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December 29, 2015

To: Supervisor Hilda L. Solis, Chair
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From: Philip L. Browning
Director

PLB by Diane Iglesias

CAREPROVIDER GROUP HOME QUALITY ASSURANCE REVIEW

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a Quality Assurance Review (QAR) of Careprovider Group Home (the Group Home) in September 2014. The Group Home has two sites located in the Fifth Supervisorial District and provides services to DCFS placed children and youth. According to the Group Home's program statement, its purpose is "to provide a safe environment for all children in our care where they can achieve a feeling of self-worth, an appreciation of community, and a respect for culture, family and each other."

The QAR looked at the status of the placed children's safety, permanency and well-being during the most recent 30 days and the Group Home's practices and services over the most recent 90 days. The Group Home scored at or above the minimum acceptable score in 6 of 9 focus areas: Permanency, Placement Stability, Engagement, Service Needs, Assessment & Linkages, and Tracking & Adjustment. OHCMD noted opportunities for improved performance in the focus areas of Safety, Visitation and Teamwork.

The Group Home provided the attached approved Quality Improvement Plan (QIP) addressing the recommendations noted in this report. In April 2015, OHCMD quality assurance reviewer met with the Group Home to discuss results of the QAR and to provide technical support to address methods for improvement in the areas of Safety, Visitation and Teamwork.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:EM:KR:rds

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Sandra Feldman, Chief Executive Officer, Careprovider Group Home
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Leonora Scott, Regional Manager, Community Care Licensing Division

CAREPROVIDER GROUP HOME
QUALITY ASSURANCE REVIEW (QAR)
FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The Out-of-Home Care Management Division (OHCMD) conducted a Quality Assurance Review (QAR) of Careprovider Group Home (the Group Home) in September 2014. The purpose of the QAR is to assess the Group Home's service delivery and to ensure that the Group Home is providing children with quality care and services in a safe environment, which includes physical care, social and emotional support, education and workforce readiness, and other services to protect and enhance their growth and development.

The QAR is an in-depth case review and interview process designed to assess how children and their families are benefiting from services received and how well the services are working. The QAR utilizes a six-point rating scale as a *yardstick* for measuring the situation observed in specific focus areas. The QAR assessed the following focus areas:

Status Indicators:

- Safety
- Permanency
- Placement Stability
- Visitation

Practice Indicators:

- Engagement
- Service Needs
- Assessment & Linkages
- Teamwork
- Tracking & Adjustment

For Status Indicators, the reviewer focuses on the child's functioning during the most recent 30 day period and for Practice Indicators, the reviewer focuses on the Group Home's service delivery during the most recent 90 day period.

For the purpose of this QAR, interviews were conducted with three focus children, three Department of Children and Family Services (DCFS) Children's Social Workers (CSWs), one Group Home child care worker, one Group Home facility manager and one Group Home administrator.

At the time of the QAR, the focus children's average number of placements was three, their overall average length of placement was 37 months and their average age was 19. The focus children were randomly selected. None of the focus children were included as part of the sample for the 2014-2015 Contract Compliance Review.

QAR SCORING

The Group Home received a score for each focus area based on information gathered from on-site visits, agency file reviews, DCFS court reports and updated case plans, and interviews with the Group Home staff, DCFS CSWs, service providers, and the children. The minimum acceptable score is 6 in the area of Safety and 5 in all remaining areas.

Focus Area	Minimum Acceptable Score	FFA QAR Score	FFA QAR Rating
Safety - The degree to which the Group Home ensures that the child is free of abuse, neglect, and exploitation by others in his/her placement and other settings.	6	5	**Good Safety Status** - The focus children are generally and substantially avoiding behaviors that cause harm to self, others, or the community and are generally free from abuse, neglect, exploitation, and/or intimidation in placement.
Permanency - The degree to which the child is living with caregivers, who are likely to remain in this role until the child reaches adulthood, or the child is in the process of returning home or transitioning to a permanent home and the child, the Group Home staff, caregivers and DCFS CSW, supports the plan.	5	5	**Good Status** - The focus children reside in a group home and DCFS permanency goals are adequately supported by the group home. The focus children are in a setting which will endure until they reach maturity.
Placement Stability - The degree to which the Group Home ensures that the child's daily living, learning, and work arrangements are stable and free from risk of disruptions and known risks are being managed to achieve stability and reduce the probability of future disruption.	5	5	**Good Stability** - The focus children have substantial stability in placement and school settings with no disruptions. The focus children have established positive relationships with primary caregivers, key adult supporters, and peers at the group home. Only age appropriate changes in school settings are expected within the next six months.
Visitation - The degree to which the Group Home staff support important connections being maintained through appropriate visitation.	5	4	**Acceptable Maintenance of Family Connections** - Fairly effective family connections are being, at least minimally maintained, for most significant family members/Non-Related Extended Family Members (NREFMs) through appropriate visits and other connecting strategies.

Focus Area	Minimum Acceptable Score	FFA QAR Score	FFA QAR Rating
Engagement - The degree to which the Group Home staff working with the child, biological family, extended family and other team members for the purpose of building a genuine, trusting and collaborative working relationship with the ability to focus on the child's strengths and needs.	5	5	**Good Engagement Efforts** - To a strong degree, a rapport has been developed, such that the Group Home staff, DCFS CSWs, and the child feel heard and respected.
Service Needs - The degree to which the Group Home staff involved with the child, work toward ensuring the child's needs are met and identified services are being implemented and supported and are specifically tailored to meet the child's unique needs.	5	5	**Good Supports & Services** - A good and substantial array of supports and services substantially matches intervention strategies identified in the case plan. The services are generally helping the focus children make progress toward planned outcomes. A usually dependable combination of informal and formal supports and services is available, appropriate, used, and seen as generally satisfactory.
Assessment & Linkages - The degree to which the Group Home staff involved with the child and family understand the child's strengths, needs, preferences, and underlying issues and services are regularly assessed to ensure progress is being made toward case plan goals.	5	5	**Good Assessment and Understanding** - The focus children's functioning and support systems are generally understood. Information necessary to understand the child's strengths, needs, and preferences is frequently updated. Present strengths, risks, and underlying needs requiring intervention or supports are substantially recognized and understood.
Teamwork - The degree to which the "right people" for the child and family, have formed a working team that meets, talks, and makes plans together.	5	4	**Minimally Adequate to Fair Teamwork** - The team contains some of the important supporters and decision makers in the child's life, including informal supports. The team has formed a minimally adequate to fair working system that meets, talks, and/or plans together; at least one face-to-face team meeting has been held to develop plans.

Focus Area	Minimum Acceptable Score	FFA QAR Score	FFA QAR Rating
Tracking & Adjustment - The degree, to which the Group Home staff who is involved with the child and family is carefully tracking the progress that the child is making, changing family circumstances, attainment of goals and planned outcomes.	5	5	**Good Tracking and Adjustment Process -** Intervention strategies, supports, and services being provided to the children are generally responsive to changing conditions. Frequent monitoring, tracking, and communication of the focus children's status and service results to the team are occurring. Generally, successful adaptations are based on a basic knowledge of what things are working and not working for the focus children.

STATUS INDICATORS
(Measured over last 30 days)

What's Working Now (Score/Narrative of Strengths for Focus Area)

Permanency (5 Good Status)

Permanency Overview: The Group Home provided substantial permanence for the focus children and fully supported the permanency goals established by DCFS. The permanency goal for all three focus children is Permanent Planned Living Arrangement (PPLA) with a specific plan of transitioning out of care.

The Group Home provides services geared specifically toward achieving independence. The Group Home offers Youth Development Services (YDS) until they are discharged and prepares older children to transition to transitional housing. Each of the focus children received YDS. The Group Home has monthly meetings with the DCFS CSWs, the Group Home therapist and the Group Home administrator to discuss permanency goals for the focus children.

One of the focus children reported that he wants to stay at the Group Home until he obtains transitional housing or is placed in a regional center home. The Group Home is making plans to enroll him in an occupational program with the regional center to assist him in developing viable job skills. The second focus child is being referred to the regional center for housing. The third focus child successfully found placement in a regional center home. Each of the focus children indicated that the Group Home supported their permanency plans.

Placement Stability (5 Good Stability)

Placement Stability Overview: The Group Home provided substantial placement stability for the focus children and is licensed to accommodate Non-Minor Dependents. The Group Home ensures that the staff obtain training to deal with the focus children's needs and assist them in recognizing problematic behaviors that may confront the children in the Group Home. The Group Home allows

newly hired staff to shadow more experienced staff until the Group Home feels confident that the new staff is capable of working on their own.

All of the focus children indicated that they were happy to be at the Group Home; and that the Group Home's staff was always available to them when they needed help. The focus children have resided at the Group Home for an average of three years. The focus children have not had any placement disruptions during the past 30 days.

One of the focus child's plans was to move into a regional center home. The Group Home made every effort to keep her until an appropriate regional center placement was found and accompanied her to be interviewed for a regional center placement. In January 2015, the focus child was transitioned into a regional center home and the Group Home was credited with assisting in helping her to successfully transition.

What's Not Working Now and Why (Score/Narrative of Opportunities for Improvement)

Safety (5 Good Safety Status)

Safety Overview: The Group Home provided good safety status for each of the focus children. The three focus children reported that the Group Home is a safe place to live. The focus children have not shown any suicidal behavior or exhibited any self-injurious behavior in the past 30 days. The DCFS CSWs and the Group Home staff indicated that the Group Home provides a safe living environment. The Group Home administrator makes an effort to talk with each placed child and inquire as to any issues they need her to address.

The Group Home administrator assures the placed children that the Group Home is safe, and encourages them to inform her if they feel threatened at any time. Each of the focus children reported that they feel safe in the Group Home. The DCFS CSWs for each of the focus children meet with their children monthly to check on them and ensure their safety. The DCFS CSWs did not express any safety concerns about the Group Home's ability to keep the focus children safe.

Although the Group Home provided a substantially safe living environment for the focus children and ensured protective strategies were in place, they fell below standards in the area of Safety. The Group Home submitted three Special Incident Reports (SIRs) via the I-Track database system during the last 30 days that involved children who ran away from the Group Home, which posed a child safety risk. None of the focus children were involved in these SIRs.

Visitation (4 Acceptable Maintenance of Family Connections)

Visitation Overview: The Group Home has maintained acceptable family connections, considering the focus children's relationships with their families. The focus children do not have regularly scheduled visits with any relatives. One of the focus children only sees his mother and siblings when they have juvenile dependency court hearings. The second focus child has very few visits with her mother and maternal aunt. An older sibling that the focus child used to visit has moved out of the area. The third focus child does not have any family visits. This focus child does spend time with his Court Appointed Special Advocates (CASA) and also with a volunteer who helps him with music.

The Group Home staff keeps logs regarding visits for every child. The Group Home staff encourages one of the focus children to keep in contact with her mother and sister; however, there is no formalized plan for the focus children that do not have regular family contact or visits, as the Group Home does not seek mentors or make attempts to establish lifelong connections for the focus children.

PRACTICE INDICATORS

(Measured over last 90 days)

What's Working Now (Score/Narrative of Strengths for Focus Area)

Engagement (5 Good Engagement Efforts)

Engagement Overview: The Group Home maintained good engagement efforts. The Group Home uses consistent efforts to engage key people and ensures that the focus children have regular contact with their DCFS CSWs. The Group Home is in regular contact with the DCFS CSWs and provides information about the children's progress, behaviors, concerns, medical visits, family visits and updates on the overall status of the children.

The Group Home has developed and maintained good rapport between the DCFS CSWs, Group Home staff and the focus children. The Group Home makes consistent and good efforts to engage the focus children and key people in decisions that are being made for the focus children. Two of the focus children reported feeling supported by the Group Home staff and that their concerns are being heard by the staff. The third focus child stated that she talks with two staff members and they are her main support at the group home. She also stated that she meets with staff from the regional center and her DCFS CSW monthly.

The Group Home therapist stated that she calls the DCFS CSWs regularly even during her sessions with the focus children. She sets up meetings with the children and goes to the DCFS CSWs office when necessary. The Group Home therapist encourages the focus children to call their DCFS CSWs when something exciting happens in their lives.

The DCFS CSWs reported that they meet face-to-face with the focus children monthly. They speak with the Group Home administrator, child care staff, and the public health nurse frequently by telephone or face-to-face when visiting the home. The DCFS CSWs indicate that they keep all parties informed of any updates and changes with the focus children.

Service Needs (5 Good Supports & Services)

Service Needs Overview: The Group Home social worker collaborates with the DCFS CSWs, the child, and other Group Home staff to develop Needs and Services Plan (NSP) goals for the children. The Group Home social worker develops individual behavior contracts with placed children to help them progress toward achieving their NSP goals. The Group Home ensures that the children attend regular weekly counseling sessions and group therapy. The Group Home provides various services to the children, including weekly therapy, tutoring services and anger management training. Transportation is provided by the Group Home for all off-site therapeutic, medical and dental services.

The Group Home also provided transportation for one of the focus children to go on job interviews. The focus children reported that they are satisfied with the services they are receiving.

The YDS services the Group Home provides and assists the focus children in working toward self-sufficiency. The YDS services for the focus children include budgeting, laundry, filling out job applications, mock interviews and how to use public transportation.

Two of the focus children are on psychotropic medication and see the psychiatrist monthly. One has weekly counseling and participates in individual therapy once a week and group therapy twice a month. With the help of the Group Home he was able to enroll in community college to pursue an Associate of Arts degree. The second focus child has frequent medical check-ups. The Group Home facility manager or a child care worker transports him to the hospital for all the visits. The Group Home's clinical therapist and administrative staff have been involved in collaborating with his school concerning his health care needs, mental health services and addressing his education plan. The focus child successfully completed a computer literacy program at the Group Home in May 2014.

The Group Home provided the third focus child with assistance in her job search and her search for a regional center home where she subsequently transitioned. The Group Home was very supportive and worked closely with the regional center, including accompanying the focus child to visits with prospective families for interviews, which eventually led to her finding housing through the regional center.

Assessment & Linkages (5 Good Assessments and Understanding)

Assessment & Linkages Overview: The Group Home provides good assessment and generally understands the focus children's needs. The focus children meet with the Group Home Licensed Clinical Social Worker (LCSW) weekly to assess their progress and to evaluate their needs. They meet monthly with the Group Home's psychiatrist for medication management. The Group Home determines if the focus children are making progress towards their NSP goals by observing if there is a reduction in incidents and acting out behaviors that the focus children exhibit.

The three focus children expressed a positive relationship with the Group Home staff. The focus children participate in Team Decision Making Conference and Resource Management Process (RMP) meetings to assess and evaluate their needs. The Group Home recognizes the focus children's strengths and utilizes various methods to support them. The focus children are allowed and encouraged to participate in extracurricular activities. One of the focus children loves music, and was given an electric guitar as a gift from the Group Home. When the second focus child was working toward finding a regional center home, the Group Home provided constant support and encouragement.

Tracking & Adjustment (5 Good Tracking & Adjustment Process)

Tracking & Adjustment Overview: The Group Home provides good tracking and adjustment for all of the focus children. The Group Home tracks the focus child's progress by having weekly individual meetings with the focus children, and bi-monthly group meetings to address the focus children's concerns. In addition to the weekly meeting with the focus children, the Group Home LCSW has quarterly meetings with the focus children to address NSP and case plan goals and their progress

toward achieving their goals and makes adjustments to their goals accordingly. The Group Home staff members document the children's behavior, visits, outings, and progress in log books, and sign-in/out sheets. The Group Home uses a target behavior rewards system to reward children for positive behavior and progress, as well as to take privileges away from residents who fail to follow the rules and guidelines of the Group Home.

The Group Home social worker adjusts goals and request adjustments to services to meet the children's needs as necessary. Intervention strategies and services appear to be helpful. In reviewing the past 90 days, the Group Home social worker has documented clear progress in the behavior of the focus children.

The Group Home staff members provide the monitoring, tracking, and communication of the focus children's status and service results to the other key people in the children's lives such as the DCFS CSW, the Group Home staff, the school psychiatrist, CASA workers and regional center workers. The Group Home executive director is actively involved with the placed children and has one-on-one meetings with the children placed in the Group Home so she is aware of their progress and concerns, and is able to adjust the services they are receiving, as needed.

What's Not Working Now and Why (Score/Narrative of Opportunities for Improvement)

Teamwork (4 Minimally Adequate to Fair Teamwork)

Teamwork Overview: The Group Home provided minimally adequate to fair teamwork. Team Decision Making and Resource Management Process meetings are held by the DCFS CSWs in collaboration with the Group Home administrator and Group Home LCSW. Although the Group Home is familiar with the team members for each focus child, the Group Home does not involve all of the team in face-to-face meetings. The focus children are also aware of the people who are in their lives and part of their support team. However, there appears to be little emphasis on regular meetings of all the team members together with the placed children.

One of the focus children has been at the Group Home for four years and can only recall one meeting where he met with all the people he considered to be his team members. The other two focus children have never had a meeting with all of their team members. However, each of the focus children have regular meetings with some of the people on their team including the Group Home LCSW, their DCFS CSW, the Group Home facility manager, and at least one Group Home child care worker. Actions taken by the Group Home reflect a fairly coherent pattern of effective teamwork of most of the people the focus children identified as being a part of their team.

One DCFS CSW who was interviewed reported that she would request the meetings for key people to get together to address concerns regarding the focus child. Another DCFS CSW reported that meetings were arranged by the DCFS CSW and the Group Home administrator. Some meetings would include Group Home staff, the DCFS CSW and the child. The third DCFS CSW said that she has had team meetings that included the Group Home administrator and the child, and that she was the person who requested the meeting. Although the Group Home had team meetings, it appeared that these meetings were not occurring in a consistent manner, and all of the key parties were not always involved.

NEXT STEPS TO SUSTAIN SUCCESS AND OVERCOME CURRENT CHALLENGES

In September 2014, OHCMD provided the Group Home with technical support related to findings indicated in the 2013-2014 contract compliance review. Technical support was provided on requirements of special incident reporting; ensuring full compliance with Title 22 regulations; being free of Community Care Licensing citations; keeping the exterior, grounds, common quarters and children's bedrooms well maintained at all times; documenting efforts to obtain the County CSW's authorization to implement the NSP; and ensure that all employees receive health screening/tuberculosis clearances in a timely manner.

In April 2015, the quality assurance team met with the Group Home to discuss the results of the QAR and to provide the Group Home with technical support to address methods for improvement in the areas of Safety, Visitation and Teamwork. The Group Home submitted the attached QIP. OHCMD Quality Assurance staff will continue to provide ongoing technical support, training, and consultation to assist the Group Home in implementing their QIP.

Care Provider Children & Family Services
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281 E. Workman Ave., Suite 203, Covina CA 91723

April 28, 2015

Korliss Robinson
Children Services Administrator II
Out of Home Care Management Division,
Quality Assurance Section

Dear Korliss,

This in reference to the meeting we had with Mr. Barrow on 4/2/15. The three areas of concern were:

1) Safety
2) Visitation
3) Teamwork

In regards to Safety: our focus is to reduce AWOLS from placement.

Recently, the issue has been with one particular client awoling multiple times. That particular resident based on his other behaviors became a danger to self and others and was no longer a good fit for the agency. The Facility Managers and Child Care staff have been retrained on how to write incident reports as well as how to include the client's attire and direction they left in to assist the police in their search. The Facility Manager and the Child Care staff will continue to assess and speak with the clients prior to AWOL when possible in hopes they will make a better choice. The therapist will continue to speak on the dangers of AWOL in one to one therapeutic sessions with the client who awoled. The Director will meet with the Facility Managers to discuss an individualized plan when a client AWOLs to try and discover the trigger so that we may work on goals surrounding it to avoid future AWOLS. The Director also will be visiting the local police department to see how our agency and the dept. can collaborate to be more effective.

In regards to Visitation: we are trying to increase our connecting strategies.

Careprovider 's Facility Managers and Child Care Counselors will also look for additional resources for those clients who do not have family members. Ideas will be discussed with the Director and the rest of the team during bi-weekly staff meetings. Ex: Facility manager will look for resource such as Big Brother/Big Sister to locate mentors and then attach those mentors to existing clients. Our LCSW therapist will continue to discuss other family member possibilities during therapy and then let management know if they are a viable option or not.

We realize Family Reunification is the goal and if that is not a possibility we will continue to coordinate efforts regarding Independent Living Skills.

Our LCSW therapist just concluded a Life Skills course two hours per week over a 6 month time frame. Many of our residents attended 13th Annual Community Job Fair & Resource Expo. One resident, is attending an ROP program while he waits for college enrollment. Another resident is also enrolled in the ROP program and gets weekly tutoring. In the earlier part of the year a mentor came twice a month to assist one of the resident's with his music by working on soundtracks. In addition, he has a CASA worker who comes once a month to spend time with him. Counselors are working with the residents with their daily ILP plan and support the tutor when he comes once a week. Child care counselors have also taken them to YMCA for recreational courses. Just recently the girls were transported by the child care counselors and went to an empowerment conference as well as an "anti-bullying" play. Currently the Facility Manager is trying to find funding to send two of our girls to cosmetology classes. She has put in a call to the county worker to see if there is any Title 1 funding or any other funds to assist us in this matter.

In regards to Teamwork: this in regards to improvement for the "right people" to be meeting regarding the treatment plans of each resident.

Careprovider has implemented a 1-2-3 method. The Facility manager and or the therapist will be emailing the county workers three separate times and tracking their responses. If no response is given we have the emails and then print them out and add to the client's file. In addition, the facility manager will continue to call the workers as well as contact their supervisors when needed.

Careprovider also wants to increase teamwork by using technology to our advantage. Ex: The Facility manager will begin doing more conference calls so parents/workers/etc. can still provide input if they are unable to physically attend the meeting. We will hold meetings on a quarterly basis and more often as necessary. The LCSW therapist, the Facility Manager, the CASA worker (if there is one), the TBS worker (if there is one), the Child Care Counselor, the Resident, the County worker and the family member associated to the case will all discuss the treatment plan and the future ideas for the success of the child.

Our focus is to continue to provide the best care and best resources and think outside the box. The Facility managers are also instructed to look for more recreational resources for the clients so they make exercise their bodies as well as their brain. Child care staff will transport to wherever is necessary and motivate clients as best as they can.

If you have any further questions, please let us know how we can assist.

The implementation plan for each level discussed, Safety plan, Visitation Plan and Teamwork Plan will officially begin Monday May 11, 2015.

Thank you,

Sandra Feldman

Sandra Feldman/ Executive Director
SFeldman@careprovider.org