



County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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PHILIP L. BROWNING
Director

January 14, 2016

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

From: Philip L. Browning
Director

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BOURNE INC. 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 Bourne Inc. Group Home (the Group Home) in March 2015. The Group Home has two licensed offices located in the Fifth Supervisorial District in the County of Los Angeles. The offices provide services to the County of Los Angeles DCFS placed children and Probation youth. According to the Group Home's program statement, its stated mission is, "to operate 'house model' group homes that provide protective physical environments for children with emotional and physical problems, sibling groups, probation-supervised youth, parenting teens and youth transitioning to independent living."

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 7 of 9 focus areas: Safety, Permanency, Placement Stability, Visitation, Service Needs, Assessment & Linkages, and Tracking & Adjustment. OHCMD noted opportunities for improved performance in the focus areas of Engagement and Teamwork.

The Group Home provided the attached approved Quality Improvement Plan addressing the recommendations noted in this report. In August 2015, OHCMD quality assurance reviewer met with the Group Home to discuss results of the QAR and to provide the Group Home with technical support to address methods for improvement in the area of Engagement 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
Timothy Tucker, Chief Executive Officer, Bourne Inc.
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Lenora Scott, Regional Manager, Community Care Licensing Division

"To Enrich Lives Through Effective and Caring Service"

**BOURNE INC. 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 Bourne Inc. Group Home (the Group Home) in March 2015. 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), and four Group Home staff members.

At the time of the QAR, the placed children's average number of placements was nine, their overall average length of placement was 14 months and their average age was 16. 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	GH QAR Score	GH 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	6	Optimal Safety Status - The focus children are consistently avoiding behaviors that cause harm to self, others, or the community. The focus children may have had related history, diagnoses, or behavior presentations in the past but have not presented risk behaviors over the past 30 days.
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 staff, caregivers and CSW, supports the plan.	5	5	Good Status - Focus children have substantial permanence. The focus children live in a family setting that the children, Group Home staff, caregivers, caseworker, and team members have confidence will endure lifelong.
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 settings and enjoy positive and enduring relationships with primary caregivers, key adult supporters, and peers. There is no history of instability over the past 12 months and little likelihood of future disruption.
Visitation - The degree to which the Group Home staff support important connections being maintained through appropriate visitation.	5	5	Substantially Acceptable Maintenance of Visitation & Connections - Generally effective connections are being excellently maintained for all significant family/Non-Related Extended Family Members (NREFM) through appropriate visits and other connecting strategies. All appropriate family members/NREFM have regular and, where appropriate, increasingly frequent visits.

Focus Area	Minimum Acceptable Score	GH QAR Score	GH QAR Rating
<p>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.</p>	5	4	<p>Minimally Adequate to Fair Engagement Efforts - To a minimally adequate degree, a rapport has been developed, such that the Group Home staff, DCFS CSW, and the focus children feel heard and respected. Reports indicate that minimally adequate to fair, consistent efforts are being used by the Group Home staff as necessary to find and engage the focus children and other key people.</p>
<p>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.</p>	5	5	<p>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.</p>
<p>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.</p>	5	5	<p>Good Assessment and Understanding - The focus children are functioning and support systems are generally understood. Information necessary to understand the focus children's strengths, needs, and preferences is frequently updated. Present strengths, risks, and underlying needs requiring intervention or supports are substantially recognized and well understood.</p>

Focus Area	Minimum Acceptable Score	GH QAR Score	GH QAR Rating
<p>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.</p>	5	4	<p>Minimally Adequate to Fair Teamwork - The team contains some of the important supporters and decision makers in the focus children's life, including informal supports. The team has formed a dependable working system that meets, talks, and plans together; face-to-face family team meetings are held periodically and at critical points to develop plans. The team has good and necessary skills, knowledge, and abilities necessary to organize effective services with children of this complexity and cultural background.</p>
<p>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.</p>	5	5	<p>Good Tracking and Adjustment Process - Intervention strategies, supports, and services being provided to the focus children are generally responsive to changing conditions. Frequent monitoring, tracking, and communication of 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.</p>

STATUS INDICATORS
(Measured over last 30 days)

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

Safety (6 Optimal Status)

Safety Overview: The Group Home's safety status was optimal. The Group Home administration makes sure that the focus children feel safe in placement. The focus children were free from harm in their daily settings and reported that they feel safe in placement. All three focus children stated that the Group Home staff makes them feel safe and that there was always adult supervision.

The DCFS CSWs reported no concerns regarding the focus children's safety at the Group Home. Two of the DCFS CSWs reported that the Group Home openly shares information and discuss

Special Incident Reports (SIRs) over the phone if necessary. The third focus child's DCFS CSW reported that there have not been any safety concerns since the child has been in placement.

The Group Home did not submit any SIRs through the I-Track database during the past 30 days. The Group Home had no substantiated investigations from the Out-of-Home Care Investigations Section (OHCIS).

Permanency (5 Good Status)

Permanency Overview: The Group Home has established and maintained good permanency efforts with the focus children and key parties. The Group Home demonstrates efforts to assist the focus children in achieving permanency and ensures that the treatment team is aware of each focus child's permanency plan. The Group Home ensures that meetings are held regularly to discuss permanency options for each of the focus children; the meetings include the Group Home social worker, and the mental health providers. The Group Home also ensures the focus children are maintaining contact with their family members and other important people in their lives to ensure these bonds are maintained and are lifelong.

Planned Permanent Living Arrangement is the plan for all three of the focus children. The Group Home works to ensure the focus children are prepared for self-sufficiency. The first focus child has been referred to Independent Living Program (ILP) services. The Group Home supports this plan by encouraging the child to ride the bus and learn some independent living skills in the Group Home such as budgeting and meal preparation. This focus child reported that the Group Home has helped him learn how to save money and to cook.

The second focus child is also receiving ILP services in the Group Home to help prepare him for independent living. He wants to participate in the Supervised Independent Living Placement (SILP) program with a relative. This focus child reported that the Group Home staff has been assisting him with looking for an apartment, finding a job and enrolling into college. He stated that he felt that the Group Home supports him in that they allow him to work and give him some freedom when he is following the rules in placement.

The third focus child's plan is to move into an Intensive Treatment Foster Care (ITFC) home. The DCFS CSW for this focus child reported that she communicates with the Group Home about different ITFC homes that are interested in the child. This focus child reported that he has learned some independent skills including cooking and managing money through the Group Home.

Placement Stability (5 Good Stability)

Placement Stability Overview: All of the focus children have substantial stability in placement and in their school settings. The focus children's placements have been stable with no placement or school disruptions.

One of the ways in which the Group Home tries to maintain stabilized placements is to engage the DCFS CSWs by assessing each focus child's needs prior to placement to ensure a good match. Strategies utilized by the Group Home include completing case reviews maintaining an active and routine schedule for the children, and discussing any behavioral issues with the DCFS CSW as they arise.

All three of the DCFS CSWs reported that the Group Home staff will discuss any concerns regarding the focus children that arise with them. One of the DCFS CSWs reported meeting with the Group Home staff to discuss behavior concerns for the first focus child. The second focus child's DCFS CSW reported that the child has had some behavioral concerns and that the Group Home has been patient while the DCFS CSW looks for a more suitable placement for him. The DCFS CSW for the third focus child reported that the child has been stable in the Group Home and has not had any behavioral issues.

The focus children are adapting well in their current placement. The focus children reported feeling safe, comfortable and respected. There have been no major issues or concerns. The first and third focus children reported that the Group Home staff ensures that all of their needs are met, and they have formed good, supportive relationships. However, the second and third focus children reported not having enough freedom to leave or return to the Group Home when they desire.

Visitation (5 Substantially Acceptable Maintenance of Visitation & Connections)

Visitation Overview: The Group Home makes efforts to ensure that effective family connections are maintained for the focus children. The Group Home works to support the visitation plan set by DCFS and utilizes several methods to accomplish this. When needed, the Group Home provides transportation for the placed children's visits with family members. Monitoring the placed children's family visits is another method that the Group Home utilizes to show their support for visitation. The Group Home reschedules visits that are missed and when visitation is not possible, the Group Home encourages the children to maintain contact through telephone, email or social media. In some circumstances when visitation does not occur, the Group Home staff will engage the placed children in activities of interest, in order to give special attention to the children who do not have visits.

The first focus child has monitored visits with his mother and father weekly. He reported that when visits are not possible that he is encouraged by the Group Home staff to keep in contact with his family by telephone. The DCFS CSW stated that the Group Home helps with transportation for the focus child's visits with his family. She stated that the Group Home staff consults with her regarding the scheduling of visits.

The other two focus children have inconsistent visits with their family members, but are encouraged by the Group Home staff to maintain contact with important people in their lives. The second focus child sometimes has unmonitored visits with his educational rights holder (former foster mother), who he refers to as his stepmother. He stated that he has frequent phone communication with his stepmother and is encouraged to contact her when visitation is not occurring. The DCFS CSW stated that the child's educational liaison is a mentor and role model for the child and that the child is able to visit with her on holidays and some weekends.

The third focus child has unmonitored visits with his grandmother but due to a strain on their relationship, visits have not been consistent. He reported being encouraged to maintain contact with family, but the child was conflicted on maintaining communication with his grandmother. The DCFS CSW indicated that she lost contact with the grandmother and that she is trying to find a mentorship program for the child.

PRACTICE INDICATORS
(Measured over last 90 days)

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

Service Needs (5 Good Supports & Services)

Service Needs Overview: The Group Home provides the focus children with an array of services and extracurricular activities to help the focus children make progress toward their planned outcomes. All of the focus children receive therapeutic services to assist them with any mental health issues that may arise. The focus children also participate in tutoring to enhance their academic functioning. All placed children in the Group Home have access to in-home therapy, tutoring at the Group Home, weekly drug treatment, and a gym membership.

All three of the focus children reported that the services they receive from the Group Home are meeting their needs. The focus children's basic medical needs are being addressed and they all reported that they are able to choose the extracurricular activities that they want to participate in. Each of the focus children chose to participate in different sports that they enjoy. The first focus child participates in basketball; the second focus child has participated in both baseball and football; and the third focus child is participating in football. The third focus child added that he feels comfortable talking to his DCFS CSW about his needs.

According to the Group Home administrator, the Group Home staff modifies goals to fit the placed children and meet as a team to discuss the needs of the child. They also instill a reward process to get the children to buy into following the rules and standards of the Group Home. The Group Home staff reported having treatment team meetings weekly with the therapist, the Group Home staff, and Group Home administrators.

All three DCFS CSWs reported not being involved in the assessment for services that are needed for the focus children. However, the DCFS CSWs for the first and second focus child stated that the Group Home is good about following through with any needed resources or referrals for services.

Assessment & Linkages (5 Good Assessments and Understanding)

Assessment & Linkages Overview: The Group Home generally understands the focus children's functioning and support systems. The services being provided such as therapy, tutoring, substance abuse treatment, and access to physical activities are geared to assist the focus children toward making progress and improving their well-being. All three of the focus children participate in individual therapy weekly.

All of the DCFS CSWs indicated that they are made aware of how the focus children are progressing through reading the Needs and Services Plan (NSP), through phone calls from the Group Home staff and during their monthly visits to meet with the focus children.

Tracking & Adjustment (5 Good Tracking & Adjustment Process)

Tracking & Adjustment Overview: The Group Home's intervention strategies, supports, and services provided generally reflect the focus children's needs. Regular monitoring and tracking by the

Group Home staff of the focus children's status is communicated with two of the DCFS CSWs. The Group Home staff and therapist work together to make any needed adjustments.

The Group Home staff and therapist review the focus children's status on a weekly basis. The Group Home staff meet to discuss the focus children's progress towards meeting their NSP goals. The NSPs are developed by the Group Home social worker in conjunction with the therapist assigned to the focus children. The Group Home staff uses a log to track and summarize how the children are doing. In addition, the staff communicates with one another via telephone before shift changes to discuss any concerns. The therapist also reviews the logs, which are discussed during team meetings with the Group Home staff. When necessary the Group Home staff will make adjustments to treatment goals that are not being met by the placed children.

The first focus child reported that he talks to his therapist about his progress toward his goals; he further stated that he feels the Group Home staff address his concerns. The second focus child reported that when things are not going right he is encouraged to make improvements and that the treatment goals are changed with his input. The third focus child reported that changes are made when he is not progressing toward his treatment goals.

The DCFS CSWs reported that goals and the focus children's progress towards those goals are reviewed quarterly on the NSP and that the Group Home will contact the DCFS CSWs as needed to discuss the progress of the focus children.

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

Engagement (4 Minimally Adequate to Fair Engagement Efforts)

Engagement Overview: The Group Home has established and maintained minimally adequate engagement efforts with the focus children and the DCFS CSWs. According to the Group Home administrator, the Group Home staff is available to talk with the DCFS CSWs during monthly visits to the Group Home. The Group Home staff has staff meetings within the Group Home to discuss the focus children's functioning and that information is shared with the DCFS CSW.

The first focus child reported that he could talk with any of the Group Home staff and address any concerns or needs. The second focus child reported that he did not feel that he could tell staff about any concerns due to the staff being related to one another; he felt that if he had concerns, it would not make a difference because of their familial ties. The third focus child reported feeling that he could rely on his DCFS CSW, but not the Group Home staff because he did not feel comfortable speaking to them about any concerns.

The focus children in general reported that they were heard and respected by the Group Home staff. The DCFS CSW for the second focus child reported ongoing communication with the Group Home staff about any of the focus child's needs or concerns. However, the first and third focus children's DCFS CSWs reported not being included in assessment of the child's ongoing progress with the staff or implementation of the NSP goals. The third focus child's DCFS CSW also reported little to no communication with the Group Home staff.

Teamwork (4 Minimally Adequate to Fair Teamwork)

Teamwork Overview: The Group Home involves some of the important supporters and decision makers in the focus children's lives. The team consists of the Group Home administrator, the Group Home social worker, and therapist. The Group Home staff communicates with the DCFS CSW as needed or during the monthly visits to the Group Home. The DCFS CSWs are not included in team meetings arranged by the Group Home.

Each team has formed a fair working system that has communication between some of the team members who work collaboratively and contribute to the development of the focus children's case plans. However, this work is often done without input from the whole team, as there are no face-to-face meetings which include all members. It appears that efforts are not being made by the Group Home to pull together a team meeting, which includes all key parties such as the focus child, family and DCFS CSW.

All of the focus children reported participating in group meetings with the staff and other children in the Group Home. One of the focus children reported not speaking during those meetings because he does not feel comfortable. None of the focus children or their DCFS CSWs reported having participated in any face-to-face team meetings with all of the key parties present.

NEXT STEPS TO SUSTAIN SUCCESS AND OVERCOME CURRENT CHALLENGES

In March 2015, OHCMD provided the Group Home with technical support related to findings indicated in the 2014-2015 Contract Compliance Review, which consisted of the following: maintaining vehicles in good repair, maintaining the facility in good repair and the Group Home having expired foods.

In August 2015, quality assurance reviewer met with the Group Home to discuss results of the QAR and to provide the Group Home with technical support to address methods for improvement in the areas of Engagement and Teamwork. The Group Home submitted the attached Quality Improvement Plan (QIP). OHCMD quality assurance staff will continue to provide ongoing technical support, training, and consultation to assist the Group Home in implementing their QIP.

Bourne Incorporated
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"Making a Difference"

October 28, 2015

QUALITY IMPROVEMENT PLAN (QIP) FOR QUALITY ASSURANCE REVIEW (QAR) CONDUCTED MARCH 2015

Engagement (4 Minimally Adequate to Fair Engagement Efforts)

Bourne Inc. Group Home will continue to contact all children's DCFS CSW on a monthly basis to give a monthly status report on child. These calls will provide the DCFS CSW with the child's progress/decline in reference to the child's stated NSP goals.

Beginning on November 1, 2015 any feedback/suggestions from the child's DCFS CSW will be noted and reported to Group Home Social Worker and the child's therapist. These contact calls will continue to be made by the 5th of each month. In the event that the child's DCFS CSW cannot be reached a detailed message will be left requesting a call back to discuss monthly update.

Bourne Inc. Group Home will also continue to have a weekly Monday Group Meeting with all children. This meeting is an open forum in which each child is given the opportunity to express any concerns, make any requests and report any problems. In the event that a child is not comfortable speaking in a group setting the Group Home's Executive Director/Administrator will make himself available to the child on a one-on-one basis to hear & address any concerns/requests/problems.

Beginning on November 1, 2015 all concerns/requests/problems will be noted and the Executive Director/Administrator will address them with appropriate staff/team members during the weekly Treatment Team Meetings and monthly staff meetings.

Teamwork (4 Minimally Adequate to Fair Teamwork)

Bourne Inc. Group Home will continue to administer weekly Treatment Team Meetings comprised of the Group Home Administrator, Group Home Social Worker and the children's therapist.

Beginning November 1, 2015, two weeks prior to the child's quarterly NSP becoming due; the child, the child's DCFS CSW and any family members that are actively involved

in the child's treatment plan, will be invited to attend the weekly Treatment Team Meeting to discuss and give input the into the child's Quarterly NSP. This will give all parties involved the opportunity to participate and staff informed of the child's case plan.

If you have any questions, please contact me on 626.797.9196 office or 626.786.1056 cell.

Sincerely,

A handwritten signature in black ink, appearing to read 'Tim Tucker', written in a cursive style.

Tim Tucker
Executive Director