.)

5. All children reported that their weekly allowances at times have not been distributed on a weekly basis. All children reported that their weekly allowances have been late at least one (1) week on several occasions. A review of the weekly allowance log reflects that the children's weekly allowances have not been distributed on a weekly basis and was late on more than four (4) different occasions despite the allowances were paid by doubling up.

Recommendation: Group Home is to comply with the Master Agreement Contract for Foster Care Services, which requires the group home to provide children with an allowance on a weekly basis. Group Home shall designate a staff member to coordinate the distribution of weekly allowances in a timely manner in the absence of the administrator.

Correction: The issue of allowance distribution has been discussed with the probation monitor. Per the agreement; all clients are to sign upon receipt of their allowance. However, due to the time of allowance distribution, on occasion a client would miss the distribution time due to being on a home pass and/or allowance being picked up from the administrative office. Client would then receive and sign for their allowance upon return from his home pass. To avoid this conflict, the distribution of allowances will be changed to Friday mornings so that all clients will receive and sign for their allowance prior to going on a home pass.

6. All children reported that the group home does not provide them with a "life book" or "photo album".

Recommendation: Group Home is to comply with the Master Agreement Contract for Foster Care Services, which requires that the Group Home provide each child with a "life book" and encourages them in the assisting, creating, and updating of their life books. Group Home shall schedule regular routine "Group Home Activity" on updating the child's life books.

Correction: Prior to being assigned to the probation caseworker, Administrator was instructed by the probation caseworker that one of the clients to discontinue use of the life books because clients were using them to hold inappropriate pictures and for tagging purposes. On his site visit, the probation caseworker witnessed life books that Aiming High had available but were not in use because of the previous instructions. Administrator did not deviate from the use of the life book on his own determination. The Administrator acknowledges that he should have discussed this with DPO Lim before switching to journals. Therefore he takes full responsibility for not resuming the utilization of the life books after the issue was resolved with those particular clients.

Per this CAP, Administrator will reinstate the use of the life books. All clients will continue to be advised that using the life books for tagging and to hold inappropriate pictures is expressly prohibited. Clients will be provided with access to a house digital camera and disposal cameras to enable them to take pictures of life events.

Please see attached Life Book Agreement that will be included in the Aiming High Client Intake Packet.

# VI. <u>Personnel Records:</u>

1. No record of DOJ/CACl clearance for one (1) employee on file.

**Recommendation:** Provide proof of DOJ/CACI clearance for one (1) employee as required by the Master Agreement Contract for Foster Care Services. DOJ/CACI clearance shall be placed in the employee's personnel files and readily accessible by any contracting agencies for viewing in accordance with the Master Agreement Contract for Foster Care Services.

Correction: Proof provided and has been placed in the employee's file.

2. No record of Initial Health Screening clearance for two (2) employees on file.

**Recommendation:** Provide proof of Initial Health Screening clearance for one (1) employee as required by the Master Agreement Contract for Foster Care Services. Initial Health Screening clearance shall be placed in staff's personnel files and readily accessible by any contracting agencies for viewing in accordance with the Master Agreement Contract for Foster Care Services.

Correction: Proof provided and has been placed in the employee's files.

3. No current and valid CPR cards for three (3) employees.

**Recommendation:** Provide proof of valid CPR training cards for three (30 employees as required by the Master Agreement Contract for Foster Care Services. Valid CPR cards shall be placed in employee's personnel files and readily accessible by any contracting agencies for viewing in accordance with the Master Agreement Contract for Foster Care Services.

Correction: Proof provided and has been placed in the employee's files.

4. No current and valid First-Aid card for one (1) employee.

**Recommendation:** Provide proof of valid First-Aid card for one (1) employeef as required by the Master Agreement Contract for Foster Care Services. Valid First-Aid card shall be placed in employee's personnel files and readily accessible by any contracting agencies for viewing in accordance with the Master Agreement Contract for Foster Care Services.

Correction: Proof provided and has been placed in the employee's files.