



**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

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October 12, 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

THE DREAM CATCHER FOUNDATION GROUP HOME CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of The Dream Catcher Foundation (the Group Home) in April 2016. The Group Home has three sites located in the Second Supervisorial District and provide services to the County of Los Angeles DCFS placed children. According to the Group Home's Program Statement, its stated purpose is, "to achieve a successful outcome for each youth's treatment plan and designated case goal." It further states, "The larger overall goal is twofold. First, to help youth develop skills and self-esteem; this will enable the youth to become self-sufficient and productive persons in society. And, second, to help develop and promote a viable social support system for youth outside the foster care system."

At the time of the review, the Group Home served 16 DCFS placed children. The Group Home has three 6-bed sites licensed to serve a capacity of 18 female children, ages 8 through 17, with the capacity to also serve Probation foster youth, dual supervision children, and Assembly Bill (AB) 12 youth, ages 18 through 21. The placed children's average length of placement was two 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 9 of 10 applicable areas of CAD's Contract Compliance Review: Facility and Environment; Maintenance of Required Documentation and Service Delivery; Education 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.

CAD noted a deficiency in the area of: Licensure/Contract Requirements, related to Special Incident Reports (SIRs) not being cross-reported to all parties.

Attached are the details of CAD's review.

REVIEW OF REPORT

On May 26, 2016, Beatriz Meza DCFS CAD, Ali Bhatti, DCFS CAD, and Sonya Noil, DCFS Out-of-Home Care Management Division (OHCMD) held an exit conference with the Group Home's representatives: Theresa McPherson, Administrator and Alexandra Crayton, Administrator. The Group Home's representatives agreed with the review finding and recommendation, were receptive to implementing systemic changes to improve the Group Home's compliance with regulatory standards, and agreed to address 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 recommendations noted in this report. On June 23, 2016, the OHCMD provided technical assistance to the Group Home to assist with the implementation of their CAP.

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

PLB:KR
LTI:bm

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Calvin C. Remington, Interim Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Pamela Norris, Chief Executive Officer, The Dream Catcher Foundation
Leonora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

**THE DREAM CATCHER FOUNDATION GROUP HOME
CONTRACT COMPLIANCE REVIEW SUMMARY**

License No: 198205797
Rate Classification Level: 12

License No: 198205798
Rate Classification Level: 12

License No: 198205799
Rate Classification Level: 12

| | Contract Compliance Review | Findings: April 2016 |
|------------|---|---|
| I | <p><u>Licensure/Contract Requirements</u> (9 Elements)</p> <ol style="list-style-type: none"> 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 | <ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance |
| II | <p><u>Facility and Environment</u> (5 Elements)</p> <ol style="list-style-type: none"> 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 Food | <p align="center">Full Compliance (All)</p> |
| III | <p><u>Maintenance of Required Documentation and Service Delivery</u> (10 Elements)</p> <ol style="list-style-type: none"> 1. Child Population Consistent with Capacity and Program Statement 2. DCFS 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. DCFS Children's Social Worker's Monthly Contacts Documented 8. Children Assisted in Maintaining Important Relationships 9. Development of Timely, Comprehensive Initial NSPs with the Child's Participation 10. Development of Timely, Comprehensive, Updated NSPs with the Child's Participation | <p align="center">Full Compliance (All)</p> |

| | | |
|-------------------|---|------------------------------|
| <p>IV</p> | <p><u>Education and Workforce Readiness</u> (5 Elements)</p> <ol style="list-style-type: none"> 1. Children Enrolled in School Within Three School Days 2. Group Home 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. Group Home Encouraged Children's Participation in YDS or Equivalent Services and Vocational Programs | <p>Full Compliance (All)</p> |
| <p>V</p> | <p><u>Health and Medical Needs</u> (4 Elements)</p> <ol style="list-style-type: none"> 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 | <p>Full Compliance (All)</p> |
| <p>VI</p> | <p><u>Psychotropic Medication</u> (2 Elements)</p> <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review | <p>Full Compliance (All)</p> |
| <p>VII</p> | <p><u>Personal Rights and Social/Emotional Well-Being</u> (13 Elements)</p> <ol style="list-style-type: none"> 1. Children Informed of Group Home's Policies and Procedures 2. Children Feel Safe 3. Appropriate Staffing and Supervision 4. Group Home'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 Extracurricular, Enrichment and Social Activities at the Group Home, School, and Community | <p>Full Compliance (All)</p> |

| | | |
|-------------|--|-----------------------|
| | 13. Children Given Opportunities to Participate in Extracurricular, Enrichment and Social Activities at the Group Home, School, and Community | |
| VIII | <p><u>Personal Needs/Survival and Economic Well-Being</u> (7 Elements)</p> <ol style="list-style-type: none"> 1. \$50 Clothing Allowance 2. Adequate Quantity and Quality of Clothing Inventory 3. Children's 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 a Life Book or Photo Album | Full Compliance (All) |
| IX | <p><u>Discharged Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 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 | <p><u>Personnel Records</u> (7 Elements)</p> <ol style="list-style-type: none"> 1. Federal Bureau of Investigation (FBI), Department of Justice (DOJ) and Child Abuse Central Index (CACI) Submitted Timely 2. Timely Completed Criminal Background Statement 3. Education/Experience Requirement 4. Employee Health Screening/Tuberculosis (TB) Clearances Timely 5. Valid Driver's License 6. Signed Copies of Group Home Policies and Procedures 7. All Required Training | Full Compliance (All) |

**THE DREAM CATCHER FOUNDATION GROUP HOME
CONTRACT COMPLIANCE REVIEW
FISCAL YEAR 2015-2016**

SCOPE OF REVIEW

The following report is based on a "point in time" review. This compliance report addresses findings noted during the April 2016 review. The purpose of this review was to assess The Dream Catcher Foundation (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 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,
- Education 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 were selected for the sample. The Contracts Administration Division (CAD) interviewed all five children and reviewed their case files to assess the care and services they received. During the site visits, the children were observed to be comfortable and well cared for in the Group Home and the staff were observed to be responsive to the children's needs. Additionally, three discharged children's files were reviewed to assess the Group Home's compliance with permanency efforts. At the time of review, one placed child was prescribed psychotropic medication. The case file was reviewed to assess for timeliness of Psychotropic Medication Authorizations and the required documentation of psychiatric monitoring.

CAD reviewed four staff files for compliance with Title 22 Regulations and County contract requirements. Site visits were conducted to assess the quality of care and supervision provided to the placed children.

CONTRACTUAL COMPLIANCE

CAD found the following area out of compliance:

Licensure/Contract Requirements

- Special Incident Reports (SIRs) were not cross-reported to all parties.

During this review period, the Group Home submitted 44 SIRs via I-Track. CAD found that 1 of 44 SIRs was not cross-reported to Community Care Licensing (CCL) or to the Out-of-Home Care Management Division (OHCMD) per the SIR reporting guidelines.

Recommendation:

The Group Home's management shall ensure that:

1. SIRs are cross-reported to all parties in accordance with the SIR reporting guidelines.

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

CAD's last compliance report dated August 28, 2015 (review conducted in February and March of 2015), identified two recommendations.

Results:

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

- Comprehensive monetary allowance logs are maintained.
- All Updated Needs and Services Plans (NSPs) are developed timely and include the participation of the child.

Recommendation:

There are no outstanding recommendations from the prior report.

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 will continue to consult with the OHCMD for additional support and technical assistance and CAD will assess implementation of the recommendation during the next review period.



June 25, 2016

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

Attention: Contract Compliance

The Dream Catcher Foundation, Inc
2535 9th Avenue
Los Angeles, California, 90018

**Regarding: Corrective Action Plan (CAP) - Group Home Compliance Review Findings
CAP Addendum**

I. Licensure/ Contract Requirements:

Question 4: Are all Special Incidents Reports appropriately documented and cross-reported timely?

Finding(s): One (1) of the forty-four (44) sampled Special Incidents Reports (SIRs) were not cross reported to CCL and OHCMD.

Correction Action Plan

To ensure that Special Incidents Reports are cross reported to CCL and OHCMD, Dream Catcher Foundation (DCF) has implemented the following: Intake social worker and after hour crisis social worker will be trained on Special Incident Reporting, focusing on the following:

- Cross Reporting
- Time Frames
- Writing and completeness
- Addendums
- Internal policies and procedures

On July, 11, 2016 Intake Social Worker Edith Sanchez and after hour Crisis Social Worker Tawanda Counts will attend the above mentioned training with Administrator, Theresa McPherson.

Person(s) Responsible for Implementation of the CAP

Administrator, Theresa McPherson, will provide the above training with Intake Social Worker Edith Sanchez and after hour Crisis Social Worker Tawanda Counts at corporate office on July 11, 2016. DCF Social Work Team and Administrators, will ensure implementation of the CAP.

Time Frame of Implementation

CAP will be implemented July, 11 2017.

Respectfully submitted,

Theresa McPherson

Theresa McPherson, MFT
Administrator



June 25, 2016

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3530 Wilshire Blvd., 4th Floor
Los Angeles, CA 90010

Attention: Contract Compliance

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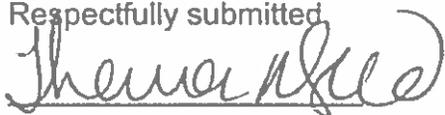
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Theresa McPherson, MFT
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