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Director

County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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March 16, 2016

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

FIELDS COMPREHENSIVE YOUTH SERVICES GROUP HOME CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of Fields Comprehensive Youth Services Group Home (the Group Home) in May 2015. The Group Home has two sites located in San Bernardino County. Both sites provide services to County of Los Angeles DCFS placed children, Probation foster youth, as well as children from other counties. According to the Group Home's Program Statement, its stated purpose is "to provide a safe, nurturing, structured living environment for adolescents in need of a group home placement."

The Group Home has two sites and is licensed to serve a total capacity of 12 boys, ages 13 through 17. At the time of the review, the Group Home served four DCFS placed children. The children's average length of placement was six months and their average age was 16.

SUMMARY

During CAD's Contract Compliance Review, the interviewed children generally reported: feeling safe at the Group Home, having been provided with good care and appropriate services, being comfortable in their environment and treated with respect and dignity.

The Group Home was in full compliance with 8 of 9 applicable areas of our Contract Compliance Review: Licensure/Contract Requirements; Facility and Environment; Educational and Workforce Readiness; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records. The area of Psychotropic Medication was not applicable as the sampled children were not prescribed psychotropic medication at the time of the review.

CAD noted deficiencies in the area of Maintenance of Required Documentation and Service Delivery, related to the Group Home not obtaining the County Children's Social Worker's (CSW's) authorization to implement a Needs and Services Plan and not documenting monthly contacts to the County CSW.

Attached are the details of CAD's review.

REVIEW OF REPORT

On June 16, 2015, Patricia Kirkpatrick, DCFS CAD and Kirk Barrow, Out-of-Home Care Management Division, held an Exit Conference with the Group Home representative, Towana L. Bryant, Supervisor and Facility Manager.

The Group Home's representative was in agreement with the review findings and recommendations, was receptive to implementing systemic changes to improve the Group Home's compliance with regulatory standards and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

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

The Group Home provided the attached approved compliance CAP addressing the recommendations noted in this report.

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

PLB:EM:LTI:pk

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Calvin Remington, Interim Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Arby E. Fields, Executive Director, Fields Comprehensive Youth Services
Leonora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

FIELDS COMPREHENSIVE YOUTH SERVICES GROUP HOME
CONTRACT COMPLIANCE REVIEW SUMMARY

License # 366402086
Rate Classification Level: 12

License # 366407015
Rate Classification Level: 12

	Contract Compliance Review	**Findings: May 2015**
I	**Licensure/Contract Requirements** (9 Elements) 1. Timely Notification for Child's Relocation 2. Transportation Needs Met 3. Vehicle Maintained In Good Repair 4. Timely, Cross-Reported SIRs 5. Disaster Drills Conducted & Logs Maintained 6. Runaway Procedures 7. Comprehensive Monetary and Clothing Allowance Logs Maintained 8. Detailed Sign-In/Out Logs for Placed Children 9. CCL Complaints on Safety/Plant Deficiencies	Full Compliance (All)
II	**Facility and Environment** (5 Elements) 1. Exterior Well Maintained 2. Common Areas Well Maintained 3. Children's Bedrooms Well Maintained 4. Sufficient Recreational Equipment/Educational Resources 5. Adequate Perishable and Non-Perishable Foods	Full Compliance (All)
III	**Maintenance of Required Documentation and Service Delivery** (10 Elements) 1. Child Population Consistent with Capacity and Program Statement 2. County Children's Social Worker's Authorization to Implement NSPs 3. NSPs Implemented and Discussed with Staff 4. Children Progressing Toward Meeting NSP Case Goals 5. Therapeutic Services Received 6. Recommended Assessment/Evaluations Implemented 7. County Children's Social Workers Monthly Contacts Documented 8. Children Assisted in Maintaining Important Relationships 9. Development of Timely, Comprehensive Initial NSPs with Child's Participation 10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation	1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed 8. Full Compliance 9. Full Compliance 10. Full Compliance

IV	**Educational and Workforce Readiness** (5 Elements) 1. Children Enrolled in School Within Three School Days 2. GH Ensured Children Attended School and Facilitated in Meeting Their Educational Goals 3. Current Report Cards/Progress Reports Maintained 4. Children's Academic Performance and/or Attendance Increased 5. GH Encouraged Children's Participation in YDS or Equivalent Services and Vocational Programs	Full Compliance (All)
V	**Health and Medical Needs** (4 Elements) 1. Initial Medical Exams Conducted Timely 2. Follow-Up Medical Exams Conducted Timely 3. Initial Dental Exams Conducted Timely 4. Follow-Up Dental Exams Conducted Timely	Full Compliance (All)
VI	**Psychotropic Medication** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	Not Applicable (All)
VII	**Personal Rights and Social/Emotional Well-Being** (13 Elements) 1. Children Informed of Group Home's Policies and Procedures 2. Children Feel Safe 3. Appropriate Staffing and Supervision 4. GH's Efforts to provide Nutritious Meals and Snacks 5. Staff Treat Children with Respect and Dignity 6. Appropriate Rewards and Discipline System 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend or Not Attend Religious Services/Activities 9. Children's Reasonable Chores 10. Children Informed About Their Medication and Right to Refuse Medication 11. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 12. Children Given Opportunities to Plan Activities in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)	Full Compliance (All)

	13. Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)	
VIII	**Personal Needs/Survival and Economic Well-Being** (7 Elements) 1. $50 Clothing Allowance 2. Adequate Quantity and Quality of Clothing Inventory 3. Children Involved in the Selection of Their Clothing 4. Provision of Clean Towels and Adequate Ethnic Personal Care Items 5. Minimum Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement and Assistance with Life Book/Photo Album	Full Compliance (All)
IX	**Discharged Children** (3 Elements) 1. Children Discharged According to Permanency Plan 2. Children Made Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement	Full Compliance (All)
X	**Personnel Records** (7 Elements) 1. FBI, DOJ, and CACI Submitted Timely 2. Signed Criminal Background Statement Timely 3. Education/Experience Requirement 4. Employee Health Screening/TB Clearances Timely 5. Valid Driver's License 6. Signed Copies of Group Home Policies and Procedures 7. All Required Training	Full Compliance (All)

FIELDS COMPREHENSIVE YOUTH SERVICES GROUP HOME
CONTRACT COMPLIANCE REVIEW
FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The following report is based on a "point in time" visit. This compliance report addresses findings noted during the May 2015 review. The purpose of this review was to assess Fields Comprehensive Youth Services Group Home's (the Group Home's) compliance with its County contract and State regulations and included a review of the Group Home's program statement as well as, administrative internal policies and procedures. The compliance review covered the following 10 areas:

- Licensure/Contract Requirements,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Educational and Workforce Readiness,
- Health and Medical Needs,
- Psychotropic Medication,
- Personal Rights and Social Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, four placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed the four children and reviewed the children's case files to assess the care and services received. Additionally, three discharged children's files were reviewed to assess the Group Home's compliance with permanency efforts. At the time of the review, the placed children were not prescribed psychotropic medication.

CAD reviewed five staff files for compliance with Title 22 regulations and County contract requirements and conducted site visits to assess the quality of care and supervision provided.

CONTRACTUAL COMPLIANCE

CAD found the following area to be out of compliance:

Maintenance of Required Documentation and Service Delivery

- County Children's Social Worker's (CSW's) authorization to implement a Needs and Services Plan (NSP) was not obtained.

For one updated NSP only one attempt to obtain the County CSW's authorization to implement the NSP was documented.

At the Exit Conference, the Group Home representative was reminded that three documented attempts are required to obtain the County CSW's authorization to implement the NSPs. The Group Home representative stated that the supervising facility manager will now be responsible for following up with the therapist and facility managers to ensure that there are at least three documented attempts to obtain the County CSW's authorization to implement the NSP.

- Group Home's monthly contacts with County CSW were not documented.

For one child there was no documentation of any contact between the Group Home and the County CSW for the month of February 2015.

At the exit conference, the Group Home representative stated that the supervising facility manager will be reviewing the Group Home's communication forms to ensure all communication with County CSWs is properly documented, including attempts to communicate with the County CSW. If staff is unable to contact the County CSW the supervising facility manager will contact the County CSW's supervisor and document the communication.

Recommendations:

The Group Home's management shall ensure that:

1. The County CSW's authorization to implement all NSPs is obtained.

2. The Group Home's monthly contacts with County CSWs are documented.

PRIOR YEAR FOLLOW-UP FROM DCFS CAD GROUP HOME CONTRACT COMPLIANCE REVIEW

CAD's last compliance report dated October 10, 2014, identified seven recommendations.

Results:

Based on CAD's follow-up, the Group Home fully implemented 6 of 7 recommendations for which they were to ensure that:

- SIRs are submitted in accordance with SIR reporting guidelines.

- Children's monetary and clothing allowance logs are well maintained.

- Detailed sign-in/sign-out logs for placed children are maintained.

- Children's bedrooms and bedding are well maintained.

- All employee files are well maintained and include current copies of the driver's licenses.

- All employees receive all the required training.

The Group Home did not fully implement one prior recommendation for which it was to ensure that:

- Staff documents all attempts to contact the County CSW, including the date, time of day and method of contact with corresponding number or email address in the case files.

Recommendation:

3. The outstanding recommendation from the Fiscal Year 2013-2014 report dated October 10, 2014, which is noted in this report as recommendation 2 is fully implemented.

At the Exit Conference, the Group Home representative expressed the desire to remain in compliance with all Title 22 regulations and contractual requirements. CAD will continue to assess the implementation of the recommendations during the next review. Out-of-Home Care Management Division will provide ongoing support and technical assistance prior to the next report.

Revised Corrective Action Plans for Contract Compliance
County of Los Angeles Department of Children and Family Services

September 28, 2015

III. Maintenance of Required Documentation and Service Delivered

#16 Did the group home obtain or document efforts to obtain the County Worker's authorization to implement the Needs & Services Plan? (Well-being) For one minor updated NSP due 3/23/15 was mailed to CSW on 3/23/15, but CSW had not yet signed at the time of the review and there were no further documentation of efforts.
Future plan to ensure all NSP are signed by CSW/PO, and/or efforts to confirm receipt and CSW/PO signature and authorization to implement the NSP are well documented

Corrective Action Plan:
Supervising Facility Manager and /or therapist will communicate to County Worker (CSW/PO) in writing to ensure we are on the same page reviewing the NSPs and ensure signatures are being completed timely. All efforts to obtain authorization to implement the NSPs and/or to obtain appropriate signatures will be well documented via email, certified mail and/or fax transmittal, verbal communications will be documented as well

- Plan to prevent reoccurrence: The Supervising Facility Manager will follow up therapist and facility managers monthly to confirm due dates of NSPs and contact with CSW/POs to make sure everyone one the same page; and that the NSPs are being reviewed by minor, CSW/PO, therapist and facility manager and everyone in agreement with the implementation and all appropriate signatures are being obtained.
- Person responsible for implementing the corrective action: Therapist, Supervising Facility Manager and/or Executive Director.
- Person responsible for monitoring to ensure corrective action remains implemented: Supervisor and/or the Facility Managers.

#21 Are County workers contacted monthly by the GH and are the contacts appropriately documented in the case file? (Well-being)
In one minor's file, there was no documentation of CSW contact for February 2015.
Future plan to ensure there are regular consistent contact with the minor's CSW and/or attempts to contact are well documented in the minor's case file and/or the Quarterly Reports

Corrective Action Plan:

Facility Managers will document all communication and attempts to communicate with the minor's CSW on individual communication sheets and/or County Worker forms which will be kept in minor's case file. Supervising Facility Manager will review County Social Worker forms and individual communication sheets in the case file monthly at Administrative meetings to ensure Facility Managers and staff are utilizing supporting forms already in place to document phones calls, on grounds visits, emails, and any other correspondents as well as attempted contact with the minor's CSW. If efforts to contact CSW/PO continues to be a problem, the Supervising Manager will contact the immediate supervisor to address concerns with communication and efforts to provide teamwork with regards with the minor's treatment program

If you have any questions regarding the above CAP for contract compliance please feel free to contact me at 909 376-4148 or Towana Bryant at 909 945-1318

Respectfully Submitted,

Arby E. Fields
Executive Director