County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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September 15, 2011

To: Supervisor Michael D. Antonovich, Mayor
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Supervisor Don Knabe

From: Philip L. Browning
Interim Director

HERITAGE GROUP HOMES 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.

Heritage Group Homes is located in the 1st, 4th and 5th Supervisorial Districts and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to Heritage Group Homes' program statement, its goal is to "enable each child to develop the necessary interpersonal skills and self-esteem to successfully function as a self-sufficient and productive person in society." Heritage Group Homes has five group home sites, each with a licensed capacity for six children, two sites serving boys ages 12 through 17, and three sites serving girls ages 12 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Heritage Group Homes in November 2010 at which time the agency had a total population of 30 DCFS placed children. The children's overall average length of placement was four months and their average age was 15. For the purpose of this review, 15 placed children's files were reviewed; however, only 14 of the 15 children were interviewed as one child was on runaway status and unavailable to be interviewed. Seven staff files were reviewed for compliance with Title 22 regulations and contract requirements.

Eight DCFS children were on psychotropic medication. We reviewed their case files to assess timeliness of psychotropic medication authorizations 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 Heritage Group Homes' compliance with the contract and State regulations. The visit included a review of the agency's program statement, administrative internal policies and procedures, 15 children's case files, and seven personnel files. Visits were made to each group home site to assess the quality of care and supervision provided to children, and we conducted interviews with 14 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, Heritage Group Homes was providing services as outlined in the agency's program statement. Overall, the children interviewed reported they were satisfied residing in the Group Home and with the services they received.

Heritage Group Homes needed to develop comprehensive Needs and Services Plans (NSP) and to address some physical plant deficiencies that were identified during the inspection of the facilities such as replacement of damaged and missing window screens, a broken window, fascia board repair, and insufficient lighting. In addition, a few possible safety hazards were found and immediately brought to the Administration's attention. The agency began these repairs prior to the completion of our review, and the deficiencies have since been corrected.

NOTABLE FINDINGS

The following are the notable findings of our review:

- Of the 28 initial and updated NSPs reviewed, 10 were not comprehensive in that they did not contain all the required elements in accordance with the NSP template. Some lacked emancipation goals; documentation of the Group Home contacts with the Children's Social Workers (CSW), including specific dates, purpose, and outcomes. While separate documentation of children's initial physical and dental examinations was found during the review, some of these examinations were not recorded in some NSPs.

- A few physical plant deficiencies that needed to be corrected to eliminate possible safety hazards included replacement of a broken window, securing weightlifting free weight plates when not in use and supervised, and removal of a tree stump from the lawn area. The broken window was replaced; the weight plates were secured in a locked cabinet and are being removed and supervised by staff at each use; and the tree stump was removed and the ground was leveled. These corrections were confirmed when the DCFS Monitor revisited each of the sites during the review process.

- Six children did not have slippers, and one child also lacked a sweater or jacket to meet DCFS Clothing Standards.

- Of the 14 children interviewed, five children reported they had never been encouraged or assisted in creating and updating a life book/photo album.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held June 13, 2011.

In attendance:

Maria Serratos, Program Administrator, Tami Tutolo, Case Manager, and Cynthia Chavez, Case Manager, Heritage Group Homes, and Donald Luther, Monitor, DCFS OHCMD.

Highlights:

The Program Administrator was attentive to each of the findings and recommendations presented by the Monitor. She stated she understood the findings in the review. Each of the physical plant deficiencies were discussed, including the possible safety hazards which have been addressed. The Program Administrator, Case Managers and Monitor reviewed each of the NSP issues, and the Monitor advised what was necessary to improve the comprehensiveness in the NSPs. The lack of sufficient clothing was discussed and the Monitor advised what items each child was lacking in order to meet the DCFS Clothing Standard. The Monitor suggested that each child's clothing inventories be updated monthly to provide on-going documentation of what items were needed to maintain the Standards. Four of the six children that were lacking the appropriate quantity of clothing have since gone shopping to complete their inventory. The two remaining children are no longer placed with Heritage Group Homes. The Program Administrator did not understand why children reported they had not been involved in creating and maintaining a life book/photo album and stated that the Group Home had offered the children classes in scrapbooking and life book creation. The Program Administrator advised that Heritage Group Home now had the children sign for receipt of the books and each site sets aside at least one day a month for life book time.

A draft copy of the report was provided to the Group Home administration. No further comments were received. As agreed, Heritage Group Home 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
Sandi Heyer, Executive Director, Heritage Group Homes
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

HERITAGE GROUP HOMES
CONTRACT COMPLIANCE MONITORING REVIEW - SUMMARY

Site Locations

Site #1
30 Country Wood Drive
Phillips Ranch, CA 91766
License #197804150
Rate Classification: 11

Site #2
16226 Benwick Street
Valinda, CA 91744
License #191500101
Rate Classification: 11

Site #3
1923 East Eckerman Avenue
West Covina, CA 91791
License #197801967
Rate Classification: 11

Site #4
8814 Santa Fe Springs Road
Whittier, CA 90606
License #197802215
Rate Classification: 11

Site #5
1940 Baseline Road
LaVerne, CA 91750
License # 197804065
Rate Classification: 11

	Contract Compliance Monitoring Review	**Findings: November 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	Full Compliance (ALL)
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. Improvement Needed 3. Improvement Needed 4. Improvement Needed 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	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed
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	Full Compliance (ALL)

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	Full Compliance (ALL)
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. Improvement Needed
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. CACIs 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)

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Whittier, CA 90606
License #197802215
Rate Classification: 11

Site #5
1940 Baseline Road
LaVerne, CA 91750
License # 197804065
Rate Classification: 11

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

CONTRACTUAL COMPLIANCE

Based on our review of 15 children's files and seven staff files, and/or documentation from the provider, Heritage Group Homes was in full compliance with six of nine sections of our Contract Compliance review: Licensure/Contract Requirements; Educational/Emancipation Services; Recreation and Activities; Children's Health-Related Services (including Psychotropic Medications); Personal Rights; and Personnel Records. The following report details the results of our review:

FACILITY AND ENVIRONMENT

Based on our review of 15 children's case files and/or documentation from the provider, Heritage Group Homes complied with two of six elements in the area of Facility and Environment.

Overall, the exterior of the Group Home sites were well maintained. The front and backyards were clean and adequately landscaped. However, there were several repairs needed. The Phillips Ranch, Whittier, and West Covina sites had damaged and missing window screens, and the Phillips Ranch site had a broken window; these items

were subsequently replaced. The two light fixtures in the backyard of the LaVerne site were damaged and missing a few light bulbs; these fixtures were subsequently replaced with new fixtures and bulbs. The Whittier site had fascia boards with areas of peeling paint and dry rot, and a protruding tree stump in the backyard lawn. The fascia boards were repaired, the exterior of the Group Home was repainted, and the stump was removed and ground was leveled. The repairs were completed during the review process.

The common quarters were well-maintained and clean, had adequate lighting and comfortable furniture, and provided a homelike environment; however three burners on the stovetop at the LaVerne site kitchen were not working. The Program Administrator reports that a new stovetop has been installed.

The children's bedrooms were comfortable and well-maintained; however, at the Valinda site, there was a hole in the wall from contact with a doorknob in bedroom number one. This hole was subsequently repaired. At the LaVerne site, there was insufficient lighting in bedroom number one. Additional lighting was purchased and provided in the bedroom, and these findings were addressed during the review process.

Heritage Group Homes maintained sufficient age-appropriate recreational equipment at each of the sites. However, the free weightlifting plates at the Valinda site were not secured. The plates are now secured in a locked cabinet; when the children want access to the equipment, it is unsecured and supervised by staff.

The Group Home sites had an appropriate quality and quantity of reading materials, educational resources and supplies, including computers readily available to the children.

Each of the sites had an adequate supply of perishable and non-perishable foods that were properly stored.

Recommendations:

Heritage Group Homes management shall ensure that:

1. The Group Homes' exteriors are in good repair and free of any hazardous conditions.

2. All appliances are in good operating condition.

3. Children's bedrooms are free of damaged walls and provided with sufficient lighting.

4. Recreational equipment is properly maintained and secured as needed.

PROGRAM SERVICES

Based on our review of 15 children's case files and/or documentation from the provider, Heritage Group Homes fully complied with seven of eight elements reviewed in the area of Program Services.

We noted that placed children met the Group Home's population criteria as outlined in the agency's program statement. Children were receiving required therapeutic services, and recommended assessments/evaluations were implemented. The Group Home staff felt they were being supported by their administration. The children's Needs and Services Plans (NSP) were discussed with the Group Home staff. The NSPs had the Children's Social Workers' (CSW) authorization for implementation or documentation that the NSPs were sent to the CSW for approval. The treatment team and children participated in the development of the NSPs. Seven children had NSPs that were not comprehensive. Specifically, one child's NSP did not provide the Group Home's role in accomplishing the Psychological and Educational goals, and another child's NSP did not document the child's initial physical and dental examinations. Some initial NSPs did not provide sufficient information on the child such as reason for placement, history, etc., and some did not contain emancipation goals for eligible children. Some NSPs had Group Home contacts to the CSWs that were not detailed as to purpose and outcome.

Recommendation:

Heritage Group Homes management shall ensure that:

5. NSPs are comprehensive, including all required elements in accordance with the NSP template.

CLOTHING AND ALLOWANCE

Based on our review of 15 children's case files and/or documentation from the provider, Heritage Group Homes fully complied with six of eight elements reviewed in the area of Clothing and Allowance.

The children reported that Heritage Group Homes provided the required $50 per month for clothing; however, six of 14 interviewed children reported their clothing inventories were inadequate in quantity, each lacking a pair of slippers, and one of the children was also lacking sweaters or a jacket. Four of the children have since gone shopping to complete their inventories. The remaining two children are no longer placed with the Group Home. Children were involved in the selection of their clothing and were 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.

Five of the interviewed children reported they had never been encouraged or assisted in creating and updating a life book/photo album. The Program Administrator did not understand this as Heritage Group Homes had offered the children classes in scrapbooking and life book creation. The Program Administrator subsequently reported that they now have the children sign for receipt of the books and each site sets aside at least one day a month for life book time.

Recommendations:

Heritage Group Homes management shall ensure that:

6. All children have sufficient quantities of clothing to meet DCFS Standards.

7. All children are encouraged and assisted in creating and maintaining a life book/photo album.

PRIOR YEAR FOLLOW-UP FROM THE AUDITOR-CONTROLLER'S (A-C) REPORT

Objective

Determine the status of the recommendations reported in the A-C's prior monitoring review.

Verification

We verified the outstanding recommendations from the fiscal year 2006-2007 monitoring review were implemented. The report was issued on July 30, 2007.

Results

The A-C's prior monitoring report contained four outstanding recommendations. Heritage Group Homes was to develop comprehensive NSPs that are specific, measurable, attainable, realistic, time-limited, and include short and long term goals; include the treatment team in the development of the NSPs; maintain current court authorizations for all children taking psychotropic medication; and repair or replace the weight bench upholstery. The A-C's recommendation to develop comprehensive NSPs was not fully implemented.

Recommendation:

Heritage Group Homes management shall ensure that:

8. NSPs are comprehensive.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE A-C

A fiscal review of Heritage Group Homes has not been posted by the A-C.

08/01/2011

Dorothy Channel
Dept. Children and Family Services
Out of Home Care Management Division
9320 Telstar Ave,.
El Monte, CA 91731

Compliance Corrective Action Plan

Please accept this Corrective Action Plan as result of in the finding regarding the compliance evaluation that was conducted by Donald Luther starting on 11/30/2010 and doing the exit interview on 6/13/2011 .

Resident failed to achieve educational goal.	Administrator and Case manager will work with each individual resident to achieve their goals or modify goals to meet each Childs needs.
Three initial NSPs were not comprehensive.	Administrator and Case manager will ensure that all NSPs contains goals that while treating the indentified needs of the Placed Child is outcome-based, specific, measurable, attainable and has a specific time frame for each Child. Administrator and Case Manager will also insure that all NSPs will include a description of child, his/her issues and why he/she is in the system
Four updated NSPs were not comprehensive.	Administrator and Case Manager will insure that NSPs also include dates, locations and type of contact to the County Worker during the quarter, including telephone calls
Fascia Boards were rotted and peeling at Whittier Location. Stump in back yard . Screens in Living room, #3 bedroom broken.	The boards were replaced and painted on 6/20/2011 Stump was removed on 5/27/2011 Screens were replaced on 5/30/2011
Rear light Fixtures broken and missing bulbs. 3 burners on stove not working at the La Verne Location. Insufficient light in #1 bedroom	Fixtures were replaced on 5/28/2011 Stovetop was replaced on 7/14/2011 Lamps were provided for each bed on 5/26/2011

Office window broken and screen damaged. Also Screen in bedroom #2&#3 missing at the Phillips Ranch Location. Freeweights not secured	Office window was replaced on 5/27 All screens were replaced on 5/27/2011 Free weights were secured on 5/23/2011 in locked cabinet.
Office screen missing along with bedroom #2,3,4. At the West Covina Location.	All Screens were replaced on 5/27/2011
Hole in wall behind door in #1 bedroom. **Free weights were not secured.**	Hole was repaired on 4/1/2011 Free weights were secured in locked cabinet on 5/23/2011 and will be locked after each use.
Six children were lacking slippers. One child was lacking sweater/Jacket	Facility managers will do clothing inventory every month to ensure that all residents meet the minimum clothing per DCFS. If the child lacks to meet the minimum clothing per DCFS administrator will ensure that funds are given so child can buy clothing to meet the minimum clothing.
Four children were never offered or heard of scrapbook, photo album or life book.	Facility manager and Case manager will ensure that every child is offered a scrapbook, photo album or life book and will be asked to sign a consent that it was offered to them at least once a month. Administrator will also ensure that once a month on the activity calendar a class is offered at the facility to help the children work on their scrapbook, photo album or life book

Please do not hesitate to contact me at 562-556-2495 should you have any additional questions or concerns. In closing, our administrative team would also like to thank the auditor for her suggestions and comments in regard to our program that will help us continue to provide the best service to the youth entrusted in our care.

Respectfully Submitted,

Maria Serratos
Program Administrator

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