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July 27, 2016

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

SAND HILL 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 Sand Hill Group Home (the Group Home) in September 2015. The Group Home is a Rate Classification Level 8 and has one site located in the Second Supervisorial District. The Group Home provides services to the County of Los Angeles DCFS placed children and Probation youth. According to the Group Home's Program Statement, its stated purpose is, "to provide services to court dependent seriously emotionally disturbed and chronic runaway children."

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

In November 2015, the Group Home was placed on "Hold" due to not complying with the County contract. The Group Home failed to submit a Corrective Action Plan (CAP) that could be approved and was placed on a "Do Not Use (DNU)" status in February 2016. An Administrative Review Conference was held in March 2016, to address the DNU status and an updated CAP was requested. The Group Home did not submit a CAP and therefore, the DNU remained in place. All placed children have been

removed from the Group Home. The Group Home did not submit a Quality Improvement Plan (QIP).

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

PLB:KR
KDR:rds

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Gene Brown, Executive Director, Sand Hill Group Home
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Lenora Scott, Regional Manager, Community Care Licensing Division

SAND HILL GROUP HOME
QUALITY ASSURANCE REVIEW
FISCAL YEAR 2015-2016

SCOPE OF REVIEW

The Out-of-Home Care Management Division (OHCMD) conducted a Quality Assurance Review (QAR) of Sand Hill Group Home (the Group Home) in September 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 QAR focuses on the focus child's functioning during the most recent 30-day period and for Practice Indicators, the QAR 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 two focus children, two Department of Children and Family Services (DCFS) Children's Social Workers (CSWs) and two Group Home staff members.

At the time of the QAR, the Group Home served two DCFS placed children. The focus children's average number of placements was three, their overall average length of placement was three months and their average age was 15. The focus children were included as part of the sample for the Contract Administration Division's (CAD's) 2015-2016 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 focus children. The minimum acceptable score is 6 in the area of Safety and 5 in all remaining areas.

Focus Area	Minimum Acceptable Score	Group Home QAR Score	Group Home QAR Rating
Safety - The degree to which the Group Home staff ensures that the focus children are free of abuse, neglect and exploitation by others in his/her placement and other settings.	6	3 - Marginally Inadequate Safety Status	Protective strategies used by the Group Home staff may be somewhat limited or inconsistent in reducing risks of harm. The focus children may be exposed to somewhat elevated risks of harm in his/her placement and/or in other settings.
Permanency - The degree to which the focus children are living with caregivers, who are likely to remain in this role until the focus children reach adulthood, or the focus children are in the process of returning home or transitioning to a permanent home and the focus children, the Group Home staff, caregivers, DCFS CSWs and if applicable, Department of Probation Officers (DPOs) support the plan.	5	4 - Minimal to Fair Status	The focus children have minimally acceptable to fair permanence. The focus children live in a family setting that the focus children, Group Home staff and team members expect will endure until the focus children reach maturity.
Placement Stability - The degree to which the Group Home staff ensures that the focus children's daily living, learning and work arrangements are stable and free from risk of disruptions. Known risks are being managed to achieve stability and reduce the probability of future disruptions.	5	5 - Good Stability	The focus children have substantial stability in placement and school settings with only planned changes and no more than one disruption in either setting over the past 30 days.

Focus Area	Minimum Acceptable Score	Group Home QAR Score	Group Home QAR Rating
Visitation - The degree to which the Group Home staff support maintaining important connections with significant family members/Non-Related Extended Family Members (NREFMs) through appropriate visitation and other means.	5	5 - Substantially Acceptable Maintenance of Visitation and Connections	Generally effective family connections are being sought for all significant family members/NREFMs through appropriate visits and other connecting strategies. All appropriate family members/NREFMs have regular visits.
Engagement - The degree to which the Group Home staff working with the focus children and their family members/NREFMs and other team members for the purpose of building a genuine, trusting and collaborative working relationship with the ability to concentrate on the focus children's strengths and needs.	5	4 - Minimally Adequate to Fair Engagement Efforts	To a minimally adequate degree, a rapport has been developed, such that Group Home staff, DCFS CSWs, DPOs (if applicable) and the focus children feel heard and respected. Reports indicate minimally adequate to fair efforts are being used.
Service Needs - The degree to which the Group Home staff involved with the focus children work toward ensuring the focus children's needs are met and identified services are being implemented and supported and are specifically tailored to meet the focus children's unique needs.	5	3 - Marginally Inadequate Supports and Services	Supports and services identified in the focus children's case plans may be somewhat limited or not readily accessible. A limited set of supports and services may be inconsistently available and used, but may be seen as partially unsatisfactory.
Assessment & Linkages - The degree to which the Group Home staff involved with the focus children and their family members/NREFMs understand the focus children's strengths, needs, preferences and underlying needs and services provided are regularly assessed to ensure progress is being made toward case plan goals.	5	3 - Marginally Inadequate Assessment and Understanding	The focus children's functioning and support systems are marginally understood. Information necessary to understand the focus children's needs and preferences is limited and occasionally updated.

Focus Area	Minimum Acceptable Score	Group Home QAR Score	Group Home QAR Rating
Teamwork - The degree to which the "right people" for the focus children and their family members/NREFMs, have formed a working team that meets, talks and/or makes plans together.	5	3 - Marginally Inadequate Teamwork	The team contains a few of the important supporters and decision-makers in the focus children's lives, including informal supports. The team may be forming a marginal working group that only occasionally meets, talks and/or plans together.
Tracking & Adjustment - The degree to which the Group Home staff involved with the focus children and their family members/NREFMs are carefully tracking the progress that the focus children are making, changing family circumstances, attainment of goals and planned outcomes.	5	3 - Marginally Inadequate Tracking and Adjustment Process	Intervention strategies, supports and services being provided to the focus children are partially responsive to changing conditions. Occasional monitoring or inconsistent communication of the focus children's status is occurring.

OHCMD conducted the last QAR of the Group Home in September 2014 and noted an opportunity for improvement in the focus areas of Safety and Teamwork. In April 2015, the Quality Assurance Reviewer met with the Group Home to discuss the results of the QAR and to provide the Group Home with technical support to address methods for improvement in these two areas. Based on the information below it appears that the Group Home did not show improvement in the areas of Permanency, Engagement, Service Needs, Assessment & Linkages, and Tracking & Adjustment.

STATUS INDICATORS
(Measured over last 30 days)

Status Indicators	Safety	Permanency	Placement Stability	Visitation
2014-2015 Scores	5	5	5	5
2015-2016 Scores	3	4	5	5

In the area of Safety, OHCMD found that the Group Home had not implemented the 2014-2015 Quality Improvement Plan (QIP) to enhance the quality of care provided to the placed children in its care. It was found that the Group Home had minimal protective strategies in place to reduce danger and harm within the Group Home. One of the focus children had a BB gun on the premises of the Group Home for an unknown period. It was brought to the attention of DCFS after the placed child posted a picture of himself and the

weapon on social media. Also pictured was the focus child with marijuana, beer on the table, and pictures of the focus child on the roof of the Group Home after smoking marijuana. The focus child's maternal grandfather called in a referral to the Child Protection Hotline. The referral was cross-reported to Law Enforcement. Law Enforcement conducted a safety check of the Group Home; however, the BB gun was not retrieved as the focus child stated that he gave it back to the person whom he had received it from. DCFS Emergency Response CSW investigated and a referral of General Neglect was determined to be Inconclusive. The OHCMD Out-of-Home Care Investigations Section (OHCIS) conducted a supplemental investigation on July 28, 2015, and requested that the Group Home put in place a safety plan which included: the Group Home staff providing adequate supervision of the placed children, the Group Home staff discussing with placed children that contraband is not allowed at the Group Home; and the Group Home staff conducting random room searches to ensure no contraband is brought into the Group Home. At the conclusion of the investigation, OHCIS requested a Corrective Action Plan (CAP) in which the Group Home was to provide an update as to whether the safety plan was implemented and if there were any updates to the safety plan. The Group Home submitted the CAP noting that the safety plan was implemented and the CAP was approved by OHCIS. Community Care Licensing also investigated the allegations and determined the complaint to be Inconclusive.

In the area of Permanency, the Group Home declined quality of services and stability to the focus children. Both focus children are in the Planned Permanent Living Arrangement. The focus children reported that they wanted to remain in the Group Home until the age of maturity. However, the Group Home did not demonstrate how it is assisting the focus children in meeting the permanency goals and moving towards self-sufficiency.

In the areas of Placement Stability and Visitation, the Group Home continues to promote stability for the focus children and support family connections with visitation. The focus children reported that staff is available to talk when they need them. They are encouraged to visit with family members and maintain relationships with friends outside of the Group Home.

PRACTICE INDICATORS
(Measured over last 90 days)

Practice Indicators	Engagement	Service Needs	Assessment & Linkages	Teamwork	Tracking & Adjustment
2014-2015 Scores	5	5	5	4	5
2015-2016 Scores	4	3	3	3	3

In the area of Teamwork, OHCMD found that the Group Home had not implemented the 2014-2015 QIP. The focus children and the DCFS CSWs reported that they were not included in team meetings. The OHCMD QAR Reviewer met with the Group Home staff to address why the previous QIP was not implemented and to collaborate to develop a new QIP, which would aid the Group Home in developing positive outcomes for the focus and placed children.

In the areas of Engagement, Service Needs, Assessment and Linkages, and Tracking and Adjustment, OHCMD found a decline in the quality of these areas. The DCFS CSWs reported that not all information regarding the focus children is shared with them. The focus children reported a connection to the Group Home child care workers, but children reported not feeling connected to the Group Home therapist. One focus child stated that the therapist asks the same questions repeatedly. This focus child stated that he wanted a therapist outside of the Group Home who was bilingual. This was brought to the attention of the Group Home staff and there was no follow through by the Group Home. The other focus child reported that the therapist does not listen. The identified services for the focus children were not being implemented, as the focus children were doing poorly in school but they were not linked to any services to assist them in improving their academic performance. One DCFS CSW reported that she requested assistance from the Group Home administrator in obtaining legal documents for the focus child. The DCFS CSW stated that it was not taken care of by the Group Home as not all of the documents were obtained. The DCFS CSW felt that the Group Home does the minimal of what is required and does not have the children's best interest at heart. The DCFS CSWs reported that they were not made aware when the Needs and Services Plans (NSPs) were updated.

NEXT STEPS TO SUSTAIN SUCCESS AND OVERCOME CURRENT CHALLENGES

In November 2015, the Contract Administration Division (CAD) placed the Group Home on Administrative Hold for failing to adhere to the terms of the County contract. In December 2015, an Administrative Review Conference was held by CAD to address the concerns for the lack of compliance by the Group Home. The Group Home was to submit a Corrective Action Plan (CAP) to CAD.

In January 2016, OHCMD along with CAD provided the Group Home with technical support related to the 2015-2016 Contract Compliance Review findings in the areas of Licensure/Contract Requirement, Facility and Environment, Maintenance of Required Documentation and Service Delivery, Health and Medical Needs, Psychotropic Medication, and Personnel Records. Technical support was provided on how the Group Home can develop a transportation plan to ensure the children arrive promptly to school; ensure that clothing allowance is documented properly; ensure that common areas and the children are well maintained and in good condition; ensure that the NSPs are comprehensive and include all required elements. In addition, ensure that all staff received the required trainings.

In February 2016, the Group Home failed to submit a CAP that could be approved by CAD and was placed on a Do Not Use (DNU) status. An Administrative Review Conference was held in March 2016, to address the DNU status and an updated CAP was requested. The Group Home did not submit a CAP and therefore, the DNU remained in place. All placed children were removed from the Group Home. The Group Home did not submit a QIP.