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June 16, 2014

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

From: Philip L. Browning
Director

MACRO HOMES 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 Macro Homes, Inc. Group Home (the Group Home) in January 2014. The Group Home has one site located in the First Supervisorial District and provides services to the County of Los Angeles' DCFS foster children and youth. According to the Group Home's program statement, its purpose is, "to provide a structured milieu that facilitates control of chronic problematic behavior and assists each child in dealing with the emotional issues that require out of home placement."

The Group Home has a 6-bed site licensed to serve a capacity of six girls, ages 6 through 18 (Non-Minor Dependents). At the time of the review, the Group Home served six placed DCFS children. The placed children's overall average length of placement was 4 months, and their average age was 16.

SUMMARY

During OHCMD's review, 3 of 4 interviewed children reported: feeling safe and treated with respect and dignity at the Group Home; all the children reported having been provided with good care and appropriate services; being comfortable in their environment.

The Group Home was in full compliance with 6 of 10 areas of our Contract compliance review: Maintenance of Required Documentation and Service Delivery; Education and Workforce; Health and Medical Needs; Psychotropic Medication; Discharged Children; and Personnel Records.

OHCMD noted deficiencies in the areas of Licensure/Contracts Requirements, related to Special Incident Reports not being properly cross-reported and Community Care Licensing (CCL) cited the Group Home; Facility and Environment, related to three smoke detectors not functioning properly

when tested; Personal Rights and Social/Emotional Well-Being, related to one child having reported that she felt unsafe in the Group Home, did not receive enough snacks, staff were rude and disrespectful, discipline was not fair, and that she is not afforded enough privacy during phone calls; and Personal Needs/Survival and Economic Well-Being, related to one child having stated that they did not have a sufficient amount of clothes to meet DCFS clothing standards.

OHCMD made a referral of General Neglect to the Child Protection Hotline based on the issues and concerns shared by the child who indicated she felt unsafe in the Group Home.

Attached are the details of our review.

REVIEW OF REPORT

On February 26, 2014 the DCFS OHCMD Monitor, Donald Luther, held an Exit Conference with Group Home representatives: Kathleen F. Kerrigan, Executive Director; Casey Zuniga, Facility Manager; and Andrea Loos, Social Worker, of Macro Homes, Inc. Group Home. The Group Home representatives: were in agreement with the review findings and recommendations; were receptive to implementing systemic changes to improve compliance with regulatory standards; and to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this compliance report has been sent to the Auditor-Controller and CCL.

The Group Home provided the attached approved CAP addressing the recommendations noted in this compliance report. OHCMD will verify implementation of the recommendations and will provide technical assistance during our next visit to the Group Home in July 2014. An addendum to the report will be submitted 30 days after the completion of the review to address CAP implementation.

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

PLB:EM:KR
RDS:PBG:dl

Attachments

c: William T Fujioka, Chief Executive Officer
John Naimo, Acting Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Kathleen F. Kerrigan, Executive Director, Macro Homes, Inc.
Lenora Scott, Regional Manager, Community Care Licensing
Angelica Lopez, Acting Regional Manager, Community Care Licensing

MACRO HOMES, INC. GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

1165 West Ivesbrook Street
Lancaster, CA 93534
License # 191221473
Rate Classification Level: 9

	Contract Compliance Monitoring Review	**Findings: January 2014**
I	**Licensure/Contract Requirements** (9 Elements) 1. Timely Notification for Child's Relocation 2. Provided Children's Transportation Needs 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. Improvement Needed 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 Well Maintained 3. Children's Bedrooms Well Maintained 4. Sufficient Recreational Equipment/Educational Resources 5. Adequate Perishable and Non-Perishable Foods	1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance
III	**Maintenance of Required Documentation and Service Delivery** (10 Elements) 1. Child Population Consistent with Capacity and Program Statement 2. County Children's Social 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 Children's Social Worker's Monthly Contacts Documented	Full Compliance (ALL)

	8. Children Assisted in Maintaining Important Relationships 9. Development of Timely, Comprehensive Initial NSPs with Child's Participation 10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation	
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/Progress Reports Maintained 4. Children's Academic or Attendance Increased 5. GH Encouraged Children's Participation in YDS or Equivalent Services and 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 Nutritious 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. Children's Chores Reasonable 10. Children Informed About Their Medication and Right to Refuse Medication	1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Improvement Needed 5. Improvement Needed 6. Improvement Needed 7. Improvement Needed 8. Full Compliance 9. Full Compliance 10. Full Compliance

	11. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 12. Children Given Opportunities to Plan Activities in Extra-Curricular, Enrichment and Social Activities (GH, School, Community) 13. Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)	11. Full Compliance 12. Full Compliance 13. Full Compliance
VIII	**Personal Needs/Survival and Economic Well-Being** (7 Elements) 1. $50 Clothing Allowance 2. Adequate Quantity and Quality of Clothing Inventory 3. Children 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/Photo Album	1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance
IX	**Discharged Children** (3 Elements) 1. Children Discharged According to Permanency Plan 2. Children Made Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement	Full Compliance (ALL)
X	**Personnel Records** (7 Elements) 1. DOJ, FBI, and CACIs Submitted Timely 2. Signed Criminal Background Statement Timely 3. Education/Experience Requirement 4. Employee Health Screening/TB Clearances Timely 5. Valid Driver's License 6. Signed Copies of Group Home Policies and Procedures 7. All Required Training	Full Compliance (ALL)

MACRO HOMES, INC. GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2013-2014

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the January 2014 review. The purpose of this review was to assess Macro Homes, Inc. Group Home's (the Group Home) compliance with its County contract and State regulations and included a review of the Group Home's program statement, as well as internal administrative policies and procedures. The monitoring review covered the following 10 areas:

- Licensure/Contract Requirements,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Educational and Workforce Readiness,
- Health and Medical Needs,
- Psychotropic Medication,
- Personal Rights and Social Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, four Department of Children and Family Services (DCFS) placed children were selected for the sample. Out-of-Home Care Management Division (OHCMD) interviewed four children and reviewed their case files to assess the care and services they received. Additionally, three discharged children's files were reviewed to assess the Group Home's compliance with permanency efforts. At the time of the review, no placed children were prescribed psychotropic medication.

OHCMD reviewed three staff files for compliance with Title 22 Regulations and County contract requirements, and conducted a site visit to assess the provision of quality of care and supervision.

CONTRACTUAL COMPLIANCE

OHCMD found the following four areas out of compliance.

Licensure/Contract Requirements

- A review of 273 Special Incident Reports (SIRs) submitted via ITrack since the last review revealed 66 SIRs from the Group Home were not properly cross-reported to OHCMD.

OHCMD discussed the SIR guidelines with the Group Home representatives and ensured the Group Home had a copy of the guidelines.

- Community Care Licensing (CCL) cited the Group Home for a violation of Fixtures, Furniture, Equipment, and Supplies.

According to the CCL report dated February 25, 2013 during the course of an annual visit, mold was observed inside the children's bathroom/shower. The Group Home submitted a Plan of Correction (POC), which included cleaning and re-caulking the affected area. CCL approved the POC and the citation was cleared on March 7, 2013.

Recommendations

The Group Home's management shall ensure that:

1. All SIRs are properly cross-reported, in compliance with the County contract and SIR reporting guidelines.

2. The Group Home is in compliance with Title 22 Regulations and free of CCL citations.

FACILITY AND ENVIRONMENT

- Three smoke detectors located in the hallway, living room, and bedroom, were not functioning properly when tested.

The Group Home purchased three new replacement detectors that day and installed them the following morning. The OHCMD Monitor verified that each tested to be fully functional.

Recommendation

The Group Home's management shall ensure that:

3. All smoke detectors in the facility are functioning and in good working order at all times.

PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

- One of the four interviewed children reported that she did not feel safe in the Group Home and expressed her desire to be placed in the home of her mother or in a foster home. She felt the other girls get "mad" easily, and that her younger roommate uses drugs.

- The same child reported that she does not receive enough snacks. At the time of the review, there were sufficient snacks readily available to the children.

- The same child reported that she has been labeled a "Bad Girl" and that staff were rude to her mother when she called the Group Home, and she felt they disrespected both her and her mother over this call.

- The same child also reported that staff is not providing discipline fairly, showing favoritism to her younger roommate.

- Further, the same child reported she is not afforded privacy with her phone calls as the telephone is located in the kitchen; occupied by staff who may listen to her side of the conversations.

On January 28, 2014, OHCMD Monitor made a referral of General Neglect to the Child Protection Hotline based on the issues and concerns shared by the child. OHCMD Monitor discussed the issues with the Group Home Social Worker and Case Manager, and advised the Group Home to closely monitor the child's interactions with her peers. The disposition of the referral was determined "unfounded" by the DCFS Emergency Response Children's Social Worker (ER CSW) based on information obtained during the investigation from collateral contacts and the group home children. The DCFS ER CSW contacted the child's CSW who provided information that refutes the allegations. As of May 20, 2014 Out-of-Home Care Investigations Section, still has the referral under review.

CCL also investigated the referral. According to the report dated February 13, 2014, CCL cited the Group Home for two Personal Rights Violations; staff showing favoritism in disciplining fairly and for children not provided with privacy in making and receiving confidential telephone calls. CCL requested a POC from the Group Home, which included retraining of staff on Personal Rights. On March 18, 2014, CCL informed OHCMD that they approved the POC and the citations were cleared; however, as of April 9, 2014, CCL was unable to provide the date of clearance.

Recommendations

The Group Home's management shall ensure that:

4. All children feel safe in the Group Home at all times.

5. Children are provided with sufficient snacks.

6. Children are treated with respect and dignity at all times.

7. Discipline and consequences are fair and equally administered by staff.

8. Children are provided privacy when receiving personal and confidential phone calls that are not monitored or prohibited by court order.

PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

- One child's clothing inventory did not meet DCFS clothing standards for quantity. The child lacked sufficient braziers, one sweater/sweatshirt, a robe, and a pair of slippers. Group Home staff explained that they are not certain if the lacking items have been taken home with the child on weekend passes. Sufficient clothing was later purchased, and copies of receipts were submitted to OHCMD on February 20, 2014.

Recommendation

The Group Home's management shall ensure that:

9. All children are provided with sufficient clothing to meet DCFS clothing standards for quantity.

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

The OHCMD's last compliance report, dated July 31, 2013, identified five recommendations.

Results

Based on our follow-up, the Group Home fully implemented two of five recommendations for which they were to ensure that:

- Children always sign the allowance logs for receipt of their allowance, and
- All staff maintains timely and current emergency intervention training.

The Group Home did not fully implement three recommendations for which they were to ensure that:

- The Group Home is in compliance with Title 22 Regulations,
- All children are provided adequate clothing to meet DCFS standards for quantity, and
- The outstanding recommendations from OHCMD's prior monitoring report are fully implemented.

Recommendation

The Group Home's management shall ensure that:

10. The outstanding recommendations from the July 31, 2013 report from the prior fiscal year monitoring review, which are noted in this report as Recommendations 2, 9, and 10, are fully implemented.

At the Exit Conference, the Group Home representatives expressed concern related to the lack of clothing for the one child and will now inventory clothing taken by children when going and returning from home passes to ensure items are returned and will continue to complete children's full inventories on a monthly basis. Further, the Group Home staff will continue to strive to ensure the Group Home remains in compliance with all Title 22 Regulations. OHCMD will verify implementation of recommendations and provide technical support during our next visit to the Group Home in July 2014.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The Auditor-Controller conducted a fiscal review of the Group Home for the period January 1, 2009 to December 31, 2009. The fiscal report, dated May 17, 2011, identified $3,503 in unallowable expenditures and $3,474 in unsupported/inadequately supported expenditures. The DCFS Fiscal Monitoring and Special Payments Section informed OHCMD that this amount has been paid in full.

MACRO HOMES, INC.
1165 West Ivesbrook Street
Lancaster, CA 93534
Tel: 661- 948-9276 *Fax: 661-945-3703*
E-Mail: macrohomes@verizon.net
We are a small group home that provides a structured living environment for girls.

March 18, 2014

To: **Patricia Bolanos-Gonzalez, Manager**
Children Service's Administrator II
Los Angeles County Department of Children and Family Services
9320 Telstar Avenue, Suite 216
El Monte, CA 91731

From: **Macro Homes, Inc.**
1165 West Ivesbrook Street
Lancaster, CA 93534

Re: **Corrective Action Plan for Macro Homes Exit Review with Our-of-Home Care Management Division (OHCMD) held 2/24/14**

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

- **Not all SIRS are appropriately cross-reported.**

<u>Corrective Action Plan</u>
Staff had an SIR training on March 4, 2014 on cross-reporting to whom and when to report Itracks.

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

- **On 2/25/13, CCL cited Macro Homes for a deficiency of Fixtures, Furniture, Equipment and Supplies as mold was observed inside bathroom/shower area of the children. Area was cleaned and re-caulked. CCL cleared the citation on 3/7/14.**

Corrective Action Plan
Overnight staff bleaches and wipes down bathroom at least 1x a week and oversees daily chores.
Resident bathroom has been added to monthly facility checklist.

#11) Are common quarters well maintained? (Clean/sanitary; neat; adequate lighting; home-like environment, no safety hazards) (SAFETY)

- **Three of the smoke detectors in the Group Home were not functioning properly when tested. The Group Home purchased new smoke detectors the same day and replaced the non-functioning detectors the following morning.**

Corrective Action Plan
The Group Home has added the smoke detectors to the facility check list. This check list has been delegated to a facility manager to check at least once monthly.

#37) Do children feel safe in the Group Home? (SAFETY)

- **One child wanted to go back home with mother, or to a Foster Home. She reported too much argumentation with the girls; they get mad easily! Claims her younger roommate uses drugs.**

Corrective Action Plan
Staff and residents have a community meeting every Tuesday to discuss any issues or feelings with residents and staff. The Group Home will continue weekly Open Floor Meetings (in which resident can discuss any complaints, feeling or suggestions without retaliation from residents or staff). Additionally, On a daily basis staff will ask if residents feel safe, or ask if anyone wants to discuss anything in private. The children will also be asked of thye have any issues during study time.

#39) Do children report the Group Home's effort to provide nutritious palatable meals and snacks? (WELL-BEING)

- **One child reported not receiving enough snacks**

Corrective Action Plan
Residents have access to food 24/7. There are constantly fresh fruits on the table (banana's apples, and oranges). Residents have access to Resident fridge 24/7 which consist of left overs, veggies, makings for a sandwich, and condiments, additional fruit, water, juice, and

milk. Furthermore, Residents have access to Resident cabinet 24/7. Cabinet contains canned soup, canned goods (such as fruit and veggies), ramen noodles, peanut butter, soy paper, soy milk, popcorn, chips, and cookies. Additionally, Residents have access to snacks that overnight staff usually prepares after school.

#40) Do children report being treated with respect and dignity? (WELL-BEING)

- **One child reported she is labeled the "Bad" girl. Feels staff is rude to mother when she expresses child's concerns, they admonish child for sharing issues with mother.**

Corrective Action Plan
Staff is to treat all residents and parents with respect. Residents have the right to be treated with respect. Management will check with residents to make sure interactions from staff to residents are non-threatening; there is no name calling, and no retaliation for reporting. Admiration will check with residents individually once a week. Residents will have the option to address concerns with Facility Manager and during open floor meetings every Tuesday.

#41) Is a fair rewards and discipline system in place? (WELL-BEING)

- **One child reported that staff sides with her 13 yr. old roommate when there is an issue between them**

Corrective Action Plan
Staff will not comment on resident conversations and let residents work it out. If residents have issues with one another, residents can address them in the open floor meetings held weekly or residents can ask for a conflict resolution with the management team. A Staff meeting on Favoritism, Personal Rights, and Privacy was held on 2/19/14 from 8:30am-10am. All staff were present and retrained on personal rights. Point sheet and consequences across the board were discussed. Staff discussed points and presented their use of the behavioral system equally to earn points resulting in monetary incentives. Participants earn their levels for the week and are rewarded with privileges and activities. Residents are not disciplined; they earn weekly privileges.

#42) Unless prohibited by court order or County workers, children are allowed private visits, to make and receive private phone calls, and to send and receive unopened correspondence/mail? (PERMANENCY)

- **One child didn't feel she is afforded enough privacy on phone as it is located in the kitchen area and staff could overhear conversation**

Corrective Action Plan

Macro Homes updated phone policy on 2/6/14. Residents have had access to the (661) 948-9276 remote phone during business hours. To ensure more access to privacy phone calls, Macro Homes connected another remote phone to fax line during the phone hours of 6pm-8:30pm. To assure private phone calls a log was instituted for the remote phones. The log provides date, resident, time phone is checked out, time phone is checked in, and staff initials.

#50) Are children's on-going clothing inventories adequate quantity (fitted according to industry size charts, clean, in good condition, and appropriate for intended use and season)? (WELL BEING)

- **One child reported she was lacking 1 bra, 1 sweater, a robe, and a pair of slippers**

Corrective Action Plan

Macro Homes provides residents with $50 a month for clothing needs and abide by county regulations. Since resident's take clothing home during home pass, staff will conduct an itemized inventory of the items going and coming back on home passes. Furthermore, staff will encourage residents to meet county regulation requirements before purchasing extra clothing. On February 9, 2014 the child purchased items that were lacking in addition to other items. Receipts of the items were sent to Out of Home Care on February 20, 2014. Monthly clothing inventories ensure required clothing requirements are met. These are conducted by staff and residents on a monthly basis.

Administration will be responsible for ensuring the cap is fully implemented and followed.

Kathleen Kerrigan — **Date:** 3/18/14

Administrator, Kathleen Kerrigan

Casey Z — **Date:** 3/18/14

Facility Manager, Casey Zuniga