County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

PHILIP L. BROWNING
Director

FESIA A. DAVENPORT
Chief Deputy Director

Board of Supervisors
GLORIA MOLINA
First District
MARK RIDLEY-THOMAS
Second District
ZEV YAROSLAVSKY
Third District
DON KNABE
Fourth District
MICHAEL D. ANTONOVICH
Fifth District

October 18, 2013

To: Supervisor Mark Ridley-Thomas, Chairman
Supervisor Gloria Molina
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

AVIVA CHILDREN AND FAMILY SERVICES GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a review of Aviva Children and Family Services Group Home (the Group Home) in January 2013. The Group Home has a 36-bed site located in the Third Supervisorial District and provides services to County of Los Angeles DCFS foster children and Probation youth. According to the Group Home's program statement, its purpose is "to provide a treatment-oriented facility for young women, ages 12 to 17 and to rehabilitate young women who are unable to function adequately in a family setting or in a traditional high school and to change self-destructive life styles and to learn to cope more adequately with the traumatic past and the difficult present; to enhance self-esteem, develop appropriate social skills and finish high school."

The Group Home is licensed to serve a capacity of 36 girls, ages 12 through 17. At the time of the review, the Group Home served 17 placed DCFS children and 15 Probation children. The placed children's overall average length of placement was 3 months, and their average age was 16.

SUMMARY

During OHCMD's review, the interviewed children generally reported feeling safe at the Group Home and also reported they were being treated with respect and dignity.

The Group Home was in full compliance with 6 of 10 areas of our Contract compliance review: Facility and Environment; Health and Medical Needs; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Discharged Children; and Personnel Records.

Deficiencies were noted in the areas of Licensure/Contract Requirements, related to citations by Community Care Licensing (CCL); Maintenance of Required Documentation and Services Delivery, related to incomprehensive Needs and Services Plans (NSP); Educational and Workforce Readiness, related to not having enrolled children in school within 3 days of placement; and Personal Needs/Survival and Economic Well-Being, related to not providing children with required monthly clothing allowance or adequate personal care items appropriate to their ethnic needs. The OHCMD Monitor instructed the Group Home supervisory staff to enhance monitoring in order to ensure compliance with regulations and to eliminate documentation and service delivery issues.

On August 26, 2013, an Administrative Hold was placed on the Group Home, as the Group Home failed to submit a Corrective Action Plan (CAP) and addenda that adequately addressed the findings of this review. A Review Conference was held on September 12, 2013, to address OCHMD's concerns and the Group Home's lack of responsiveness in submitting a CAP and requested supporting documentation. The Group Home agreed to submit a CAP to address the findings of the most recent annual review by October 14, 2013. The Hold was lifted on September 20, 2013.

On June 6, 2013, the Group Home has been referred to the Auditor-Controller (A-C) for an audit to address findings related to children not being provided with monthly clothing allowances and being charged to personal care items. Amounts for reimbursement to DCFS will be determined by the A-C.

The Group Home has agreed to make further changes based on the recommendations of the A-C.

Attached are the details of our review.

REVIEW OF REPORT

On May 8, 2013, the DCFS OHCMD Monitor, Sonya Noil, held an Exit Conference with the Group Home representative, Ira Kruskol, Vice President of Programs and Services. The representative agreed with the review findings and recommendations; was receptive to implementing systemic changes to improve their compliance with regulatory standards; and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this report has been sent to the Auditor-Controller and CCL.

OHCMD will assess for implementation of recommendations during our next monitoring review.

OHCMD will assess for implementation of recommendations during our next monitoring review.

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

PLB:EM:KR
RDS:PBG:sn

Attachment

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Ira Kruskol, Vice President of Programs and Services, Aviva Group Home
Lenora Scott, Regional Manager, Community Care Licensing
Angelica Lopez, Acting Regional Manager, Community Care Licensing

CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

1701 Camino Palmero
Los Angeles, CA. 90046
License # 191800285
Rate Classification Level: 14

	Contract Compliance Monitoring Review	Findings: January 2013
I	**Licensure/Contract Requirements** (9 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Transportation Needs Met	2. Full Compliance
	3. Vehicle Maintained In Good Repair	3. Full Compliance
	4. Timely, Cross-Reported SIRs	4. Full Compliance
	5. Disaster Drills Conducted & Logs Maintained	5. Full Compliance
	6. Runaway Procedures	6. Full Compliance
	7. Comprehensive Monetary and Clothing Allowance Logs Maintained	7. Full Compliance
	8. Detailed Sign In/Out Logs for Placed Children	8. Full Compliance
	9. CCL Complaints on Safety/Plant Deficiencies	9. Improvement Needed
II	**Facility and Environment** (5 Elements)	
	1. Exterior Well Maintained	Full Compliance (ALL)
	2. Common Areas Maintained	
	3. Children's Bedrooms	
	4. Sufficient Recreational Equipment/Educational Resources	
	5. Adequate Perishable and Non-Perishable Foods	
III	**Maintenance of Required Documentation and Service Delivery** (10 Elements)	
	1. Child Population Consistent with Capacity and Program Statement	1. Full Compliance
	2. County Worker's Authorization to Implement NSPs	2. Improvement Needed
	3. NSPs Implemented and Discussed with Staff	3. Full Compliance
	4. Children Progressing Toward Meeting NSP Case Goals	4. Full Compliance
	5. Therapeutic Services Received	5. Full Compliance
	6. Recommended Assessment/Evaluations Implemented	6. Full Compliance
	7. County Workers Monthly Contacts Documented	7. Full Compliance
	8. Children Assisted in Maintaining Important Relationships	8. Full Compliance
	9. Development of Timely, Comprehensive Initial NSPs with Child's Participation	9. Improvement Needed
	10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation	10. Improvement Needed

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 Maintained 4. Children's Academic or Attendance Increased 5. GH Encouraged Children's Participation in YDS/ Vocational Programs	1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance
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 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. 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) 13. Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)	Full Compliance (ALL)

VIII	**Personal Needs/Survival and Economic Well-Being** (7 Elements) 1. $50 Clothing Allowance 2. Adequate Quantity and Quality of Clothing Inventory 3. Children's Involved in 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	1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance
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)

AVIVA CHILDREN AND FAMILY SERVICES GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2012-2013

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit and addresses findings noted during the January 2013 monitoring review. The purpose of this review was to assess Aviva Children and Family Services Group Home's (the Group Home) 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 monitoring 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, seven placed children were selected for the sample. The Out-of-Home Care Management Division (OHCMD) monitor 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, five children were prescribed psychotropic medication. The children's case files were reviewed to assess timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

OHCMD reviewed three staff files for compliance with Title 22 Regulations and County contract requirements, and conducted a site visit to assess the provision of quality of care and supervision.

CONTRACTUAL COMPLIANCE

OHCMD found the following four areas out of compliance.

Licensure/Contract Requirements

Community Care Licensing (CCL) cited the Group Home as a result of substantiated findings noted during three separate investigations.

- On May 8, 2012, CCL cited the Group Home as a result of a substantiated Neglect/Lack of Supervision complaint. CCL's investigation revealed that a child had ingested numerous pills due to neglect by staff. The Group Home was assessed a Civil Penalty of $150.00, as the deficiency had caused injury to a child. OHCMD requested a Corrective Action Plan (CAP) on February 23, 2012. The Group home submitted their CAP on February 29, 2012, and the CAP was approved March 6, 2012. The nurse in question received retraining regarding

medication administration and storage policies. She also received a personnel action and was counseled. Additionally, the resident counselor, who was supervising the resident, received a personnel action and counseling/training regarding appropriate supervision. The CAP was approved on March 6, 2012.

- On November 16, 2012 CCL cited the Group Home as a result of a substantiated Personal Rights Violation. CCL's investigation revealed that a child was made to sleep on the sofa because the staff believed the child was a danger to the other children in the Group Home. The Group Home submitted a Plan of Correction ensuring that no room commonly used for other purposes shall be used as a bedroom. DCFS also substantiated the General Neglect allegation; the Group Home submitted a CAP, ensuring the Department that a child will not be required to sleep at night in a common area room.

- On March 20, 2013, CCL cited the Group Home as a result of substantiated Personal Rights Violations, which were discovered through this review and further supported by information obtained through the joint investigation conducted by OHCMD, the Department of Probation, and CCL. It was discovered that placed children were being charged for a "Welcome Basket," which included basic care items, upon admission to the facility, and $40.00 was being deducted from their initial clothing allowance; the children were not informed of the amount deducted.

Recommendation

The Group Home's management shall ensure that:

1. The Group Home is in compliance with Title 22 Regulations and County contract requirements.

Maintenance of Required Documentation and Service Delivery

- The Group Home did not obtain or document efforts to obtain the Children Social Workers' (CSW) or Deputy Probation Officer's (DPO) authorization to implement the Needs and Services Plans (NSPs). The Group Home will ensure that each NSP includes the CSW's/DPO's authorization to implement the NSP, or efforts to obtain authorization will be documented.

- Five of seven initial NSPs were reviewed; five were not comprehensive. It was noted that the Group Home needed to develop comprehensive initial NSPs. Signature pages were missing and CSW/DPO signatures were not obtained timely and CSW/DPO contacts were not found in NSPs.

- Five of six updated NSPs reviewed were not comprehensive. It was noted that the Group Home needed to develop comprehensive updated NSPs. Monthly CSW/DPO contacts were not documented in the NSPs. Progress on identified case plan goals was not clear. The CSW's/DPO's signature was not obtained timely or was missing from the NSPs.

Group Home representative attended the OHCMD NSP training for providers in January 2012, and are aware of the NSP requirements. The Administrator reported that in the future, staff will ensure utilization of the Specific, Measurable, Attainable, Realistic and Timely (SMART) chart when developing comprehensive NSPs.

Recommendations

The Group Home's management shall ensure that:

2. The group home staff obtain or document efforts to obtain the CSW's/DPO's authorization to implement the NSPs.

3. Comprehensive initial NSPs are developed and include all required elements in accordance with the NSP template.

4. Comprehensive updated NSPs are developed and include all required elements in accordance with the NSP template.

Education and Workforce Readiness

- One child was not enrolled in school within three school days of placement. The child was placed at the Group Home on September 12, 2012 and was not enrolled in school until September 18, 2012. The Group Home reported that they were unclear as to who was the holder of the child's educational rights. OHCMD addressed the need for ensuring children are enrolled in school timely and provided the Group Home representatives with online resources and the Educational Resource Website: http://www.educationcoordinatingcouncil.org/Links.htm.

Recommendations

The Group Home's management shall ensure that:

5. Children are enrolled in school within three school days of placement, and all efforts to enroll children in school are documented

Personal Needs/Survival and Economic Well-Being

- Children were not provided the required monthly clothing allowance. The review revealed that each child placed was given a "Welcome Basket" upon admission. The contents of the "Welcome Basket" included personal care items, such as toothpaste, a toothbrush, a comb, a brush, deodorant, soap, and a towel. Further, the "Welcome Basket" also contained clothing articles, such as: three pairs of underwear; three pairs of socks; one bra; one shirt/t-shirt; pajamas; sweat pants; shower shoes; and a bathrobe.

  The placed children reported that they were required to purchase the "Welcome basket," even if they already had ample clothing. The children had not been informed that $40.00, the cost of the "Welcome Basket," would be deducted from their initial clothing allowance.

On February 14, 2013, a meeting was held with the Group Home's administrative staff to discuss the findings regarding the "Welcome Basket." The DPO and CCL participated in the meeting. Immediate corrective action was required; the Group Home was to immediately stop charging for the cost of personal care items, and the purchase of the clothing articles in the "Welcome Basket" would be voluntary. Further, the Group Home was required to immediately reimburse the County and/or all the children who were charged for the personal care items. The Group Home has reported that they have ceased deducting monies for personal care items and will submit verification of reimbursement to those children who were still placed at the Group Home. Further, the Group Home has been instructed on the procedures for reimbursing the County for items charged to children who are no longer placed at the Group Home and whom the Group Home could not reimburse.

Additionally, children were not provided with adequate personal care items appropriate to their ethnic needs, nor were these items readily accessible. Interviewed residents, particularly African-American girls, reported that the Group Home does/did not supply adequate personal care items, such as hair and grooming products, and that the girls wore scarves on their heads to cover their hair. OHCMD monitor interviewed two girls whom she observed wearing scarves. The girls informed the monitor that they were wearing scarves, because they were embarrassed to show their hair. One child stated, "My hair is a mess, and this is the best I can do." The second child stated, "I need to have my hair done."

The Group Home has since incorporated a salon day once a week for the girls to have hair care needs met. The Group Home purchased a blow dryer and a pressing comb stove to have at the Group Home for the residents to use, and staff has been more hands-on, assisting the girls with their hair care needs. Further, as noted above, a salon day has been incorporated into the weekly program.

On August 26, 2013, an Administrative Hold was placed on the Group Home for failure to submit a CAP and addenda that adequately addresses the findings of this review. Further, the CAP and addenda submitted by the Group Home included conflicting information and copies of requested receipts and supporting documentation had not been provided to OHCMD. A Review Conference was held on September 12, 2013, to address OHCMD's concerns and the Group Home's lack of responsiveness in submitting a CAP and requested supporting documentation.

During the Review Conference, the Group Home representatives stated that the Group Home will continue to issue "Welcome Baskets" at no charge to the placed children; the baskets will only contain personal care items appropriate to meet the ethnic needs of children. In addition, the Group Home is reviewing its process for tracking AFDC Clothing Allowances and clothing purchases. The Group Home agreed to submit a CAP that will address the findings by October 14, 2013. The Hold was lifted on September 20, 2013.

It should be noted that the Group Home has been referred to the Auditor-Controller (A-C) for an audit. Amounts for reimbursement to DCFS will be determined by the A-C. The Group Home has agreed to make further changes based on the recommendations of the A-C.

Recommendations

The Group Home's management shall ensure that:

6. All children are provided with a monthly clothing allowance, and that no children are charged for basic needs/personal care items.

7. All children are provided with adequate personal care items appropriate to their ethnic needs, and these items are readily accessible.

PRIOR YEAR FOLLOW-UP FROM DCFS OHCMD's GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

The OHCMD's last compliance report, dated October 10, 2012, identified eight recommendations.

Results

Based on our follow-up, the Group Home fully implemented four of eight of the previous recommendations for which they were to ensure:

- Compliance with Serious Incident Reports,
- Compliance with CCL,
- CSW's authorization to implement NSPs,
- Development of Comprehensive initial NSPs,
- Development of Comprehensive updated NSPs,
- Children are free to attend religious services,
- Encouragement and assistance with life books,
- Timely signed criminal background statements, and
- Full implementation of the outstanding recommendations from the prior monitoring report.

The Group Home did not implement four prior recommendations. Specifically, the Group Home was to ensure; Compliance with CCL citations/OHCMD investigation reports on safety/plant deficiencies; ensure authorization of CSWs to implement NSPs; and the development of comprehensive initial and updated NSPs.

The Group Home's management shall ensure that:

8. It fully Implements the four outstanding recommendations from the October 10, 2012 monitoring report, which are noted in this report as Recommendations 1, 2, 4, and 5.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

On April 11, 2013, the OHCMD monitor contacted the Auditor-Controller (A-C) to inquire if a fiscal review had been conducted. We were informed that a recent fiscal audit has not been conducted.

On June 6, 2013, OHCMD initiated a referral to the A-C for a fiscal review of the Group Home, due to the findings related to children being charged for personal care items.