County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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July 31, 2013

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

From: Philip L. Browning
Director

MACRO 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 February 2013. The Group Home has one site located in the Fifth Supervisorial District and provides services to County of Los Angeles DCFS foster 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 one six-bed site licensed to serve a capacity of six girls, ages six through 17. At the time of the review, the Group Home served six placed DCFS children. The placed children's overall average length of placement was nine months, and their average age was 16.

SUMMARY

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

The Group Home was in full compliance with seven of 10 areas of our Contract compliance review: 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; and Discharged Children.

Deficiencies were noted in the areas of: Licensure/Contracts Requirements, related to Community Care Licensing (CCL) having cited the Group Home for two personal rights violations and not ensuring children sign for their personal allowances; Personal Needs/Survival and Economic Well-Being, related to one child's clothing inventory not being in compliance with DCFS standards for quantity; and Personnel Records related to one staff who was lacking current training in emergency intervention.

Attached are the details of our review.

REVIEW OF REPORT

On March 22, 2013, the DCFS OHCMD Monitor Donald Luther, held an Exit Conference with the Group Home representatives Casey Zuniga, Facility Manager and Andrea Roos, Assistant Social Worker. The Group Home representatives agreed 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 Community Care Licensing.

The Group Home provided the attached approved CAP addressing the recommendations noted in this compliance report.

OHCMD 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:EM:KR
RDS: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
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
FISCAL YEAR 2012-2013

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the February 2013 review. The purpose of this review was to assess Macro Homes, Inc.'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 placed children were selected for the sample. The Out-of-Home Care Management Division (OHCMD) Monitor interviewed each child 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, three placed children were prescribed psychotropic medication. The OHCMD Monitor reviewed the children's case files to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

OHCMD reviewed three 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

OHCMD found the following three areas out of compliance.

Licensure/Contract Requirements

- A review of allowance logs revealed that there were instances in which the children had not signed for receipt of their personal allowances, although they had signed for withdrawals from their accounts and acknowledgement of their balances. The Group Home's Executive Director stated that the staff will have all children sign for their allowance when received.

- Community Care Licensing (CCL) cited the Group Home on February 3, 2013 for two personal rights violations which included staff listening to a child's phone conversations

when phone call were not mandated to be monitored, and another for staff wrongfully taking away children's point levels. A Plan of Correction (POC) was submitted by the Group Home and approved by CCL. The POC included counseling of all staff on the significance of respecting personal rights of the children, and a review with all staff on the Group Home's disciplinary policies and point level system.

Recommendations

The Group Home's management shall ensure that:

1. Children always sign the allowance logs for receipt of their allowance.

2. The Group Home is in compliance with Title 22 Regulations.

Personal Needs/Survival and Economic Well-Being

- One child's clothing inventory did not meet Department of Children and Family Services (DCFS) clothing standards for quantity; the child lacked four pants and a pair of shoes. The Group Home staff explained that when the child was admitted to the Group Home, her clothing was not transported with her. Despite repeated attempts by the Group Home to have her clothing retrieved, the clothing was never retrieved from her previous placement. The lacking items were eventually purchased for the child, and copies of receipts were submitted to OHCMD. OHCMD was later informed that the child's clothing left at the previous home was eventually delivered by the DCFS Children's Social Worker.

Recommendation

The Group Home's management shall ensure that:

3. All children are provided adequate clothing to meet DCFS standards for quantity.

Personnel Records

- One group home staff member did not have current emergency intervention training. The staff completed the renewal training, on March 13, 2013, and verification of the training was submitted to OHCMD.

Recommendation

The Group Home's management shall ensure that:

4. All staff maintain timely and current emergency intervention training.

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

The OHCMD's last compliance report, dated August 27, 2012, identified 16 recommendations.

Results

Based on our follow-up, the Group Home fully implemented 13 of 16 recommendations. The previous recommendations were that:

- All children are provided the required monthly clothing allowances and that comprehensive allowance logs are maintained,
- Compliance with Title 22 Regulations and the County contract requirements,
- All group home exteriors and grounds are well maintained,
- All children are progressing toward meeting their NSP case goals,
- Comprehensive initial NSPs are developed for each child,
- Monthly contacts by the Group Home to the CSWs are appropriately documented in the NSPs,
- Comprehensive updated NSPs are developed for each child,
- Initial dental examinations are conducted within 30 days of placement or within a year of the last annual dental examination,
- Children prescribed psychotropic medication receive monthly evaluations with the prescribing physician, unless otherwise documented by the physician,
- Current court authorizations are obtained and maintained for the psychotropic medication that each child is prescribed,
- All children are made aware of their monthly clothing allowance and are provided at least $50 per month for clothing allowance,
- All children have sufficient quantities of clothing to meet DCFS standards for quantity,
- All children are encouraged and assisted in creating and maintaining a life book/photo album,
- Required discharge summaries are completed and that children are discharged in accordance to the permanency plan,
- All placed children make progress toward meeting their NSP goals prior to discharge, and
- The outstanding recommendations from OHCMD's prior monitoring report are fully implemented.

The Group Home did not fully implement the recommendations of ensuring compliance with Title 22 Regulations; ensuring children have sufficient quantities of clothing to meet DCFS standards for quantity; and ensuring full implementation of outstanding recommendations from OHCMD's prior monitoring report.

Recommendation

The Group Home's management shall ensure that:

5. The outstanding recommendations from the August 27, 2012 report from the 2011-2012 fiscal year monitoring review, which are noted in this report as Recommendations 1, 2, and 5, are fully implemented.

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. On June 17, 2013, DCFS' Fiscal Monitoring and Special Payments Section informed OHCMD that the Group Home has paid back the amounts in full.

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: February 2013**
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. Improvement Needed 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 9. Development of Timely, Comprehensive Initial NSPs with Child's Participation	Full Compliance (All)

	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	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	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed

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.

May 30, 2013

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 Home, Inc.
1165 West Ivesbrook Street
Lancaster, CA 93534

Re: **Corrective Action Plan Addendum for Macro Homes Exit Review with Out-of-Home Care Management Division (OHCMD) held 3/22/13**

#7) Are appropriate and comprehensive monetary and clothing allowance logs maintained?

- There were instances were the children had not signed for receipt of their personal allowances in the allowance logs.

Corrective Action Plan
Staff will ensure that all children sign their allowance logs acknowledging receipt of their allowance.

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

- On 2/3/13, Macro Homes was cited for two Personal Rights violations, which included 1) staff listening to the resident's phone conversations when not mandated to be monitored and 2) staff wrongfully taking away children's level points. A plan of correction was required and approved by CCL.

Corrective Action Plan
Between February 3, 2012- February 6, 2012, counseling of all the staff on the significance of respecting personal rights of the children, Discipline Policies, and Procedures were reviewed

with all staff and point system explained. Documents were submitted to CCL on February 7, 2012.

Areas reviewed included:
84072 (2) (11) Personal Rights: Phone calls will not be monitored unless mandated by the courts.
84072.1 (b) Discipline Policies and Procedures: Residents do not lose points. Points are used an incentive to produce appropriate behaviors.

The Group Home will ensure compliance with CCL Title 22 Regulations.

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

- One child's clothing inventory did not meet DCFS clothing standards for quantity. The child lacked four pants and a pair of shoes. These items were provided to the child and receipt documentation submitted to OHCMD.

Corrective Action Plan
Macro Homes will ensure that all children receive sufficient clothing to meet DCFS clothing standards for quantity. Macro Homes reviews clothing inventory during intake process with CSW. If there is an inadequate amount of clothing during intake, Macro Homes will have CSW (or HSA) sign an acknowledgement of inadequate clothing and write a plan to ensure that clothing needs are met within 7 days. If clothing is not received within 7 days, staff will request a clothing allowance from CSW and/or SCSW.

65) Have appropriate employees received all required training?

- One staff did not have an updated CPI (Emergency Intervention) training card.

Corrective Action Plan
Macro Homes will ensure all trainings are done and updated in a timely manner. The one staff's current CPI card was faxed and e-mailed to the OHCMD Monitor on April 9, 2013.

Kathleen Kerrigan, Administrator, will be responsible for supervising, enforcing, and complying with the Corrective Action Plan.

Kathleen Kerrigan

Kathleen Kerrigan, MA
Administrator

Casey Zuniga,
Facility Manager

Andrea Loos,
Assistant Administrator