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DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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July 26, 2012

To: Supervisor Zev Yaroslavsky, 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 Los Angeles County 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 2011. At that time, they had five six-bed group home sites, each with a licensed capacity for six children, all serving boys ages 12 through 17 with a total population of 30 DCFS placed children.

CHSC is located in the Third Supervisorial District and provides services to DCFS foster youth. According to CHSC's program statement, its overall stated goal 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. Only by promoting social ties outside the system, can a youth ever hope to develop a viable social support system that will sustain him or her in life."

For the purpose of this review, seven currently placed children were interviewed, and their case files were reviewed. The placed children's overall average length of placement was five months, and the average age was 15. Three discharged children's case files were reviewed to determine if they were meeting their Needs and Services Plan (NSP) goals and discharged according to their permanency plan. Three staff files were reviewed for compliance with Title 22 Regulations and County contract requirements.

Three of the seven sampled children were prescribed psychotropic medication. We reviewed their case files to assess timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm that documentation of psychiatric monitoring was maintained as required.

SCOPE OF REVIEW

The purpose of this review was to assess CHSC's compliance with the County contract and State Regulations. The visit included a review of CHSC's program statement, administrative internal policies and procedures, ten children's case files, and a random sampling of personnel files. Visits were made to the sites to assess the quality of care and supervision provided to children, and we conducted interviews with seven children to assess the care and services they were receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

SUMMARY

Overall, the children interviewed reported they were provided with good care and appropriate services, were comfortable in their environment, and were treated with respect and dignity. CHSC maintained sufficient age-appropriate recreational equipment in good condition. There was an appropriate quantity and quality of reading materials and educational resources.

Our review revealed the need for CHSC to immediately submit Special Incident Reports (SIRs) related to Unauthorized Absences (AWOLS) per the procedural guidelines in the contract; to advocate to the schools on behalf of the children to develop updated Individualized Education Plans (IEPs) when outdated; and to provide timely initial physical and initial dental examinations. Of the three staff files reviewed, one staff member did not have as required a valid California Driver's License or a current and valid First-Aid card. He was terminated during the course of the review.

None of the noted deficiencies posed a safety hazard or impacted the well-being of the placed children. CHSC was receptive to implementing systemic improvements necessary to comply with Title 22 Regulations and County contract requirements. The Program Director was cooperative and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

NOTABLE FINDINGS

The following are the notable findings of our review:

- At the time of the review, we noted that CHSC needed to submit SIRs related to AWOLS immediately, per the procedural guidelines in the contract. The Program

Director stated she understood the finding and is now having the Program Managers submit the SIRs immediately.

- Three beds had dirty and stained pillows, and one bed was missing a mattress pad. These were replaced at the time of the review. One large bedroom had insufficient lighting for the two beds in the room. The Program Director reported that a fluorescent light fixture has been installed to replace the previous smaller fixture.

- One child required, but did not have an updated current IEP, and efforts to obtain an updated IEP were not documented. In response, the Program Director will be responsible to ensure all appropriate documentation on advocacy of the child's IEPs are obtained, and CHSC staff will make a minimum of three attempts to verbally recommend an update of a placed child's IEP and ensure attempts are documented within the NSP.

- Two children had initial physical examinations completed beyond their first 30 days of placement, and three children had initial dental examinations completed beyond their first 30 days of placement. In response, the Intake Coordinator will obtain the Medi-Cal information and the Staff House Manager will be responsible for ensuring the scheduling of the examinations within 30 days of placement.

- One required staff member did not have a valid California Driver's License or a current and valid First-Aid card on file. This staff was terminated by CHSC on October 20, 2011 for not producing the required documentation.

- CCL cited CHSC as a result of deficiencies and findings during their investigations. Incidents at the Baird site included a substantiated allegation of neglect, and not following mandated discharge procedures on June 2, 2011. CCL required CHSC to submit a written CAP regarding discharge procedures, steps taken to psychiatrically evaluate a client and to submit copies of SIRs, daily logs, pictures of property damage relevant to the incident, and information related to the discharge of the two involved children. On August 26, 2010, CCL cited CHSC for Neglect/Lack of Supervision and Personal Rights violations. A Plan of Correction was submitted to CCL documenting retraining of all staff addressing care and supervision issues, and personal rights including the retraining of all staff. On May 19, 2010, CCL cited CHSC for expired dates on several food items. On May 20, 2010, CHSC conducted a review of all sites for expired food items and immediately discarded any items that were beyond the expiration date and implemented a weekly purchase rotation plan. CCL also cited CHSC for not having an age exception on file for an 18 year old residing at the site. CHSC submitted documentation that the 18 year old was in placement prior to the date of the CCL Facility Evaluation Report. CHSC had submitted a Written Request for Waiver Exception to CCL Analyst prior to the stated Resident's Age of Majority.

On October 14, 2010, CCL cited CHSC at the Runnymede site for several violations including Medication Control violations for issuing PM medication in AM and not dispensing medications according to their dates prescribed. In response, staff were retrained. CCL cited CHSC for Personal Rights violations, as all the children needed additional and appropriate clothing. CHSC provided the required clothing. Also, the insufficient supply of linen at the site did not provide for changing of linen at least once a week. Additional linen was provided to the site. Additionally, CCL cited CHSC for Children's Records violations. Not all required documentation was maintained in the children's case files. The missing information was obtained and included in the files. Personnel Records violations were also cited, as the staff files lacked documentation of current CPR cards. Staff CPR certification was renewed. On February 16, 2011, CCL cited CHSC for Neglect/Lack of Supervision when a staff member left the site in the facility van and the supervision out of ratio. Staff was suspended without pay and not allowed to use the vehicle after hours. CHSC was also cited for dirty carpeting. New carpeting was installed.

On October 21, 2010, CCL cited CHSC and issued a civil penalty at the Shoup site for a Waiver and Exception violation for not having an age exemption on file for an 18 year old residing at the site, a repeat of the same violation on April 2, 2009. CHSC submitted a Written Request for Waiver Exception to CCL. CHSC was also cited for Personnel Records lacking current CPR cards. Staff CPR certification was renewed. On March 15, 2011, CHSC was cited by CCL for not properly documenting in medication records, including dates and times, dosage taken, and the client's response. Staff were counseled and retrained regarding proper documentation of medication logs.

On December 9, 2010, CCL cited CHSC at the Valerio site for Children's Personal Rights violations, as the children needed additional undergarments and clothing. CHSC provided the required clothing. On May 26, 2011, CHSC was cited for Children's Personal Rights violations for not providing children's weekly allowances in a timely manner and missing allowance log sheets. CHSC revised the procedures regarding clothing and allowances, improved manager oversight of logs and documentation, and retrained Valerio site staff regarding clothing policy and personal rights. On August 30, 2011, CHSC at the Valerio site was cited for another Children's Personal Rights violation, as a staff member was loud and verbally forceful with a child. The staff received several additional trainings including Professionalism and Anger Management, in addition to an Administrative Disciplinary Meeting. Further, CHSC will provide all staff with on-going training on Personal Rights.

On February 17, 2011, CHSC was cited by CCL for dirty carpeting at the Victory site. New carpeting was installed in March 2011.

Based on the sample of children and staff files reviewed, these issues were not present at the time of the October 2011 OHCMD review.

Due to the CCL citations that CHSC had received regarding personal allowances, clothing inventories, and personal and clothing allowance logs, OHCMD is requesting the Office of the Auditor-Controller to complete a fiscal review of CHSC.

A detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held November 7, 2011:

In attendance:

Michelle Villacorta, Program Director and Donald Luther, Monitor, DCFS OHCMD.

Highlights:

The Program Director was in agreement with most of the findings and recommendations. During the Exit Conference, she indicated that she welcomes suggestions that assist in improving in areas where needed. She expressed concern that CHSC staff should advocate for the child with the school districts to ensure IEPs are timely updated; she felt that responsibility falls on the school district.

CHSC provided an approved written CAP addressing each recommendation noted in this compliance report. The approved CAP is attached. We will assess for full implementation of recommendations during our next review.

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

PLB:RS: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
Willis E. Lucas, President, Board of Directors, Children's Homes of Southern California
Jorge Marquez, Executive Director, Children's Homes of Southern California
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

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

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

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

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

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

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

	Contract Compliance Monitoring Review	**Findings: October 2011**
I	**Licensure/Contract Requirements** (9 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Transportation	2. Full Compliance
	3. Special Incident Reports	3. Improvement Needed
	4. Compliance with Licensed Capacity	4. Full Compliance
	5. Disaster Drills Conducted & Logs Maintained	5. Full Compliance
	6. Runaway Procedures	6. Full Compliance
	7. Allowance Logs	7. Full Compliance
	8. CCL Citations/OHCMD Investigation Reports on Safety/Plant Deficiencies	8. Improvement Needed
	9. Detailed Sign In/Out Logs for Placed Children	9. Full Compliance
II	**Facility and Environment** (6 Elements)	
	1. Exterior Well Maintained	1. Full Compliance
	2. Common Areas Maintained	2. Full Compliance
	3. Children's Bedrooms/Interior Maintained	3. Improvement Needed
	4. Sufficient Recreational Equipment	4. Full Compliance
	5. Sufficient Educational Resources	5. Full Compliance
	6. Adequate Perishable and Non-Perishable Food	6. Full Compliance

III	**Maintenance of Required Documentation and Service Delivery** (13 Elements) 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Children Progressing Toward Meeting NSP Case Goals 6. Development of Timely Initial NSPs 7. Development of Comprehensive Initial NSPs 8. Therapeutic Services Received 9. Recommended Assessment/Evaluations Implemented 10. DCFS CSWs Monthly Contacts Documented 11. Children Assisted in Maintaining Important Relationship 12. Development of Timely Updated NSPs 13. Development of Comprehensive Initial/Updated NSPs	Full Compliance (ALL)
IV	**Educational and Workforce Readiness** (8 Elements) 1. Children Enrolled in School Timely 2. Children Attending School 3. Children Facilitated in Meeting Educational Goals 4. Children's Academic or Attendance Increase 5. Current IEPs Maintained 6. Current Report Cards Maintained 7. YDS/Vocational Programs Opportunities Provided 8. GH Encourage Children's Participation in YDS	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Improvement Needed 6. Full Compliance 7. Full Compliance 8. Full Compliance
V	**Health And Medical Needs** (6 Elements) 1. Initial Medical Exams Conducted 2. Initial Medical Exams Timely 3. Follow-Up Medical Exams Timely 4. Initial Dental Exams Conducted 5. Initial Dental Exams Timely 6. Follow-Up Dental Exams Timely	1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Improvement Needed 6. Full Compliance

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** (15 Elements) 1. Children Informed of Group Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Staff Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Fair Consequences 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed About Their Medication 11. Children Aware of Right to Refuse Medication 12. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 13. Children Given Opportunities to Plan Activities 14. Children Participate in Activities (GH, School, Community) 15. Children's Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities	Full Compliance (ALL)
VIII	**Personal Needs/Survival And Economic Well-Being** (8 Elements) 1. $50 Clothing Allowance 2. Adequate Quantity of Clothing Inventory 3. Adequate Quality of Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Ethnic Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance/Earnings 8. Encouragement and Assistance with Life Book	Full Compliance (ALL)

IX	**Discharged Children** (3 Elements) 1. Children Discharged According to Permanency Plan 2. Children Making Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement	Full Compliance (ALL)
X	**Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)** (12 Elements) 1. DOJ Submitted Timely 2. FBI Submitted Timely 3. CACIs Timely Submitted 4. Signed Criminal Background Statement Timely 5. Education/Experience Requirement 6. Employee Health Screening Timely 7. Valid Driver's License 8. Signed Copies of GH Policies and Procedures 9. Initial Training Documentation 10. One-Hour Child Abuse and Reporting Training 11. CPR Training Documentation 12. First-Aid Training Documentation 13. On-going Training Documentation 14. Emergency Intervention Training Documentation	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Improvement Needed 13. Full Compliance 14. Full Compliance

CHILDREN'S HOMES OF SOUTHERN CALIFORNIA GROUP HOME
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Rate Classification Level: 12

6450 Shoup Avenue
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Rate Classification Level: 12

The following report is based on a "point in time" monitoring visit and addresses findings during the October 2011 monitoring review.

CONTRACTUAL COMPLIANCE

We reviewed seven current children's files, three discharged children's files and three staff files, and/or documentation from the provider. Children's Homes of Southern California (CHSC) complied with five of 10 sections of our Contract Compliance Review: Maintenance of Required Documentation and Service Delivery; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Discharged Children. The following report details the results of our review.

LICENSURE/CONTRACT REQUIREMENT

Based on our review of seven children's case files and/or documentation from the provider, CHSC fully complied with seven of nine elements reviewed in the area of Licensure/Contract Requirements.

Based on our review of Special Incident Reports (SIRs) related to unauthorized absences (AWOLS) from January 2011 through October 2011, CHSC had not submitted the reports within the contractual timeframe. The Monitor informed the Program Director of the failure to comply with the immediate submission of SIRs related to AWOLS. The Program Director stated she understood the finding in the review and would ensure the staff would submit the SIRs per the County contract.

CCL had cited CHSC as a result of deficiencies and findings during CCL investigations. Incidents at the Baird site included a substantiated allegation of neglect, and not following mandated discharge procedures on June 2, 2011. CCL required CHSC to submit a written CAP regarding discharge procedures, steps taken to psychiatrically evaluate a client and to submit copies of SIRs, daily logs, pictures of property damage relevant to the incident, and information related to the discharge of the two involved children. On August 26, 2010, CCL cited CHSC for Neglect/Lack of Supervision and Personal Rights violations. A Plan of Correction was submitted to CCL documenting retraining of all staff addressing care and supervision issues, and personal rights including the retraining of all staff. On May 19, 2010, CCL cited CHSC for expired dates on several food items. On May 20, 2010 CHSC conducted a review of all sites for expired food items and immediately discarded any items that were beyond the expiration date and implemented a weekly purchase rotation plan. CCL also cited CHSC for not having an age exception on file for an 18 year old residing in the site. CHSC submitted documentation that the 18 year old was in placement prior to the date of the CCL Facility Evaluation Report. CHSC had submitted a Written Request for Waiver Exception to CCL Analyst prior to the stated Resident's Age of Majority.

On October 14, 2010 CCL cited CHSC at the Runnymede site for several violations including Medication Control violations for issuing PM medication in AM and not dispensing medications according to their dates prescribed. Staff were retrained. CCL cited CHSC for Personal Rights violations. as all the children needed additional and appropriate clothing. CHSC provided the required clothing. Also, the insufficient supply of linen at the site did not provide for changing of linen at least once a week. Additional linen was provided to the site. Additionally, CCL cited CHSC for Children's Records violations. Not all required documentation was maintained in the children's case files. The missing information was obtained and included in the files. Personnel Records violations were also cited, as the staff files lacked documentation of current CPR cards. Staff CPR certification was renewed. On February 16, 2011, CCL cited CHSC for Neglect/Lack of Supervision when a staff member left the site in the facility van and the supervision out of ratio. Staff was suspended without pay and not allowed to use the vehicle after hours. CHSC was also cited for dirty carpeting. New carpeting was installed.

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On December 9, 2010 CCL cited CHSC at the Valerio site for Children's Personal Rights violations, as the children needed additional undergarments and clothing. CHSC provided the required clothing. On May 26, 2011 CHSC was cited for Children's

Personal Rights violations for not providing children's weekly allowances in a timely manner and missing allowance log sheets. CHSC revised the procedures regarding clothing and allowances, improved manager oversight of logs and documentation, and retrained Valerio site staff regarding clothing policy and personal rights. On August 30, 2011 CHSC at the Valerio site was cited for another Children's Personal Rights violation, as a staff was loud and verbally forceful with a child. The staff received several additional trainings including Professionalism and Anger Management, in addition to an Administrative Disciplinary Meeting. Further, CHSC will provide all staff with on-going trainings on Personal Rights.

On February 17, 2011 CHSC was cited by CCL for dirty carpeting at the Victory site. New carpeting was installed in March 2011.

Based on the sample of children and staff files reviewed, these issues were not present at the time of the October 2011 Out-of-Home Care Management Division (OHCMD) review.

Due to the CCL citations that CHSC had received regarding personal allowances, clothing inventories, and personal and clothing allowance logs, OHCMD is requesting the Office of the Auditor-Controller to complete a fiscal review of CHSC.

Recommendations:

CHSC's management shall ensure:

1. SIRs are submitted in accordance with the contractual timeframe.

2. Children receive Psychiatric Emergency Team evaluations as needed and follow mandated discharge procedures.

3. All sites are in compliance with Title 22 Regulations and County contract requirements.

FACILITY AND ENVIRONMENT

Based on our review, CHSC complied with five of six elements reviewed in the area of Facility and Environment.

We found that deficiencies were noted at two sites. Three beds at the Victory site had dirty and stained pillows, and one bed was missing a mattress pad. These were replaced by staff at the time of the review. One large bedroom at the Runnymede site had insufficient lighting. The Program Director reports the fixture has been replaced with a larger fluorescent tube bulb fixture.

Recommendations:

CHSC's management shall ensure:

4. All children's beds are supplied with full complements of clean linen, mattress pads, and pillows.

5. The children's bedrooms have sufficient lighting.

EDUCATION AND WORKFORCE READINESS

Based on our review, CHSC fully complied with seven of eight elements reviewed in the area of Education and Workforce Readiness.

One child required, but did not have an updated current Individualized Education Plan (IEP), and efforts to obtain an updated IEP were not documented. In response, the Program Director will be responsible to ensure all appropriate documentation on advocacy of the child's IEPs are obtained and Group Home staff will make a minimum of three attempts to verbally recommend an update of a placed child's IEP.

Recommendation:

CHSC's management shall ensure:

6. The Group Home staff advocates for eligible children to obtain required timely updated IEPs.

HEALTH AND MEDICAL NEEDS

Based on our review, CHSC fully complied with four of six elements in the area of Health and Medical Needs.

CHSC ensured that all children's initial and follow-up physical and dental examinations were conducted. However, two children had their initial physical examinations and three children had their initial dental examinations three days past the first 30 days of placement. In response, the Intake Coordinator will obtain the Medi-Cal information and the Staff House Manager will be responsible for ensuring the scheduling of the examinations within 30 days of placement.

Recommendation:

CHSC's management shall ensure:

7. Initial physical and dental examinations are conducted within 30 days of placement.

PERSONNEL RECORDS

Based on our review, CHSC fully complied with 12 of 14 elements reviewed in the area of Personnel Records.

One staff was required but did not posses a valid California Driver's License and First-Aid training. He was terminated by CHSC on October 20, 2011 for not producing the required documentation.

Recommendations:

CHSC's management shall ensure:

8. All required staff have documentation of a valid California Driver's License.

9. All applicable staff maintain documentation of current First-Aid training.

FOLLOW-UP FROM THE OHCMD'S PRIOR MONITORING REVIEW

Objective

Determine the status of the recommendations reported in our prior monitoring review.

Verification

We verified whether the outstanding recommendations from our prior review were implemented. The last report was issued May 2, 2011.

Results

The OHCMD's prior monitoring report contained three outstanding recommendations. Specifically, CHSC was to ensure that Needs and Services Plans (NSPs) were timely and comprehensive, including all required elements; current NSPs were developed for each child; and all age-appropriate children were to be provided the opportunity to participate in Youth Development Services. Based on our follow-up of these recommendations, CHSC fully implemented these recommendations.

Recommendation:
None

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of CHSC Group Home has not been posted by the Auditor-Controller. Due to the CCL citations that CHSC had received regarding personal allowances, clothing inventories, and personal and clothing allowance logs, OHCMD is requesting the Office of the Auditor-Controller to complete a fiscal review of CHSC.

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

December 1, 2011

Attention: Don Luther
Department of Children and Family Services
Out of Home Care Management Division
9320 Telstar Avenue, Suite 206
El Monte, CA 91731

Dear Mr. Luther,

Please consider this Corrective Action Plan for the 2011 Monitoring Review that began on October 17, 2011 and concluded on November 7, 2011.

FINDING:
Untimely Submission of Unauthorized Absences, Special Incident Reports

CORRECTIVE ACTION:

Group Home Monitoring Review Field Exit Summary indicate that *AWOL (Unauthorized Absences) SIR's are not submitted immediately 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; this involves *timeliness* of cross-reported SIRs. 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.
- 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, Special Incident Reporting Guide.
- Program Manager will ensure the each Unauthorized Absence (AWOL) Special Incident Report completed is cross-reported via I-Track Sunday thru Thursday, immediately.

- Administrator/Program Manager will ensure that each Special Incident Report completed is cross-reported via I-Track Tuesday thru Saturday, immediately.
- CHSC, Intake Coordinator will conduct weekly reviews on completion of Resident's Special Incident Reports in accordance with SOW, Exhibit A-VIII, Special Incident Reporting Guideline to ensure maintenance of timely cross-reported Special Incident Report of all placed youth.

FINDING:

Insufficient Lighting (1), Unsanitary Pillows (2), No Mattress Pad (1)

CORRECTIVE ACTION:

Group Home Monitoring Review Field Exit Summary indicates that *Bedrooms #2 & #3 had dirty pillows and bed #1 had no mattress pad which* all items replaced at the time of Monitor's Review. Additionally, Group Home Performance Review Field Exit Summary indicates that there was *insufficient lighting in Bedroom #3*; this involves *maintenance* of the children's bedrooms. In order to prevent this from recurring in the future, Children's Homes of Southern California (CHSC) has enacted the following corrections:

- Upon each youth Agency Intake, CHSC, Intake Coordinator will provide each youth a brand new unwrapped pillow to ensure that each resident will have clean and sanitary pillows.
- Each placed youth will have two (2) available mattress pads supplied and maintained within the youth's bedroom. CHSCH House Manager (FMII) will ensure mattress pads are available for each youth's usage.
- Additionally, each CHSC Facility will maintain an inventory of six (6) pillows and twelve (12) mattress pads for their current population. The CHSC House Manager (FMII) will conduct weekly inventory to ensure that the stock is maintained for each placed youth. Upon depletion of inventory each CHSC House Manager will notify the CHSC On-Duty Program Manager to obtain more pillows and mattress pads in accordance with the specified inventory.
- CHSC, Program Director will complete semi-annual inventory and purchase needed items (pillows and mattress pads) to ensure adequate stock of inventory is maintained for a total of 30 placed youth accordingly.
- CHSC, Maintenance Technician installed in Bedroom # 3 at the Runnymede Group Home a four bulb fluorescent light in the middle of the bedroom to increase and consistently ensure adequate lighting for the placed youth.
- In the future, CHSC, Program Managers will tour the group homes on a weekly basis and note any deficiencies accordingly.
- In the event that deficiencies are noted, CHSC Facility Manager will submit a written Maintenance Repair Request to the CHSC, Maintenance Technician will initiate and complete needed repair accordingly.

FINDING:

Missing Updated Individualized Education Plan (1), No Advocacy Documented

CORRECTIVE ACTION:

Group Home Monitoring Review Field Exit Summary indicate that *one (1) youth was to have had an Individualized Education Plan (IEP) completed in April 2011 and no documentation regarding GH Advocating to school for Update*; this involves *school advocacy* for placed youth. In order to prevent this from recurring in the future, Children's Homes of Southern California (CHSC) will enact the following corrections:

- Upon placement of a youth, the Intake Coordinator will obtain knowledge of the Holder of Educational Rights per the DCFS Notification to School Form. This will ensure that the CHSC Facility will have accurate information for advocating on behalf of the placed youth.
- CHSC GH Facility Manager II (House Manager) will review with school personnel dates of IEP in accordance with the placed youth. In the event that the placed youth is in need of an update the CHSC Facility Manager II will notify the Holder of Educational Rights (i.e, parent, DCFS/Court). Additionally, a Special Incident Report will be written in order to identify educational needs to all involved parties of youth's case. This will ensure increase accuracy for appropriate advocacy of the implementation of the Individualized Education Plan (IEP).
- In the event, the youth's case-carrying CSW is not available as the identified *Holder of Educational Rights* for the Individualized Education Plan the GH Staff will make a minimum of three (3) attempts to verbally recommend an update a placed youth's IEP. These attempts will be documented under the ACT® Program and/or the Progress Notes of the placed youth to be available for documentation onto the NSP/Quarterlies.
- Evidence of these attempts will be maintained and complied for data entry by CHSC Staff onto the placed youth's NSP/Quarterly, School Information Section in order to demonstrate to DCFS Auditors/Monitors that the attempts were made in a timely manner in accordance with SOW requirements.
- Administrator/Program Director will be responsible for ensuring the aforementioned is completed to ensure all appropriate documentation on Advocacy of the youth's IEPs are obtained for implementation on the youth's NSP/Quarterlies .

FINDING:

Untimely Medical and Dental Examinations

CORRECTIVE ACTION:

Group Home Monitoring Review Field Exit Summary indicates that two *youth had untimely initial medical examinations completed and three untimely dental examinations completed* for the period of review. In order to prevent this from occurring in the future Children's Homes of Southern California (CHSC) will enact the following corrections.

- Upon placement, CHSC, Intake Coordinator, will obtain documentation (i.e., Medi-Cal) for Placed Youth in order to provide a timely initial medical and dental examination in accordance with SOW requirements.

- In the event a youth has no assigned or functional Medi-Cal Information, Intake Coordinator will contact Case-Carrying DCFS CSW to obtain correct Medi-Cal Information.
- Documentation of Medi-Cal Information obtained will be maintained in Youth's File via CHSC ACT® system accordingly.
- Upon each youth's placement at the GH, the CHSC Staff House Manager (Facility Manager II) will be responsible for ensuring the scheduling of the placed youth's medical, dental, and vision examination. These examination dates will be completed on the CHSC Form entitled "To be completed within 30 Days" (please see enclosed).
- Upon completion of CHSC Form, Program Managers will receive a hard copy of said DUE DATES as well have the information entered into each placed youth's file and CHSC ACT ® system. This will ensure follow up of placed youth receiving said services in accordance with SOW requirements.
- In the event the placed youth *refuses said services* in accordance with their personal rights, a Special Incident Report will be completed by CHSC and forwarded to appropriate parties in accordance with SOW, Exhibit A-VIII, Special Incident Reporting Guidelines.
- Upon completion of the initial medical and dental examination, CHSC Staff, Executive Assistant will maintain documentation in placed Youth's folder and CHSC ACT ® system.
- CHSC, Program Managers will be responsible for ensuring completion of the aforementioned information.

FINDING:

Missing Valid CA Driver's License (1) & Current First Aid Training (1).

CORRECTIVE ACTION:

Group Home Monitoring Review Field Exit Summary indicates that CHSC Staff Person "*did not have a valid CA Driver's License, only a current CA Identification Card*". Additionally, CHSCH Staff Person "did not have documentation of current First Aid Training" for the period of review. **Please note:** CHSC Staff person was employment was terminated with the Agency on October 20, 2011 for failure to provide required documentation to Agency. In order to prevent this from occurring in the future, Children's Homes of Southern California (CHSC) will enact the following corrections:

- Upon hire, CHSC, Executive Assistant will contact prospective employee to submit required documentation utilizing CHSC "Conditional Offer of Employment" Form.
- All newly hired CHSC Staff will be required to submit a VALID CA Driver's License prior to the start of their Orientation in accordance with the "Conditional Offer of Employment" Form (please refer to enclosed). This will ensure ALL CHSC Staff will have a valid CA Driver's License in accordance with SOW requirements.
- Additionally, all newly hired CHSC Staff will complete First Aid Training prior to the completion of their 40 hour observation period.
- Training data for staff will be inputted into the computer under TrackSmart ® by CHSC Executive Assistant to be monitored on a quarterly basis by

Program Managers to ensure accurate updates of staff training needs before Expiration date.

- Each quarter, all CHSC Staff Training data including CPR and First Aid will be reviewed during the Agency Program Meeting to ensure all CHSC are current in their In the future, this will ensure all training to be completed in a timely manner and maintained in accordance with SOW requirements.

Thank you for allowing us the opportunity to correct these findings and submit this corrective action.

Sincerely,

Michelle Villacorta, MA
Administrator/Program Director
Children's Homes of Southern California

Enclosures:

CHSC To Be Completed in 30 Day Form
CHSC Conditional Offer of Employment Form

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

Must have done in 30 days upon Resident Intake!

Name of Resident: _____

Date of Physical Exam: _____

Date of Dental Exam: _____

Date of Eye Exam: _____

Date Resident Starts School: _____
If after three days, S.I.R must be written EACH DAY Resident is out and explain Why.

Date of Next Court Hearing: _____

Date of Dr. Grosz Eval: _____

Please ensure all Examination Forms are completed & turned into Melina's box immediately.

Thank You

Theresa Turner & Crystal Patin,
Program Managers

Children's Homes of Southern California
22455 Victory Blvd.- West Hills, CA. 91307
Tel (818) 592-2960 Fax (818) 592-2961

Date: _____
To: _____
From: Jorge Marquez, Executive Director
Re: Conditional Offer of Employment

Children's Homes is pleased to offer you a position as _____ effective upon completion of the documentation required below. Please understand this is a conditional offer of employment, which is contingent upon having successfully completed a 40-hour training period after providing us with the following documents:

1. Current DMV print-out.
2. Copies of driver's license and Social Security Card.
3. T.B. tine test + pre-employment physical from U.S. Healthworks.
4. Official school transcripts (must be sealed/stamped), if listed on application.
5. Two signed letters authorizing release of information re: former employment.
6. Fingerprint clearance or copy of application to Department of Justice clearance.

On your first day of work, please report to the Administrative Assistant for orientation at the main office located at 22455 Victory Boulevard, West Hills. At that time you will be required to read all company manuals pertaining to our treatment program, our Personnel Policies & Procedures, Personnel Policies & Practices, and the Child Care Worker Handbook. This normally takes eight hours.

When you have finished all your processing and reading, you will report to your assigned house per either Program Managers to fulfill your 40-hour observation and training period. Company medical/dental benefits begin after the third month (90 days) of employment for Full-time employees. In addition, full-time employees will also begin to accrue sick time. Your orientation period is six (6) months, after which, you are considered trained and ready. At this time, you will begin to accrue vacation and holiday time if you are Full-time (40 hours/week).

Children's Homes would like to welcome you, and wish you the best of luck. If you have any questions, please don't hesitate to call.

Sincerely,
Jorge Marquez, Executive Director