County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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January 14, 2013

To: Supervisor Mark Ridley-Thomas, Chairman
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Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning, Director

CHILDREN'S HOMES OF SOUTHERN CALIFORNIA 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 Children's Homes of Southern California (CHSC) in October 2012. CHSC's sites are located in the Third Supervisorial District and provide services to Los Angeles County DCFS foster children and youth. According to CHSC's program statement, its purpose is "First, to help youths develop the skills and self-esteem, which will enable them to become self-sufficient and productive persons in society. And second, to help develop and promote a viable social support system for youths outside the foster care system."

CHSC has five six-bed sites, each with a licensed capacity for six male youth, ages 12 through 17. At the time of review, CHSC served 30 placed DCFS children. The children's average length of placement was five months and their average age was 15.

SUMMARY

During our review, the six children interviewed generally reported feeling safe, being provided with good care and appropriate services, being comfortable in their environment, and treated with respect and dignity.

CHSC was in full compliance with seven of 10 areas of our contract Compliance review: Maintenance of Required Documentation and Service Delivery; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Discharged Children; and Personnel.

We noted deficiencies in the areas of vehicle maintenance, cross–reporting to the Child Protection Hotline (CPHL) for "Unauthorized Absences", and compliance with Community Care Licensing (CCL) regulations. Further, deficiencies were noted in the maintenance of the interior and grounds of the facilities and ensuring all placed children had adequate clothing. We instructed CHSC supervisory staff to enhance monitoring in order to ensure compliance with regulations and to eliminate services delivery issues.

Attached are the details of our review.

REVIEW OF REPORT

On October 31, 2012, the DCFS OHCMD Monitor, Donald Luther, held an Exit Conference with CHSC Administrators: Jorge Marquez, Executive Director and Michelle Villacorta, Program Director. CHSC's Administrators agreed with most of the review findings and recommendations and were receptive to implementing systemic changes to improve their compliance with regulatory standards; and to address the noted deficiencies in a Corrective Action Plan (CAP). CHSC provided the attached approved CAP addressing the recommendations noted in this compliance report.

A copy of this compliance report has been sent to the Auditor-Controller (A-C) and CCL. We will assess for implementation of recommendations during our next monitoring review.

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

PLB:RRS:KR
EAH:PBG:dl

Attachments

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
Jorge Marquez, Executive Director, Children's Homes of Southern California
Lenora Scott, Regional Manager, Community Care Licensing
Rosalie Gutierrez, Regional Manager, Community Care Licensing

CHILDREN"S HOMES OF SOUTHERN CALIFORNIA
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2012-2013

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the October 2012 review.

The purpose of this review was to assess CHSC compliance with its County contract requirements and State regulations and included a review of the CHSC'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
- Personnel Records

For the purpose of this review, seven placed children were selected for the sample. Seven current children's case files were reviewed, and six children were interviewed to assess the care and services they received, as one child was released home by Court prior to being interviewed. Additionally, three discharged children's files were reviewed to assess CHSC's compliance with permanency efforts. At the time of the review, two placed children were prescribed psychotropic medication. We reviewed their case files to assess for timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring.

We reviewed four 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

We found the following three areas out of compliance.

Licensure/Contract Requirements

- The Monitor inspected eight vans: a van was assigned to each of the five group home sites; two vans were not being used regularly, as one van was for back-up transportation and one was being used for parts; and one van was assigned to the Emergency Shelter Care (ESC) program. The ESC Unit was advised of the van's condition for appropriate follow-up.

The Executive Director explained that the vehicles may be rotated between any of the sites as the need arises. Three of the five Group Home vehicles were in need of maintenance repairs. The Victory site van's odometer light worked intermittently. CHSC had the light repaired on November 26, 2012, and submitted documentation of the repair to OHCMD. The Runnymede site van's window latches on the sliding door were broken, the seat covering material was separating and the headliner was torn. The Monitor observed the latches being repaired on October 16, 2012. On November 2, 2012, CHSC purchased another van that replaced the van at Runnymede. The Program Director reports the replacement van is in good condition, without any of the repairs required. CHSC submitted photos of the van to OHCMD to confirm the vehicle's condition. The Valerio site van's rear wiper blade was damaged, needing replacement. The wiper blade was replaced on October 19, 2012. Each of CHSC's vans was in need of cleaning and detailing. The Program Director has developed a protocol requiring weekly cleaning and quarterly detailing of the vehicle. CHSC submitted receipts to OHCMD that documents purchase of the replacement van, the wiper blade replacement, and each of the five Group Home vehicles having been detailed in November 2012.

- CHSC was not cross-reporting "Unauthorized Absences" occurring after-hours and on weekends to the Child Protection Hotline as required under the County contract. The Program Director expressed concern that the wording in the policy was unclear and confusing. OHCMD Monitor discussed this policy and clarified it with the Program Director at the time of the review. CHSC immediately complied with the cross-reporting requirement.

- CHSC was cited by CCL in November 2011, for improperly documenting the medication log for one child at the Shoup site. CCL required and CHSC completed a Plan of Correction to develop, maintain, and implement medication control and monitoring procedures/protocols. New recording procedures were enacted. Staff received training on proper documentation of medication taken, correct dosages, distributing, and recording children's refusal. Staff were required to review the Child Care Handbook and to utilize the six Rights of Assisting Residents with their medication. CHSC will provide all employees quarterly trainings to address, refresh, and reinforce knowledge of "How to Document and Store Resident's Medication in Residential Facilities".

Recommendation:

CHSC management shall ensure that:

1. All vehicles used to transport children are well maintained, mechanically sound, and the interiors and exteriors are clean.

2. "Unauthorized Absences" occurring after-hours and on weekends are cross-reported to the Child Protection Hotline as required in compliance with the County contract.

3. All sites are in compliance with Title 22 Regulations.

Facility and Environment

- The Runnymede facility grounds, specifically the backyard, needed the dirt and sod area around the basketball court being raised to the level of the edge of the court to reduce the possibility of injury to the children playing on the court. The gardener has evened the soil to the height of the slab and planted sod in the area. The backyard was also missing several sprinkler heads needed to maintain the landscape and grass. The gardener replaced the missing sprinkler heads on November 12, 2012. CHSC provided OHCMD photos and receipts documenting the repairs to the backyard area.

- The carpeting in the living room and TV room entry in the Runnymede site was separating and splitting. New carpeting was installed on November 15, 2012. CHSC submitted receipts to OHCMD documenting the purchase and installation of the new carpeting.

- At the Valerio site, the standard electrical outlet on the vanity in the master bedroom's bathroom needed to be replaced with a Ground Fault Interrupter (GFI) electrical outlet due to the location to the sink. One child had his stereo plugged into the socket. Staff removed the appliance from the bathroom. Also, the light switch cover plate in the bathroom was cracked. The GFI outlet and a new cover plate had been installed and observed and verified by the Monitor during a follow-up visit on October 11, 2012. Further, CHSC submitted receipts to OHCMD documenting the purchase of the cover plate and GFI outlet.

Recommendations

CHSC management shall ensure that:

4. The facility grounds are maintained and free of potential safety hazards.

5. All common areas, specifically the carpeting, are maintained in good repair.

6. Electrical outlets are suitable for the area of the outlet and cover plates are maintained in order to prevent potential safety hazards.

Personal Needs/Survival and Economic Well-Being

- Three children were lacking sufficient clothing to meet DCFS clothing standards for quantity. One child was lacking three pairs of pants, a pair of slippers, and a bathrobe; and two other children were lacking slippers. The Executive Director was concerned that the children did not have slippers and bathrobes as he reported the sites have a stock supply of each and staff should have provided the children with the items. The Program Director stated that the children will be supplied with the needed clothing. Receipts were submitted to OHCMD to document that the items had been purchased for the children.

Recommendation

CHSC management shall ensure that:

7. All children have sufficient clothing to meet DCFS clothing standards.

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

The OHCMD's last compliance report dated July 13, 2012, identified nine recommendations.

Results

Based on our follow-up, CHSC fully implemented eight of nine recommendations. The previous recommendations were that:

- Special Incident Reports (SIRs) are submitted in accordance with the contractual timeframe.
- Children receive Psychiatric Emergency Team evaluations as needed and follow mandated discharge procedures.
- All sites are in compliance with Title 22 Regulations and County contract requirements.
- All beds are supplied with full complements of clean linen, mattress pads, and pillows.
- The children's bedrooms have sufficient lighting.
- The Group Home staff advocates for eligible children to obtain required timely updated Individualized Education Plans (IEPs).
- Initial physical and dental examinations are conducted within 30 days of placement.
- All required staff have documentation of a valid California Driver's License.
- All applicable staff maintain documentation of current First-Aid training.

CHSC did not implement the recommendation that all sites are in compliance with Title 22 Regulations.

Recommendation

CHSC management shall ensure that:

5. The outstanding recommendation from the July 13, 2012 report for the 2011-2012 fiscal year monitoring review, which is noted in this report as Recommendation 3, is fully implemented.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE A-C

A fiscal review of CHSC Group Home has not been posted by the A-C.

CHILDREN'S HOMES OF SOUTHERN CALIFORNIA
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

22455 Victory Boulevard
West Hills, CA 91307
License # 191222471
Rate Classification Level: 12

14239 Valerio Street
Van Nuys, CA 91405
License # 191221575
Rate Classification Level: 12

7701 Baird Avenue
Reseda, CA 91335
License # 191221601
Rate Classification Level: 12

15352 Runnymede Street
Van Nuys, CA 91405
License # 191221595
Rate Classification Level: 12

6450 Shoup Avenue
West Hills, CA 91307
License # 197601995
Rate Classification Level: 12

	Contract Compliance Monitoring Review	**Findings: October 2012**
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. Improvement Needed
	4. Timely, Cross-Reported SIRs	4. Improvement Needed
	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	1. Improvement Needed
	2. Common Areas Maintained	2. Improvement Needed
	3. Children's Bedrooms	3. Improvement Needed
	4. Sufficient Recreational Equipment/Educational Resources	4. Full Compliance
	5. Adequate Perishable and Non-Perishable Foods	5. Full Compliance

III	**Maintenance of Required Documentation and Service Delivery** (10 Elements) 1. Child Population Consistent with Capacity and Program Statement 2. County 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 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	Full Compliance (ALL)
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	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 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. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 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)

Children's Homes of Southern California
22455 Victory Boulevard, West Hills, CA 91307
Telephone (818) 592-2960, Facsimile (818) 592-2961

November 30, 2012

Attention: Patricia Bolanos-Gonzalez, Children's Services Administrator II
Department of Children and Family Services
Out of Home Care Management Division
9320 Telstar Avenue, Suite 206
El Monte, CA 91731

Dear Ms. Bolanos-Gonzalez,

Please consider this Corrective Action Plan for the 2012 Monitoring Review that began on October 09, 2012 and concluded on October 31, 2012.

LICENSURE/CONTRACT REQUIREMENTS

 # 3 Does the group home maintain vehicle in which the children are transported in good repair?

FINDING:

Three out of Five Vans Require Physical Repairs; All Five Vehicles are in need of cleaning/vacuuming.

CORRECTIVE ACTION:

Group Home Monitoring Review Field Exit Summary indicate that *three out of the five Agency Vehicles needed physical repairs: (1) Victory, Odometer light works intermittently; (3) Runnymede, window latches on sliding door broken, headliner torn, seats splitting; (4) Valerio, rear window wiper blade damaged and needs replacement. Additionally, all five Agency Vehicles are noted to be in need of interior vacuuming and cleaning.* In order to prevent this from recurring in the future, Children's Homes of Southern California (CHSC) will enact the following corrections:

- Agency Vehicle (1) was evaluated by Outside Agency Vendor (Private Mechanic) on 11/26/12. Agency Vendor indicated Odometer light would need to be off/broken in order for accurate diagnosis and repair of Odometer light. Children's Homes of Southern California (CHSC) will continue to follow up with Outside Agency Vendor for needed repair of Odometer light to be completed by December 15, 2012. Continued examination and follow up of vehicle will ensure that the CHSC Facility will have a functioning Odometer

Light and vehicle in good repair. Agency Maintenance Technician will be responsible for ensuring the vehicles remain in good repair.

- Agency Vehicle (3) window latches were repaired the next day as noted by OCHM Auditor on October 16th 2012. To further address the physical repairs of the Agency Vehicle (headliner torn, seats splitting), the Agency Vehicle (3) was replaced with the CHSC purchase of an additional Agency Vehicle (VIN # 1GKDM19W8YB506554) as initiated by the Executive Director. This Vehicle Purchase was completed on 11/02/2012 and assigned to the CHSC Runnymede Group Home as the primary vehicle. Purchase of the GMC Safari Van eliminates the aforementioned needed repairs and ensures the Runnymede Agency Vehicle is maintained in good repair. (Copy of Receipt Enclosed)
- Agency Vehicle (4) the rear window wiper blade was replaced on October 19th 2012. (Copy of Receipt Enclosed) by Agency Maintenance Technician. To ensure wiper blades remain in good and operable condition, Agency Maintenance Technician will maintain additional inventory on-site and inspect wiper blades monthly and replace accordingly.
- All Five Agency Vehicles were Professionally Detailed by an Outside Agency Vendor (Copy of Receipts enclosed) on the following dates: 11/14/12, 11/15/12, 11/19/12, 11/26/12, and 11/27/12. To ensure the cleanliness of all Agency Vehicles throughout the year and to prevent noted findings, the following system has been enacted:

    - On a Calendar Quarterly basis the Maintenance Technician will have each Facility Van Professionally Detailed (including but not limited to; Vacuuming, Shampooing Carpets, Cleaning Window, etc.) and returned to the group home.
    - To ensure Transportation Services of all Residents the Agency Spare Van will be utilized in a rotation series during this Professional Detailing of the Facility Van. The Program Manager will be responsible for ensuring transportation of residents is maintained.

The Administrator/Program Director will be responsible for ensuring the continuity of the aforementioned Cleaning Schedule for the Agency Vehicles.

 # 4 Are all Special Incident Reports (SIRs) appropriately documented and cross-reported timely?

FINDING:

Child Abuse Hotline not being called after hours/weekends for Unauthorized Absences per Contract w/LA County, Special Incident Reports (5)

CORRECTIVE ACTION:

Group Home Monitoring Review Field Exit Summary indicated more specifically, that *AWOL (Unauthorized Absences) SIR's are not being called to the Child Abuse Hotline as per the Agency's Contract with DCFS, per the Statement of Work (SOW), Exhibit A-VII, Special Incident Reporting Guide for Group Homes* for all five (5) Agency facilities. In order

to prevent this from recurring in the future, Children's Homes of Southern California (CHSC) has enacted the following corrections:

- Upon a resident engaging in an Unauthorized Absence (AWOL) at any time during Agency placement, CHSC, Staff of the facility will immediately notify the CHSC Program Manager On-Duty.
- In accordance with SOW, Exhibit A-VIII, Special Incident Reporting Guide, CHSC GH Facility Staff will also immediately notify Los Angeles Police Department for submission of a Missing Persons Report (MRP). MRP will be submitted both verbally and written in accordance with LAPD procedures. CHSCH GH Facility Staff will obtain identifying information of LAPD Officer to be provided on the Group Home Special Incident Report.
- In accordance with SOW, Exhibit A-VIII, Special Incident Reporting Guide, CHSC GH Facility Staff will also immediately notify Child Abuse Hotline via telephone for notification of a resident engaging in an Unauthorized Absence along with noted Missing Persons Report (MPR) information during afterhours/weekends/holidays. GH Facility Staff will obtain identifying information as indicated by the Child Abuse Hotline (i.e. Report Number) to also be provided on the Group Home Special Incident Report.
- For each Unauthorized Absence (AWOL), a written Special Incident Report will be completed by the CHSC GH Staff in accordance with SOW, Exhibit A-VIII, and Special Incident Reporting Guide.
- Program Manager will ensure the each Unauthorized Absence (AWOL) Special Incident Report completed is cross-reported via I-Track and ensure that the Child Abuse Hotline is notified during afterhours/weekends and holidays respectively.

 # 9 Is the group home free of any substantiated Community Care Licensing complaints on safety and/or physical plant deficiencies since the last review?

FINDING:

11/16/2011, Community Care Licensing noted Medication Control Log Incorrectly Logged, Substantiated Complaint (1): Medication

CORRECTIVE ACTION:

Group Home Monitoring Review Field Exit Summary indicates there was one (1) incident of a substantiated Community Care Licensing (CCL) complaint since the last review (October 2011-October 2012), more specifically at the *Shoup Group Home. On 11/16/11 Community Care Licensing (CCL) noted that the Medication Log for one child was incorrectly logged. CCL required Children's Homes of Southern California to develop, maintain, and implement medication control and monitoring procedures/protocols.* In order to prevent this from recurring in the future, Children's Homes of Southern California (CHSC) enacted the following corrections:

- On 12/23/2011 a Corrective Action Plan was submitted for the substantiated finding by Children's Homes of Southern California (CHSC) to Community Care Licensing (CCL) and approved.