County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
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March 11, 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

HATHAWAY-SYCAMORES CHILD AND FAMILY SERVICES GROUP HOME CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of Hathaway-Sycamores Child and Family Services Group Home (the Group Home) in May 2015. The Group Home has a licensed site located in the Fifth Supervisorial District and provides services to the County of Los Angeles DCFS placed children and Probation placed youth. According to the Group Home's program statement, its stated purpose is, "cultivating hope and resilience to enrich the well-being of children, adults, families and communities."

At the time of the review, the Group Home served 26 DCFS placed children and eight Probation placed youth. The Group Home maintains a 48-bed site licensed to serve a capacity of 48 boys, ages six through 18. The placed youth's overall average length of placement was seven months and their average age was 15.

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 9 of 10 sections of CAD's Contract Compliance Review: Licensure/Contract Requirements; Facility and Environment; Educational and Workforce Readiness; Health and Medical Needs; Psychotropic Medications; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; Discharged Children and Personnel Records.

CAD noted a deficiency in the area of: Maintenance of Required Documentation and Service Delivery, related to County Children's Social Workers' monthly contacts not being properly documented.

Attached are the details of our review.

REVIEW OF REPORT

On July 30, 2015, Tony Curry, DCFS CAD, and Dario Villamarin, Out-of-Home Care Management Division held an Exit Conference with the Group Home representatives: Joe Ford, Vice President; Mia Williams, Director of Residential Based Services; and Nick Ryan, Assistant Vice President.

The Group Home representatives agreed with the review finding and recommendation, were receptive to implementing systemic changes to improve compliance with regulatory standards and were in agreement with addressing the noted deficiency 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 CAP addressing the recommendation noted in this report. CAD conducted a follow-up visit on November 4, 2015, to verify implementation of the CAP.

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

PLB:EM:LTI:tc

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Calvin Remington, Interim Chief Probation Officer
Public Information Office
Sybil Brand Commission
Audit Committee
Debra K. Manners, President and CEO Hathaway-Sycamores Child and Family Services
Lenora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

HATHAWAY-SYCAMORES CHILD AND FAMILY SERVICES GROUP HOME
CONTRACT COMPLIANCE REVIEW SUMMARY
Rate Classification Level 14
License No. 1978049071

	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. Full Compliance 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	Full Compliance (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 Chores Reasonable 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	Full Compliance (All)

	(GH, School, Community) 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. DOJ, FBI, and CACIs 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)

HATHAWAY-SYCAMORES CHILD AND FAMILY 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 Hathaway-Sycamores Child and Family Services Group Home's (the Group Home's) compliance with its County contract and with State regulations and included a review of the Group Home's program statement as well as internal administrative 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, five placed children and two Probation placed youth were selected for the sample. The Contracts Administration Division (CAD) interviewed each child and reviewed their case files to assess the care and services they 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, seven placed children were prescribed psychotropic medication. The children's case files were reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

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

CONTRACTUAL COMPLIANCE

CAD found the following area to be out of compliance:

Maintenance of Required Documentation and Service Delivery

- County Children's Social Workers' (CSWs') monthly contacts were not documented.

For one child, the County CSW contacts were not properly documented in the case file. It was noted that the County CSW contacts were missing for the months of February, March and April 2015.

At the Exit Conference, the Group Home representatives acknowledged that increased oversight of the process was warranted and stated that a Needs and Services Plan (NSP) training would be provided to staff to ensure that facilitators document all County CSW contacts in the case files.

Recommendation:

The Group Home's management shall ensure that:

1. County CSWs' monthly contacts are documented.

CAD conducted a follow-up visit on November 4, 2015, to verify that CSW contacts were being properly documented in the child's case file.

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

CAD's last compliance report dated May 20, 2015, 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:

- Comprehensive clothing allowance logs are maintained.
- County's CSW authorization to implement the NSP is obtained.
- Adequate perishable and non-perishable foods are maintained.
- Timely and comprehensive initial NSPs with the child's participation are developed.
- Timely and comprehensive updated NSPs with the child's participation are developed.
- All required training is provided.

Based on CAD's follow-up, the Group Home did not fully implement one prior recommendation for which they were to ensure that:

- County CSWs' monthly contacts are documented.

Recommendation:

2. The outstanding recommendation from the prior report which is noted in this report as recommendation 1 is fully implemented.

At the Exit Conference, the Group Home representatives expressed their desire to remain in compliance with Title 22 regulations and contract requirements. The Group Home made efforts to utilize information from the CAD Contract Compliance Review to strive towards greater overall compliance. CAD will continue to assess implementation of the recommendations noted during our next Contract Compliance Review. The Out-of-Home Care Management Division will provide ongoing support and technical assistance prior to the next review.

Anthony Curry
Contract Compliance Section
3530 Wilshire Blvd., 4th Floor
Los Angeles, CA 90010

August 21, 2015

Dear Mr. Curry,

This letter is written per your request for Hathaway-Sycamores to provide a Corrective Action Plan (CAP) to address the issue of ensuring documentation deficiencies Maintenance of Required Documentation and Service Delivery (NSP) from occurring in the future.

The Plan of Correction is as follows:

The Contract Compliance Section noted a concern in the area of Maintenance of Required Documentation and Service Delivery relating to Needs and Services Plans (NSP's). It was noted that one NSP was missing monthly contact dates for the County Social Worker (CSW).

We have scheduled NSP training for September 9, 2015, to ensure that Facilitators are reminded to include quarterly CSW contacts in this document. The process is for the Facilitator to properly track contact dates with CSWs and document them in quarterly NSP reports. The Supervisor will increase the oversight in this area and will address upcoming NSP due dates in individual supervision.

Thank you for your time and consideration. Please contact me if you have any questions.

Sincerely,

Mia Williams
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