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March 8, 2016

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

HERITAGE 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 Heritage Group Home (the Group Home) in June 2015. The Group Home has five licensed sites located in the First Supervisorial District. The Group Home provides services to the County of Los Angeles DCFS placed children and youth. According to the Group Home's program statement, its stated mission is, "to enable each child to develop the necessary interpersonal skills and self-esteem to successfully function as a self-sufficient and productive person in society."

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. On August 20, 2015, OHCMD Quality Assurance reviewer met with the Group Home to discuss 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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Sandra Heyer, Executive Director, Heritage Group Home
Lajuannah Hills, Regional Manager, Community Care Licensing Division
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HERITAGE 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 Heritage Group Home (the Group Home) in June 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 placed children's average number of placements was eight, their overall average length of placement was six 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 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 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 DCFS CSW, support the plan.	5	5	**Good Status** - The focus children reside in a group home, and DCFS permanency goals are being fully supported by the group home. The focus children are in a setting which the Group Home staff, caseworker and team members have confidence will endure until 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	6	**Optimal Stability** - The focus children have optimal 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. Only age-appropriate changes are expected in school settings.
Visitation - The degree to which the Group Home 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 (NREFMs) through appropriate visits and other connecting strategies.

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 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 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.
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 supports. The team has formed a good, 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.

Focus Area	Minimum Acceptable Score	GH QAR Score	GH QAR Rating
Tracking & Adjustment - The degree to which the Group Home 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 to changing conditions. Frequent monitoring, tracking, and communication of 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)

Safety (6 Optimal Safety Status)

Safety Overview: The Group Home's safety status was optimal. The Group Home has procedures in place to ensure child safety. Per the Group Home program administrator, she and her staff interview children upon placement to assess their safety concerns, culture, and personal preferences. The Group Home program administrator stated that the focus children are also evaluated by the Group Home's therapist to assist in determining the most appropriate placement within one of the Group Home's five sites. The Group Home's behavioral specialist reviews the focus children's cases and works with the Group Home staff to match the focus children to the most appropriate roommate. Additionally, per the Group Home administrator, the focus children's history is shared with the Group Home staff to assist in providing a safe placement for placed children. The focus children reported feeling safe at all times while in their Group Home. The focus children are free from harm in their placements and other daily settings, including at school and in the community.

The Group Home submitted 11 Special Incident Reports (SIRs) via the I-Track database in the last 30 days. The Group Home adhered to policies and procedures for submitting SIRs. All SIRs were submitted timely and properly cross-reported to all required parties. Two SIRs involved the third focus child's absence without leave (AWOL)ing. The first SIR indicated that the focus child went on a community pass with her friend and did not return to the Group Home at the designated time. The second SIR involved the focus child AWOLing from school with a friend. The Group Home staff followed policies and procedures and reported the incidents to the DCFS Child Protection Hotline and law enforcement. Additionally, in an attempt to reduce the focus child's AWOLing behavior, she was counseled by the Group Home behavioral specialist and they discussed making better choices when she feels anxious.

The DCFS CSWs did not report any concerns regarding the focus children's safety at the Group Home. The DCFS CSWs reported that the Group Home staff shares information from the weekly meetings by e-mail and they discuss SIRs over the phone if necessary.

The Out-of-Home Care Investigations Section did not have any substantiated referrals for the Group Home within the last 30 days.

Permanency (5 Good Status)

Permanency Overview: The Group Home has established and maintained good permanency efforts for the focus children. The Group Home staff demonstrates efforts to assist the focus children in achieving permanency and ensures that the treatment team is aware of each focus child's permanent plan and goals. The Group Home staff also ensures the focus children are maintaining contact with their family members and other important people in their lives in an effort to ensure these bonds are maintained and are lifelong.

Permanent Planned Living Arrangement is the permanency plan for all three of the focus children. The Group Home works to ensure the focus children are prepared for self-sufficiency by assisting the first focus child with enrolling in college, obtaining his California driver's license, birth certificate, and applying for transitional housing. The second focus child was assisted in obtaining vocational training and conducting jobs searches. The third focus child was provided assistance in completing job applications, creating resumes, and conducting job searches. The Group Home also provided her with a clothing allowance to purchase clothing for job interviews. The Group Home provided training in independent living skills such as budgeting, use of public transportation, and meal preparation. The first focus child reported that the Group Home staff has helped him learn how to cook and save money. He stated that the Group Home staff supports him in each of his endeavors; he stated that they allow him to manage his work schedule and provide community passes which gives him a sense of freedom. The second focus child reported that he is being helped by the Group Home in developing self-sufficiency; by learning how to budget money, prepare meals, and how to fill out a job application. The third focus child stated that the Group Home is assisting her in preparing for self-sufficiency. The focus child reported that she is learning meal preparation, budgeting, and how to complete a job application.

Placement Stability (6 Optimal Stability)

Placement Stability Overview: The focus children have optimal stability in placement and positive relationships with the Group Home staff. The Group Home administrator stated that the Group Home behavioral specialist works with the focus children to address their underlying needs in order to help stabilize them in placement. The behavioral specialist works with the focus children to develop individual plans which include making good choices to decrease problematic behaviors which could lead to placement disruptions. The Group Home administrator stated when concerns arise, they invite the DCFS CSWs and the focus children to participate in Child and Family Team (CFT) meetings to assess the problematic behaviors and set new goals to stabilize placement. The Group Home administrator ensures that the staff receive monthly training and provide support to assist them in establishing positive relationships with the focus children, further ensuring permanency and stability.

The focus children expressed feeling that they could speak with any of the Group Home staff members to discuss a need or concern. The focus children reported that the Group Home is meeting all of their

needs and they have formed a good, supportive relationship with the staff. All three focus children expressed a desire to remain in their Group Home. The second focus child stated that after ten placements, this is the best Group Home he has lived in. He stated that his goal is to remain placed at this Group Home until he transitions out of care and enrolls in college.

The DCFS CSWs stated they did not have any concerns about the focus children's placement stability at the Group Home. The Group Home staff discuss issues that could lead to placement instability as they arise with each placed child. In addition, the Group Home staff meets with each DCFS CSW during their scheduled monthly visit to discuss the focus child's individual plans with placement being a part of the discussion. During weekly meetings with the Group Home behavioral specialist, Group Home managers, and Group Home staff, placement stability for the each focus child is discussed and evaluated.

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. The Group Home administrator stated that even if a placed child initially declines approved visits, the Group Home staff will continue to discuss the visitation options. When needed, the Group Home staff provides transportation for visits with family members. Monitoring family visits is another method that the Group Home staff utilizes to show their support for visitation. The Group Home staff reschedules visits that are missed and when visitation is not possible, the Group Home staff encourages the focus children to maintain contact through telephone, e-mail 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 placed children who do not have visits.

The first focus child has unmonitored visits with his aunt and sibling weekly; He reported that he enjoys the visits with his family and when visits are not possible due to his work schedule, he is encouraged by the Group Home staff to keep in contact with his family by telephone.

The second and third focus child have been inconsistent with family visits, but are encouraged by the Group Home staff to maintain contact with important people in their lives. The second focus child has unmonitored visits with his mother and adult sister who reside in a distance city. The focus child stated he enjoys his visits with his sister; however, the visits are inconsistent due to the distance between their home and the Group Home. The second focus child also keeps in weekly contact with his mother by his cell phone. The third focus child has unmonitored visits with her mother, adult sister and monitored visits with her brother. Due to the strained family relationships, visits have not been consistent.

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 developed strong rapport with and consistently engages key parties. During the interviews, all three focus children stated that they felt heard and respected by the Group Home staff. The first and second focus child stated that their relationships with the Group Home staff were supportive and helpful to them. The third focus child has had difficulty relating to and trusting the Group Home staff; however, the staff has continued to make consistent efforts to work with the focus child. The Group Home staff has put forth good efforts, such as strong communication, collaboration, and holding weekly meetings which are used to engage the focus children and their family members, DCFS CSWs, and other key people involved in the focus children's lives.

The first focus child stated that he told the Group Home staff he wanted to learn how to drive. The Group Home got permission from the focus child's DCFS CSW for him to take driving lessons. The Group Home worked with him to research and locate a driving school. The second focus child reported that the Group Home staff talks with him and listen to him. The second focus child stated that he feels he can depend on the Group Home staff. He stated that when he asked for help in finding a job they helped him complete a job search and find a training program. The focus child stated that the Group Home staff and his DCFS CSW discuss what he needs and assists him to accomplish his goals. For example, the focus child stated the Group Home helped him by obtaining a mentor who motivated him to improve his academic performance and behavior at school and at the Group Home. The third focus child stated while she does not feel comfortable yet in trusting the Group Home staff, they helped her with job searches when she told them she would like to find a job.

The Group Home staff stated that the focus children's service providers submit regular reports. The Group Home staff stated that they have regular phone contact with the service providers to discuss the well-being of the focus children. The Group Home administrator stated this information is passed on to the DCFS CSWs. The DCFS CSWs reported that the Group Home works hard to include everyone in discussions regarding the focus children's well-being.

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. The focus children receive therapeutic services to assist them with any mental health needs that may arise. The focus children receive weekly individual therapy from a community service provider, individual therapy twice a week and group therapy once a month with the Group Home therapist. The first focus child graduated from high school and plans on attending college in the Fall, he is also employed. The second and third focus child also participate in tutoring to enhance their academic functioning. The third focus child also attends substance abuse counseling twice a week.

The focus children's basic medical needs are being met. The focus children reported that the services they receive from the Group Home and community services providers are meeting their needs. The Group Home behavioral specialist works with each focus child to develop a plan to address specific problematic behaviors. The focus children's behavioral issues are also addressed in their individual and group therapy sessions by the Group Home therapist.

The Group Home case manager stated that the level system initiated by the Group Home provides the focus children with daily feedback on their progress toward case plan goals. The focus children can earn extra privileges and monetary rewards for the completion of their case plan goals. As part of the level system, the focus children are given consequences when they fail to complete case plan goals such as; daily chores, attending school, completing homework, and exhibiting positive behaviors. The consequences may result in a restriction of privileges or a reduction in community pass time.

The focus children's service providers reported that they are included by the Group Home in discussions regarding the needs of the focus children. The service providers stated that the Group Home is responsive and cooperative regarding the best interest of the focus children.

The DCFS CSWs reported that they communicate with the Group Home on a regular basis to make certain that the appropriate services are in place for the focus children.

Assessment & Linkages (5 Good Assessments and Understanding)

Assessment & Linkages Overview: The key parties involved in the focus children's lives generally understand the focus children's functioning, challenges, earlier life traumas and support systems. The Group Home behavioral specialist assesses the focus children's needs and provides interventions and strategies to assist the focus children. The services and supports are evaluated regularly in weekly case management meetings and modified as needed to ensure progress is being made toward case plan goals. The second and third focus child were assessed for educational support and the Group Home staff linked them with tutors. The Group Home staff encourages the placed children to participate in extracurricular activities at school and in the community and provided transportation as needed.

The Group Home staff determines if the children are making progress towards their Needs and Services Plan (NSP) and behavioral goals by observing if there is a reduction in incidents, occurrences and acting out behaviors exhibited by the focus children. Progress is also determined by reports from the school and community services providers along with the daily case management reports from the Group Home staff. The Group Home staff provide services required to help the focus children and support them to make their placement successful.

The DCFS CSWs indicated that they are informed of the focus children's progress through the NSPs, phone calls, and e-mails from the Group Home staff and during their monthly visits to the Group Home to meet with the focus children.

Teamwork (5 Good Teamwork)

Teamwork Overview: The Group Home involves most of the important supporters and decision makers in the focus children's lives. The team consists of the focus children and their parents, DCFS CSWs, Group Home administrator, behavioral specialist, therapist, and service providers. The Group

Home has formed a good, dependable working system that has ongoing discussions and works collaboratively in case planning with the team.

The Group Home staff and the focus children meet weekly during case management meetings to discuss any concerns. Additionally, the Group Home staff meets monthly with either the Group Home administrator or treatment team members to review and discuss the focus children's progress and make modifications as needed to their treatment plans or strategies utilized by the Group Home. The Group Home staff also maintains regular contact with the focus children's DCFS CSWs, via face-to-face contact, telephone or e-mail. The Group Home staff schedules team meetings to ensure they meet with DCFS CSWs to discuss the focus children's progress and needs. The focus children reported that they are satisfied with the teamwork demonstrated by the team members. The focus children reported that they feel they are included in the team.

The Group Home staff ensures that meetings are held regularly to address the focus children's progress. The CFT meetings and case management meetings include most of the key parties. The DCFS CSWs reported that the Group Home includes them in discussions involving the needs of the focus children and invites them to attend CFT meetings and weekly case management meetings.

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. Weekly monitoring and tracking by the Group Home staff of the focus children's status is communicated to the DCFS CSWs by phone calls, e-mails, and NSPs. The Group Home staff, behavior specialist, and therapist work together to make any needed adjustments to the focus children's goals. According to the Group Home administrator, the Group Home staff modifies goals for the focus children as needed.

During weekly meetings, the Group Home staff discusses the focus children's progress towards meeting their NSP goals. The Group Home behavioral specialist in conjunction with the focus children, family members, DCFS CSWs, Group Home administrator, service providers, and Group Home therapists develops the NSPs for the focus children. The Group Home staff uses a log to track and summarize how the children are progressing. In addition, the Group Home staff communicates with one another before each shift change to discuss any concerns. When necessary the Group Home staff will adjust 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 and 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. He also stated that the treatment goals are changed with his input. The third focus child reported that changes are made when she is not progressing toward her 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.

NEXT STEPS TO SUSTAIN SUCCESS AND OVERCOME CURRENT CHALLENGES

In July 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 compliance regarding Title 22 regulations; maintenance of the facility and grounds; review and maintenance of staff files; compliance with training requirements; review of procedures for submitting timely NSPs; and addressing concerns related to the maintenance of the vehicles used to transport the children.

In August 2015, the OHCMD Quality Assurance Reviewer met with the Group Home to discuss results of the QAR. The Group Home met the minimum acceptable score in all focus areas; therefore no Quality Improvement Plan is required. The OHCMD Quality Assurance staff will continue to provide the Group Home with ongoing technical support, training and consultation.