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

PHILIP L. BROWNING
Director

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November 27, 2012

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
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Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

FIVE ACRES 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 Five Acres Group Home (Five Acres) in August 2012. Five Acres has two sites located in the Fifth Supervisorial District and provides services to Los Angeles County DCFS foster children and youth. According to Five Acres' program statement, its purpose is "to provide services to male and female court dependent seriously emotionally disturbed children."

Five Acres has one six-bed site and one 50-bed site and is licensed to serve a capacity of 56 boys or girls, ages seven through 18. At the time of the review, Five Acres served 38 placed DCFS children. The placed children's overall average length of placement was 14 months and their average age was 15.

SUMMARY

During our review, the children interviewed generally reported feeling safe at Five Acres and having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity.

Five Acres was in full compliance with nine of 10 areas of our 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.

We noted deficiencies in the area of Licensure/Contract Requirements. Community Care Licensing (CCL) had cited Five Acres on safety and physical plant deficiencies on March 28, 2012 and July 13, 2012. Five Acres needed to monitor the temperature of the hot water at the Solita site and install a cover over the Residential Treatment Center (RTC) boardroom fireplace. We instructed Five Acres supervisory staff to enhance monitoring in order to eliminate safety and physical plant deficiencies.

Attached are the details of our review.

REVIEW OF REPORT

On September 12, 2012, the DCFS OHCMD Monitor, Edward Preer, held an Exit Conference with Five Acres staff, Elizabeth Gonzalez, Director; Rosario Samayoa Quality Assurance Supervisor; Melissa Spragg, Clinical Supervisor; Chin Ling Chen, Group Home Program Supervisor; Jude Ann Catayong, Quality Assurance Analyst; Angie Loilur, Assistant Director of Milieu Services; Manuel Mercado, Clinical Supervisor; Leon Lozano, Public School Coordinator; Donna LeCesne, Director of Milieu Services, RTC Liaison; Cindy Coons, Director of Mental Health Services; and Frances Colella, Supervisor of Health Services. Five Acres representatives were in agreement with the review findings and recommendations, were 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 compliance report has been sent to the Auditor-Controller (A-C) and CCL. Five Acres provided the attached approved CAP addressing the recommendations noted in this Compliance Report. We 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:RRS:KR
EAH:PBG:ep

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
Chanel Boutakisis, Executive Director, Five Acres Group Home
Lenora Scott, Regional Manager, Community Care Licensing

FIVE ACRES GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2012-2013

SCOPE OF REVIEW

The purpose of this review was to assess Five Acres' compliance with its County contract requirements and State regulations and included a review of the Five Acres' 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. We interviewed each child and reviewed their case files to assess the care and services they received. At the time of the review, seven 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. Additionally, three discharged children's files were reviewed to assess Five Acres' compliance with permanency efforts.

We reviewed five staff files for compliance with Title 22 Regulations and County contract requirements, and conducted site visits to assess the provision of quality of care and supervision.

CONTRACTUAL COMPLIANCE

We found the following area out of compliance.

Licensure/Contract Requirements

- We found that on March 28, 2012, CCL had cited Five Acres' Solita site due to a safety violation; the temperature of the water was too hot. Five Acres needed to monitor the temperature of the hot water at the Solita site. The Five Acres' maintenance staff corrected the hot water temperature and added monitoring the temperature of the hot water to his weekly maintenance check list. CCL cleared Five Acres of the safety deficiency during a follow-up visit to the Solita site on March 29, 2012.

- On July 13, 2012, CCL cited Five Acres Residential Treatment Center (RTC) due to physical plant deficiency; the boardroom fireplace did not have a cover. Five Acres reported that the boardroom fireplace had not been used in 20 years; however, a fireplace cover was installed. CCL cleared Five Acres RTC site of the physical plant deficiency upon receiving documentation that the boardroom fireplace was covered on July 23, 2012.

Five Acres will enhance monitoring of its sites in order to eliminate safety and physical plant deficiencies.

Recommendation

Five Acres' management shall ensure that:

1. All sites are maintained in compliance with Title 22 regulations and County contract requirements.

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

The OHCMD's last compliance report dated July 24, 2012 identified two recommendations.

Results

Based on our follow-up, Five Acres fully implemented both previous recommendations for which they were to ensure that:

- They develop comprehensive Initial NSPs.
- They develop comprehensive Updated NSPs.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of Five Acres has not been posted by the A-C.

FIVE ACRES GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

760 W. Mountain View Street
Altadena, CA 910011
License # 191200236
Rate Classification Level: 12

1236 Solita Rd.
Pasadena, CA 91103
License # 191290123
Rate Classification Level: 12

	Contract Compliance Monitoring Review	**Findings: August 2012**
I	**Licensure/Contract Requirements** (9 Elements) 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	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Improvement Needed
II	**Facility and Environment** (5 Elements) 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms 4. Sufficient Recreational Equipment/Educational Resources 5. Adequate Perishable and Non-Perishable Foods	Full Compliance (ALL)
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	Full Compliance (ALL)

	9. Development of Timely, Comprehensive Initial NSPs with Child's Participation 10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation	
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	Full Compliance (ALL)

	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)	
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	Full Compliance (ALL)
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)

five acres

October 4, 2012

Edward Preer
County of Los Angeles
Department of Children and Family Services
Out of Home Care Management Division
9320 Telstar Avenue #216
El Monte, CA 91731

FIVE ACRES CORRECTIVE ACTION PLAN (CAP)

Mr. Preer,

This letter is in response to Five Acres Group Home Monitoring Performance Review Results completed by Mr. Edward Preer in September 2012. Five Acres Group Home was asked to submit a Corrective Action Plan to address the deficiencies which have been cleared by CCL prior to monitoring review.

Final Monitoring Review Field Exit Summary September 12, 2012:

I. Licensure/Contract Requirements

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

Findings:
-CCL cited Solita site on March 28, 2012: hot water measured 130. CCL cleared citation on March 29, 2012.
-CCL cited the Residential Treatment Center on July 13, 2012: fire place in the Boardroom will have a protective cover installed. CCL cleared citation on July 23, 2012.

CAP

-Five Acres Operations Staff will continue to test the hot water temperature on a weekly basis to ensure it remains within the safe temperature of between 105

five acres

and 120 degrees Fahrenheit. The Operation Staff will document the temperature check in the Solita Group Home Maintenance Log.

-The fire place has not been used in over 20 years. Five Acres operations installed fire place covers. Five Acres will continue to ensure that the protective covers remain in place.

If you have any questions please contact Elizabeth Gonzalez at 626 798-6793 ext. 2268 or

Sincerely,

Elizabeth Gonzalez, LMFT

Program Director

Residential Treatment Services