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February 12, 2016

To: Supervisor Hilda L. Solis, Chair
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From: Philip L. Browning
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TURMONT HOME FOR BOYS AND GIRLS 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 Turmont Home for Boys and Girls Group Home (the Group Home) in April 2015. The Group Home has two sites; one site located in the Second Supervisorial District and another in the Fifth Supervisorial District. The Group Home provides services to the County of Los Angeles DCFS foster children and youth. According to the Group Home's program statement, its stated mission is, "to provide 24 hour, non-medical care and supervision to residents placed by the Department of Children and Family Services."

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 all 9 focus areas: Safety, Permanency, Placement Stability, Visitation, Engagement, Service Needs, Assessment & Linkages, Teamwork and Tracking & Adjustment.

The Group Home did not require a Quality Improvement Plan, as the Group Home scored at or above the minimum acceptable score in all focus areas of the QAR. In October 2015, OHCMD Quality Assurance Reviewer met with the Group Home to discuss the results of the QAR.

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
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TURMONT HOME FOR BOYS AND GIRLS 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 Turmont Home for Boys and Girls Group Home (the Group Home) in April 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 three Group Home staff members.

At the time of the QAR, the focus children's average number of placements was three, their overall average length of placement was 15 months and their average age was 17. 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 childen. 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 optimally and consistently avoiding behaviors that cause harm to self, others, or the community and are 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 CSW, support the plan.	5	5	**Good Status** – The focus children have substantial permanence. The focus children live in a family setting that the children, Group Home staff, 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 and school settings with only planned changes. The focus children enjoy positive and enduring relationships with primary caregivers, key adult supporters, and peers.
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 family connections are being sought for all significant family/Non-Related Extended Family Members through appropriate visits and other connecting strategies. All appropriate family/Non-Related Extended Family Members have regular visits.

Focus Area	Minimum Acceptable Score	GH QAR Score	GH 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 CSW, and the focus children feel heard and respected. Reports indicate that good, consistent efforts are being used by the Group Home staff as necessary to find and engage the focus children, caregivers and other key people.
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.
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. Knowledge necessary to understand the focus children's strengths, needs, and preferences is frequently updated.
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	5	**Good Teamwork** - The team contains most of the important supporters and decision makers in the focus children's lives, including informal supporters. The team has formed a good, dependable working system that meets, talks, and plans together.

Focus Area	Minimum Acceptable Score	GH QAR Score	GH 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 focus children are generally responsive and appropriate to changing conditions. 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)

Safety (6 Optimal Safety Status)

Safety Overview: The Group Home's safety status was optimal. The Group Home's Program Director, Group Home therapist, and staff ensure that the focus children feel safe in placement. The Group Home Director stated that the Group Home follows all of their safety procedures and protocols. He stated they conduct monthly trainings with the Group Home staff on topics such as how to handle emergencies with placed children and safety drills for the facilities. The Group Home Program Director also stated that he meets with his staff monthly to discuss any issues that could arise in the facilities. He stated that he ensures that the Group Home staffing ratio per their program statement is followed and there is direct supervision for the focus children at all times, inside the Group Home and on outings. The Group Home supervisors stated that their staff developed a rapport with the focus children and they interview each focus child privately to discuss concerns and any other issues the focus children may want to discuss.

The focus children were free from harm in their daily settings. The focus children reported that they feel safe and comfortable in their Group Home. The focus children stated that the Group Home staff are always around and make themselves available to talk with them. The focus children stated that the Group Home staff work to keep the Group Home a safe place to live. The Group Home supervisors reported that the Group Home Program Director provides them with ongoing training, which includes how to address current issues that arise in the Group Home, as well as required annual training. The DCFS CSWs reported that the Group Home therapist and staff communicates and promptly shares with them information regarding any behavior by the focus children that may lead to a safety concern if the issue is not addressed immediately.

The Group Home did not report any Special Incident Reports (SIRs) via the I-Track database within the last 30 days. According to the Out-of-Home Care Investigations Section, there were no substantiated referrals or open investigations for the Group Home during this period.

Permanency (5 Good Status)

Permanency Overview: The Group Home provides substantial permanence for the focus children. The Group Home staff works with the focus children, the focus children's parents when possible and with the DCFS CSWs to assist them in the development and determination of the permanent plans for the focus children. The Group Home Program Director stated that the Group Home staff supports the permanent plans of the focus children. During weekly meetings led by the Group Home therapist with the participation of Group Home staff, the permanency plans, goals, and progress focus children are making toward their goals are discussed and evaluated. The Group Home therapist maintains communication by phone and e-mail with the focus children's DCFS CSWs to discuss case plan goals. In addition, the Group Home therapist meets with the focus children's DCFS CSWs during their scheduled monthly visit to the Group Home to discuss the focus children's individual permanency plan.

The DCFS CSWs reported that the Group Home staff ensures that everyone is on the same page in regards to the best interests of the focus children and assists the focus children in maintaining family ties. The DCFS CSWs reported that they are in communication with the Group Home therapist to ensure that the Group Home staff is following DCFS recommendations and supporting the permanency plan for the focus children. The Group Home staff and DCFS CSW have been working together on a consistent basis to ensure that the permanency plans are achieved. The Group Home staff provides independent living skills training on a weekly basis; these skills are then combined with the weekly chores that each focus child is assigned. Some of the skills being taught include cooking, laundry, shopping, and budgeting. The Group Home staff also assists the focus children in securing their California Identification cards.

The permanency plan for all three focus children is Permanent Planned Living Arrangement. The first focus child stated that he would transition to the extended foster care program after he graduates from high school and that he would like to live with his grandmother. The second focus child also plans to transition to the extended foster care program to live with his adult sister or previous legal guardian. The third focus child stated he would transition to extended foster care and live with his stepmother and adult sister.

Placement Stability (5 Good Stability)

Placement Stability Overview: The focus children have had substantial stability in the Group Home and their school settings. The focus children's placements have been stable with no placement or school disruptions over the past 30 days. The Group Home Program Director and therapist work with the DCFS CSWs to assess each focus child's needs prior to placement to ensure a good match is made with their Group Home. Some of the strategies utilized by the Group Home include weekly meetings in which the Group Home staff reviews the focus children's placement history and prior trauma to assist them in recognizing and responding to any behaviors that may have contributed to previous placement disruptions. The Group Home provides staff with ongoing training to assist them in helping the focus children adjust to placement.

Each of the focus children expressed a feeling that they could speak with any of the Group Home staff members to discuss a need or concern. All three of the focus children stated they want to remain in this Group Home until they transition out of care. The third focus child added that he wanted to remain in the Group Home until he transitions out of care because he would receive more financial

assistance, housing assistance, and services if he remained in placement. The focus children reported that this Group Home is meeting all of their needs, and they have formed a good, supportive relationship with the Group Home staff.

The DCFS CSWs stated they were pleased with the work of the Group Home and had no concerns about the level of care their focus children were receiving while placed there.

Visitation (5 Substantially Acceptable Maintenance of Visitation & Connections)

Visitation Overview: The Group Home Program Director stated that at the time of placement they discuss the visitation plan with the DCFS CSWs. The Group Home Program Director stated that they work with the DCFS CSWs and focus children to ensure that the court visitation orders are met. The Group Home provides transportation and monitors visits when needed. The Group Home and DCFS CSWs work together to encourage and assist the focus children in maintaining connections with their family. The Group Home therapist keeps logs regarding visitation, and if visits are missed, the visits are re-scheduled timely. The DCFS CSWs indicated that the Group Home makes great efforts to encourage and ensure the focus children's visits are successful.

All three focus children have regular weekly visits with their family members. The first focus child has unmonitored visits with his grandmother. His grandmother provides transportation for the visits. The focus child stated that he enjoys his visits with his grandmother.

The second focus child has unmonitored weekend visitation with his adult sister whenever she schedules the visit with the Group Home. The focus child stated that he enjoys spending time with his sister during the visits.

The third focus child has unmonitored weekend visits with his stepmother and adult stepsister. The focus child's adult stepsister provides transportation for the visits. The focus child stated he enjoys the visits with his stepmother and his stepsister. The focus child also has monitored weekly visits with his mother. His Wraparound social worker arranges visits with his mother. The focus child's Wraparound social worker provides transportation for his visits with his mother. The focus child stated that his visits with his mother go well and that he enjoys the visits. The focus child stated that he keeps in regular contact with his mother via his cell phone.

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 has established and maintained strong engagement efforts with key parties including the DCFS CSWs, the focus children and their family members. The Group Home works to make certain that rapport has been developed among the key parties. The Group Home ensures regular telephone contact and monthly face-to-face contacts with the DCFS CSWs occur.

Each focus child reported that their concerns and needs were heard and respected by all of the Group Home staff. All of the focus children reported that they are able to discuss their issues and concerns with their family members, Group Home staff, Group Home therapist and DCFS CSWs, without any problems. All parties interviewed are in agreement that reasonable and ongoing efforts have been made by the Group Home to engage all team members. The focus children stated that they meet weekly with the Group Home therapist to discuss their concerns privately and in group therapy. The Group Home therapist stated she meets at least once a month with the DCFS CSWs and the focus children and as often as needed if a crisis arises. The Group Home therapist meets weekly with the Program Director and his staff to discuss goals and the progress being made by the focus children.

Service Needs (5 Good Supports & Services)

Service Needs Overview: The Group Home provides the focus children with an array of supports and services to help the focus children make progress toward their planned outcomes. The Group Home Program Director stated that their therapists provide individual and group therapy. The Group Home works toward ensuring the focus children's needs are met and that identified services are being implemented as stated in their case plan.

The focus children's DCFS CSWs report that they are contacted by the Group Home therapist and are asked to provide input in regards to the needs of the focus children.

All three focus children are receiving weekly individual and group therapy provided by the Group Home therapists. According to the Group Home therapist, the focus children attend individual therapy and participate in group therapy. The Group Home provides each of the focus children with services comparable to independent living skills. All of the focus children reported that their needs are being met.

The first focus child stated he participates in weekly individual therapy and group therapy to discuss his case plan and concerns. The focus child participates eagerly. He stated that individual therapy and group therapy have been helpful. The focus child reported that he is doing very well in school, and he is attending an after-school program, where he receives tutoring services to enhance his academic performance.

The second focus child also participates in weekly individual therapy and group therapy. The focus child stated the individual therapy and group therapy are helpful. The focus child reported that he is doing well in school, and he is attending an after-school program, where he receives tutoring services to work on passing the second part of the high school exit examination.

The third focus child is receiving weekly individual therapy and group therapy at the Group Home. The focus child stated to his DCFS CSW that he really enjoys meeting with his Group Home therapist because it helps him "get things off his chest". The focus child also receives Wraparound services weekly. In addition, he attends a drug treatment program at least three times a week. His therapist reports that he has been attending his drug treatment meetings and is doing well. The Group Home supervisor reported that the focus child fully participates in his treatment program, but struggles with returning to the Group Home directly from school. The Group Home supervisor and his DCFS CSW

have met with the focus child to discuss following the Group Home rules, which includes returning to the Group Home directly after school.

Assessment & Linkages (5 Good Assessments and Understanding)

Assessment & Linkages Overview: The Group Home therapist has a good understanding of the focus children's functioning and support systems. The Group Home therapist collaborated with the focus children's DCFS CSWs to decide what services would be provided after the initial pre-placement and ongoing assessments are completed. Formal and informal techniques are used to determine the strengths and the underlying needs of the focus children.

The team members for each of the focus children appear to be attuned to the focus children's strengths and needs. The Group Home ensures the necessary supports are available to assist the focus children in addressing their underlying needs related to child abuse and neglect.

Teamwork (5 Good Teamwork)

Teamwork Overview: The Group Home involved all of the important supporters and decision makers in the focus children's lives. The team consists of the DCFS CSW, Group Home therapist, Group Home Program Director, focus children's family members, and the focus children. The team has formed an excellent, dependable working system that has ongoing discussions and works collaboratively. The Group Home's practice is to hold regular team meetings and include most of the key members in the decision-making, including the DCFS CSWs, the Group Home staff, focus children and their biological parents, family members and extended family members to discuss and provide updates on the focus children's progress.

The first focus child stated he participates in team meetings on a regular basis with his DCFS CSW, the Group Home therapist, family members and other service providers. The second focus child stated that he participates in team meetings with the Group Home therapist and DCFS CSW. His legal guardians have been invited to participate in team meetings; however, they declined the invitation to participate. The third focus child stated that he participates in team meetings on a regular basis with the DCFS CSW, the Group Home therapist, and other service providers. The focus child's mother participates in the team meetings by telephone.

The DCFS CSWs reported that they maintain regular contact with the Group Home therapist to coordinate any meetings. The DCFS CSWs reported that they continuously team in order to meet the best needs of the focus children. The DCFS CSWs reported that they receive the Needs and Services Plans (NSPs) quarterly, and that they are invited to the team meetings held by the Group Home on behalf of the focus children.

Tracking & Adjustment (5 Good Tracking & Adjustment Process)

Tracking & Adjustment Overview: The Group Home staff ensured that intervention strategies, supports and services being provided to the focus children were generally responsive to changing conditions. The Group Home tracks each focus child's progress through regular team meetings. The frequency of the meetings is dependent upon the needs of the focus children or any concerns that

may arise. The team communicates to ensure the resources in place are helping the focus children achieve treatment goals, and when progress is not made, the team modifies the goals.

The Group Home therapist, in collaboration with the focus children, focus children's parents, the Group Home staff, and DCFS CSWs review and modify the goals as necessary. The Group Home therapist is the key person who tracks how the focus children are doing. The Group Home therapist coordinates, and communicates with all the other key people for the focus children.

The DCFS CSWs maintain regular contact with the Group Home therapist and the focus children to ensure that any necessary adjustments to the NSP goals are made and that they are involved in making any modifications to the NSPs and case plan. The DCFS CSWs reported that if the treatment goals are not sufficient, the goals are modified.

For example, Group Home staff was tracking the third focus child's disruptive behavior at school, skipping classes, and his failure to return to the Group Home directly after school. The focus child informed a Group Home staff member that he had a substance abuse problem. This was reported to the Group Home therapist and was subsequently addressed with the focus child by the Group Home therapist and his DCFS CSW. The focus child was enrolled in a substance abuse program. As a result, the focus child's behavior began to improve at school and at the Group Home.

NEXT STEPS TO SUSTAIN SUCCESS AND OVERCOME CURRENT CHALLENGES

In April 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: discussion of timely reporting of SIRs; reducing Community Care Licensing Division violations; documenting contacts on NSPs; ensuring staff have timely criminal background checks; and timely health screening for newly hired employees.

In October 2015, the 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 maintain the current level of care and services. The Group Home met the minimum acceptable level in all focus areas; therefore, no Quality Improvement Plan is required.