County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

PHILIP L. BROWNING
Interim 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, 2011

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

From: Philip L. Browning
Interim Director

HATHAWAY-SYCAMORES CHILD AND FAMILY SERVICES CONTRACT COMPLIANCE MONITORING REVIEW

In accordance with your Board's April 14, 2009 motion, we are informing your Board of the results of a group home compliance review.

Hathaway-Sycamores Child and Family Services is located in the 5th Supervisorial District and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to Hathaway-Sycamores Child and Family Services' program statement, its goal is to "transition resourceful, responsible and resilient youths back to their family and community." Hathaway-Sycamores Child and Family Services has one campus, with a licensed capacity for 48 children, and serves boys ages 6-17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of the agency in December 2010 at which time it had a total population of five DCFS placed children. The placed children's overall average length of placement was six months, and their average age was 16. For the purpose of this review, these five children's files were reviewed, and ten staff files were reviewed for compliance with Title 22 regulations and contract requirements.

All five DCFS children were on psychotropic medication. We reviewed their case files to assess timeliness of psychotropic medication authorizations (PMA) and to confirm that medication logs documented correct dosages were being administered as prescribed.

SCOPE OF REVIEW

The purpose of this review was to assess Hathaway-Sycamores Child and Family Services' compliance with the contract and State regulations. The visit included a review of the agency's program statement, administrative internal policies and procedures, five children's files, and ten personnel files. Visits were made to the group home site to assess the quality of care and supervision provided to children, and we conducted interviews with five 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

Generally, Hathaway-Sycamores Child and Family Services was providing services as outlined in its program statement. Overall, the children reported that they were satisfied residing in the Group Home. The agency needed to address one physical plant deficiency that was identified during the inspection of the facility; several window screens were missing from sliding windows on three buildings.

NOTABLE FINDINGS

The following are the notable findings of our review:

- Three of five children taking psychotropic medications did not have current approved PMAs for the Melatonin they were taking for insomnia. Hathaway-Sycamores sent documentation to OHCMD that the requested PMAs for two of the children had been submitted to the court for authorization. The third child is no longer placed with the agency.

- Clothing allowance logs were not always signed by the children even though the format accommodates children's signatures. Some of the children were unaware of the amount of money they were receiving toward clothing each month. The Residential Director stated that staff would ensure the children sign the logs to acknowledge the amount they receive and any balance they may have remaining.

  One child did not have sufficient clothing to meet the DCFS Clothing Standard for quantity. The Residential Director and Monitor reviewed the clothing with the child and found the child was lacking four pairs of pants. Hathaway-Sycamores has since sent documentation to OHCMD that the child has been provided a sufficient amount of pants.

- Four interviewed children reported that staff treated them with respect and dignity; However, while one child reported that the staff were "great," he reported that two of the staff "get mad over the simplest things and sometimes yell and have

attitudes." This was immediately brought to the attention of the Residential Director who stated he would counsel and monitor the staff, and the issue would be addressed in training sessions. Documentation of the counseling sessions were forwarded to OHCMD.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held July 1, 2011.

In attendance:

Deborah Morehead, Vice President, and Shawn Bettencourt, Residential Director, Hathaway-Sycamores Child and Family Services; and Donald Luther, Monitor, DCFS OHCMD.

Highlights:

The Vice President and Residential Director were attentive to each of the findings and recommendations presented by the Monitor. The Vice President stated she understood the findings in the review. The physical plant deficiency of the window screens was discussed, and the Residential Director advised that the agency was in the process of replacing the missing screens; he presented the Monitor with work orders that had been submitted to the maintenance department.

The need for PMAs for psychotropic medication was discussed. The Residential Director stated that the nursing department was now aware of the requirement and would forward OHCMD copies of submitted PMAs for each of the children. Hathaway-Sycamores has since sent documentation to OHCMD that the requested PMAs for two of the children had been submitted to the court for authorization. The third child is no longer placed with the agency.

Regarding the child's report of poor staff attitudes and yelling, the Residential Director stated he would counsel and monitor the staff, and the issue would be addressed in training sessions. Documentation of the counseling sessions was forwarded to OHCMD.

The Residential Director ensured that the one child lacking sufficient clothing was provided with necessary clothing to meet the DCFS Clothing Standard. Hathaway-Sycamores has since sent documentation to OHCMD that the child has been provided a sufficient amount of pants. The Residential Director stated he did not know why the children had not been signing clothing allowance logs on a regular basis. He stated that staff would ensure the children sign the logs to acknowledge the amount they received and any remaining balance.

As agreed, Hathaway-Sycamores Child and Family Services provided a timely Corrective Action Plan (CAP) addressing each recommendation noted in this Compliance Report.

As noted in the monitoring protocol, a follow-up visit will be conducted to address the provider's approved CAP and assess for full implementation of recommendations. If you have any questions, your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:RS:KR
EAH:DC:dl

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Donald H. Blevins, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
William Martone, Executive Director, Hathaway-Sycamores Child and Family Services
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

HATHAWAY-SYCAMORES CHILD AND FAMILY SERVICES
CONTRACT COMPLIANCE MONITORING REVIEW

Hathaway-Sycamores Group Home
2933 North El Nido Drive
Altadena, California 91001
License Number: 197804907
Rate Classification Level: 14

	Contract Compliance Monitoring Review	Findings: December 2010
I	**Licensure/Contract Requirements** (9 Elements) 1. Timely Notification for Child's Relocation 2. Stabilization to Prevent Removal of Child 3. Transportation 4. SIRs 5. Compliance with Licensed Capacity 6. Disaster Drills Conducted 7. Disaster Drill Logs Maintenance 8. Runaway Procedures 9. Allowance Logs	 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** (6 Elements) 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non Perishable Food	 1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance
III	**Program Services** (8 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. Therapeutic Services Received 6. Recommended Assessments/Evaluations Implemented 7. DCFS CSWs Monthly Contacts Documented 8. Comprehensive NSPs	 Full Compliance (ALL)

IV	**Educational and Emancipation Services** (4 Elements) 1. Emancipation/Vocational Programs Provided 2. ILP Emancipation Planning 3. Current IEPs Maintained 4. Current Report Cards Maintained	Full Compliance (ALL)
V	**Recreation and Activities** (3 Elements) 1. Participation in Recreational Activity Planning 2. Participation in Recreational Activities 3. Participation in Extra-Curricular, Enrichment and Social Activities	Full Compliance (ALL)
VI	**Children's Health-Related Services (including Psychotropic Medications)** (9 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 3. Medication Logs 4. Initial Medical Exams Conducted 5. Initial Medical Exams Timely 6. Follow-up Medical Exams Timely 7. Initial Dental Exams 8. Initial Dental Exams Timely 9. Follow-Up Dental Exams Timely	1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance
VII	**Personal Rights** (11 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. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed about Psychotropic Medication 11. Children Aware of Right to Refuse Psychotropic Medication	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance

VIII	**Children's Clothing and Allowance** (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 Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance 8. 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 8. Full Compliance
IX	**Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)** (12 Elements) 1. Education/Experience Requirement 2. Criminal Fingerprint Cards Timely Submitted 3. CACI's Timely Submitted 4. Signed Criminal Background Statement Timely 5. Employee Health Screening Timely 6. Valid Driver's License 7. Signed Copies of GH Policies and Procedures 8. Initial Training Documentation 9. CPR Training Documentation 10. First Aid Training Documentation 11. On-going Training Documentation 12. Emergency Intervention Training Documentation	Full Compliance (ALL)

HATHAWAY-SYCAMORES CHILD AND FAMILY SERVICES
CONTRACT COMPLIANCE MONITORING REVIEW

Hathaway-Sycamores Group Home
2933 North El Nido Drive
Altadena, California 91001
License Number: 197804907
Rate Classification Level: 14

The following report is based on a "point in time" monitoring visit and addresses findings noted during the December 2010 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review of five children's files and ten staff files, and/or documentation from the provider, Hathaway-Sycamores Child and Family Services was in full compliance with four of nine sections of our Contract Compliance review: Program Services, Educational and Emancipation Services, Recreation and Activities, and Personnel Records. The following report details the results of our review:

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of five children's case files and/or documentation from the provider, Hathaway-Sycamores Child and Family Services fully complied with eight of nine elements reviewed in the area of Licensure/Contract Requirements.

Hathaway-Sycamores Child and Family Services maintained a current license for the site and was in compliance with the licensing capacity. The Agency provided for the children's transportation needs. Disaster drills were conducted at least every six months and logs were appropriately maintained. Personal allowance logs were appropriate and comprehensive; however, the clothing allowance logs were not always signed by the children although the format accommodates their signatures. In addition, some of the children were unaware of the amount of money they were to receive toward clothing each month. The Residential Director stated that staff would ensure the children signed the logs to acknowledge the amount they receive and any remaining balance.

Recommendation:

Hathaway-Sycamores Child and Family Services management shall ensure that:

1. Appropriate and comprehensive allowance logs are maintained.

FACILITY AND ENVIRONMENT

Based on our review of Hathaway-Sycamores Child and Family Services, review of five children's case files and/or documentation from the provider, Hathaway-Sycamores Child and Family Services complied with five of six elements in the area of Facility and Environment.

The exterior of the group home was well maintained, and the campus grounds were clean and adequately landscaped. However, several window screens were missing off the slider windows on Hutter, Rowland and Circle M buildings. The Residential Director provided the Monitor with copies of the work orders to the maintenance department for replacement of the screens.

The common quarters were well maintained and clean. There was adequate furniture, lighting, and storage space. The carpeting was clean and in good condition. Children's bedrooms were comfortable and well maintained, and the furniture was in good condition. Each bedroom had sufficient lighting and storage space, and each bed had a full complement of clean linen.

Board games, TVs and DVD players were available for the children. Books and resource materials, including computers with a variety of programs were also available. The group home maintained age-appropriate and accessible recreational equipment.

There was an adequate supply of perishable and non perishable foods and it was properly stored.

Recommendation:

Hathaway-Sycamores Child and Family Services management shall ensure that:

2. The group home's exterior is well maintained.

CHILDREN'S HEALTH-RELATED SERVICES, INCLUDING PSYCHOTROPIC MEDICATION

Based on our review of five children's files, interviews with the five children and/or documentation from the provider, Hathaway-Sycamores Child and Family Services fully complied with eight of nine elements in the area of Children's Health-Related Services, including Psychotropic Medication.

The Group Home ensured that all children's initial and follow-up physical and dental examinations were conducted in a timely manner. Each child on psychotropic medication was routinely seen by the prescribing psychiatrist, and all children were aware of their right to refuse medication. Two of the five children taking psychotropic medications had current approved PMAs. However, three children did not have current approved PMAs for Melatonin prescribed to assist with sleep. The Residential Director stated that the nursing department was now aware of the requirement. Hathaway-Sycamores sent documentation to DCFS that the requested PMAs for two of the children had been submitted to the court for authorization. The third child is no longer placed with the agency.

Recommendation:

Hathaway-Sycamores Child and Family Services management shall ensure that:

3. Current court authorizations are obtained and maintained for the psychotropic medication each child is prescribed.

PERSONAL RIGHTS

Based on our review of five children's files, interviews with the five children and/or documentation from the provider, Hathaway-Sycamores Child and Family Services complied with 10 of 11 elements in the area of Personal Rights.

All five children interviewed reported that they were assigned chores that were reasonable and were not overly demanding. The children also reported that they were allowed to make and receive personal telephone calls, send and receive unopened mail, and have private visitors. The children reported that they had the opportunity to attend the religious services of their choice. They reported satisfaction with meals and snacks and that they were satisfied with the Group Home's food. The five children also reported that they received requested medical, dental, and psychiatric care. Four interviewed children expressed satisfaction with the quality of their interactions with staff and reported that the staff members treated them with respect and dignity. However, while one child reported that the staff was "great," he reported that two of the staff "get mad over the simplest things and sometimes yell and have attitudes". This was immediately brought to the attention of the Residential Director who stated he would counsel and monitor the staff, and the issue would be addressed in training sessions. Documentation of the counseling sessions was forwarded to the Out-of-Home Care Management Division (OHCMD).

All five children reported that they were given information about the group home's policies and procedures regarding discipline, children's personal rights, house rules, and children's complaint grievance procedures. The children reported that the discipline policies were consistently enforced, fair and that there were appropriate consequences for inappropriate behavior. The five children reported that they felt safe in the Group Home and were provided with appropriate staff supervision.

Recommendation:

Hathaway-Sycamores Child and Family Services management shall ensure that:

4. Staff treat all children with respect and dignity.

CLOTHING AND ALLOWANCE

Based on our review of five children's case files and/or documentation from the provider, Hathaway-Sycamores Child and Family Services management fully complied with seven of eight elements reviewed in the area of Clothing and Allowance.

Based on our review, Hathaway-Sycamores Child and Family Services management provided the required $50 per month for clothing. The children reported their clothing inventories were of adequate quality; however, one child did not have a sufficient quantity of clothing to meet DCFS Clothing Standards. The Residential Director and Monitor reviewed the clothing with the child and found the child was lacking four pairs of pants. Hathaway-Sycamores Child and Family Services has since sent documentation to OHCMD that the child has been provided a

sufficient amount of pants. The children were involved in the selection of their clothing and provided with adequate personal care items.

The children reported they were always provided with at least the minimum monetary allowance and they were free to manage their allowances.

Children stated they were encouraged and assisted in creating and updating a life book/photo album.

Recommendation:

Hathaway-Sycamores Child and Family Services management shall ensure that:

5. All children's on-going clothing inventories are of adequate quantity.

FOLLOW-UP FROM THE 2009 OHCMD MONITORING REPORT

Objective

Determine the status of the recommendations reported in the 2009 OHCMD monitoring review for Hathaway-Sycamores Child and Family Services.

Verification

We verified whether the outstanding recommendations from the August 31, 2010 report were implemented.

Results

DCFS' prior monitoring report contained 15 outstanding recommendations. Hathaway-Sycamores Child and Family Services was to ensure children sign for their allowances, NSPs are comprehensive, missing window screens are replaced, proper carpet maintenance, and repair of appliances. Also, Hathaway-Sycamores Child and Family Services were to ensure bedrooms were properly maintained and timely repaired, and all beds have a full complement of linen. Additionally, current court authorizations were to be obtained and maintained, and all children were to feel safe in the Group Home. Further, Hathaway-Sycamores Child and Family Services was to ensure that children were provided with the required clothing items, were provided the opportunity to shop and select their clothing, and were encouraged and assisted in creating and maintaining photo albums/life books. Lastly, Hathaway-Sycamores Child and Family Services was to maintain current criminal background statements, completed initial health screening for their required employees, and ensure that staff complete required trainings, including initial training, CPR, First Aid, and required annual training. Corrective action was requested of Hathaway-Sycamores Child and Family Services to further address these findings.

Recommendation:

Hathaway-Sycamores Child and Family Services management shall ensure that:

6. The outstanding recommendations from the previous report dated August 31, 2010, which are noted in this report as Recommendations 1, 2, 3, and 5, are fully implemented.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of Hathaway-Sycamores Child and Family Services has not been posted by the Auditor-Controller.

HEAL. HOPE. THRIVE.
Hathaway-Sycamores
CHILD AND FAMILY SERVICES

July 29, 2011

Ms. Dorothy Channel
Mr. Donald Luther
Out of Home Care Management Unit
9320 Telstar Avenue #206
El Monte, CA 91731

Dear Ms. Channel and Mr. Luther,

This letter is Corrective Action Plan in response to the Final Performance Evaluation Results and the Group Home Contract Compliance Review Field Exit Summary. As no issues were noted on the Final Performance Evaluation Review, this CAP will address the issues noted in the Group Home Contract Compliance Review Field Exit Summary.

The Plan of Correction is as follows:

I. "Not all children are regularly signing the clothing allowance logs and are not aware of the amount of money they receive."

Residential Director will hold a meeting with all youth to review the clothing money amount that each youth receives. This meeting will occur by August 30, 2011.

6 – 2 Daily Unit Staff is the staff that takes the children to the stores to purchase their clothing. Residential Director will review with 6 – 2 Daily Unit Staff by August 30, 2011, the procedures and requirement to have each child sign their clothing allowance logs. Upon completion of this review, youth will sign their clothing allowance logs on a regular basis.

II. "Window screens are missing on the sliding windows of the Hutter (should be Hunter) cottage. On Circle M, the screens are missing from the bathroom, first office, therapy room and cubical room windows. On the Rowland cottage "B" side, the screens for the kitchen and bathroom are missing."

See attached maintenance request forms that were submitted 7/1/2011. All screens were replaced. They had all been replaced by 7/8/2011.

VI. 3 clients "are receiving Melatonin to aid with sleep. No PMA for the medication."

Please see attached PMAs for Client 1 and 2. Melatonin was added and submitted to courts on 7/28/2011. Client 3 is no longer in our care.

Residential Director will review the issues of adding any type of medication that is being utilized for behavioral changes (i.e. Melatonin for sleep) to the PMA request, with Medication Support Assistant Direct by August 30, 2011.

As PMAs are submitted, Medication Support Assistant Director will review that any medication being prescribed for behavioral changes will be included on the PMAs.

VII. Client 4 "reports that the staff are "great." However, he feels that two staff get mad over the simplest things and sometimes yell and have attitudes."

On 7/29/2011 VP Residential Services conducted a confidential conversation with Client 4 to identify the two staff that "get mad."

One of the identified staff members already had a disciplinary meeting with Human Resources and the VP of Residential Services on 7/22/2011. A performance plan was created with the expectations of changed behaviors. Follow up has occurred with that staff by VP of Residential Services on 7/25 and 7/29. Additionally, on 7/29, during the conversation with Client 4, VP of Residential Services inquired about if he had noted anything different in the last few days with this staff. Client 4 stated that staff has "changed and has been better."

For the second identified staff, a disciplinary meeting will occur by August 15, 2011. A similar performance plan will be created along with follow up with the staff and check in with the client regarding changes in staff behavior.

VIII. Client 5 "was lacking 4 pants."

On 7/2011, additional pants and other items of clothing were purchased for Client 5. See attached purchase order.

By 7/30/2011, Residential Director will review with 6 – 2 Daily Unit Staff the policy regarding frequency of conducting a clothing inventory as well as the adequate amount of clothing that each child should own. From 7/30/2011, clothing inventories will be regularly completed by unit staff and adequate clothing will be provided.

It is our policy and practice to make sure that we are in compliance with our contract and with DCFS and Title 22 requirements. We will continue to monitor ourselves to remain in compliance.

Thank you for you time and consideration. Please contact me if you have any questions.

Sincerely,

Debbie Morehead

Debbie Morehead
VP of Residential Services
(626) 395 – 7100 ext. 6270