Antonia Jiménez
Acting Director

# County of Los Angeles
# DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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

Board of Supervisors
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February 28, 2011

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

From: Antonia Jiménez
Acting Director

## MARYVALE PROGRAM 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.

Maryvale is located in the 1st Supervisorial District and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth and Probation Department youth. According to Maryvale's program statement, its stated goal is "to create a healthy, therapeutic milieu in which each individual child is able to grow physically, emotionally, educationally and spiritually." Maryvale is licensed to serve a capacity of 60 children, ages 6 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Maryvale in September 2010, at which time the agency had one 60-bed site and 42 placed DCFS children. All 42 children were females. For the purpose of this review, 14 currently placed children were interviewed and their case files were reviewed. One additional child's case file was reviewed for a total of 15 case files reviewed, however, this child was not interviewed because she ran away from Maryvale before she could be interviewed. For the sampled children, their overall average length of placement was ten months and their average age was 14. Five staff files were reviewed for compliance with Title 22 regulations and contract requirements.

Thirty-one 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 Maryvale's compliance with the contract and State regulations. The visit included a review of Maryvale's program statement, administrative internal policies and procedures, 15 children's case files and a random sampling of personnel files. A visit was made to the facility to assess the quality of care and supervision provided to the children, and we conducted interviews with 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, Maryvale was providing very good quality care to DCFS placed children and the services were provided as outlined in the agency's program statement. The children interviewed stated that they receive educational support, opportunities to plan recreational activities, and that they felt safe living at Maryvale.

At the time of the review, the Group Home needed to ensure that the children received timely initial dental examinations and that the children were satisfied with their meals. Additionally, the Group Home needed to maintain timely initial health screenings for their staff members.

The Vice President of Programs was accessible, cooperative and motivated to make the necessary corrections regarding the deficiencies highlighted during the review.

## NOTABLE FINDINGS

The following are the notable findings of our review:

- Two of the 14 children interviewed stated that the food served at Maryvale did not taste good.
- Four of the 15 children's case files indicated that their initial dental examinations were not timely.
- Two of the five staff files reviewed indicated that the initial health screenings were not timely.

The detailed report of our findings is attached.

## EXIT CONFERENCE

The following are highlights from the exit conference held November 12, 2010.

**In attendance:**

Dr. Vince Castro, Vice President of Programs, Maryvale; Michael Giron, Vice President of Administrative Services, Maryvale; and Scott Song, Monitor, DCFS OHCMD.

**Highlights:**

The Vice President of Programs was in agreement with our findings.

As agreed, Maryvale provided a timely written Corrective Action Plan (CAP) addressing each recommendation noted in this compliance report. The approved CAP is attached.

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, please call me or your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

AJ:LP: KR
EAH:BB:ss

Attachment

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
Sister Rachela Silvestri, Chair, Board of Directors, Maryvale
Steven Gunther, Executive Director, Maryvale
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

## MARYVALE CONTRACT COMPLIANCE MONITORING REVIEW - SUMMARY

**7600 E. Graves Avenue**
**Rosemead, CA 91770**
**License Number: 191500468**
**Rate Classification Level: 12**

| | Contract Compliance Monitoring Review | Findings: September 2010 |
|---|---|---|
| I | **Licensure/Contract Requirements** (9 Elements)<br><br>1. Timely Notification for Child's Relocation<br>2. Stabilization to Prevent Removal of Child<br>3. Transportation<br>4. SIRs<br>5. Compliance with Licensed Capacity<br>6. Disaster Drills Conducted<br>7. Disaster Drill Logs Maintenance<br>8. Runaway Procedures<br>9. Allowance Logs | Full Compliance (ALL) |
| II | **Facility and Environment** (6 Elements)<br><br>1. Exterior Well Maintained<br>2. Common Areas Maintained<br>3. Children's Bedrooms/Interior Maintained<br>4. Sufficient Recreational Equipment<br>5. Sufficient Educational Resources<br>6. Adequate Perishable and Non Perishable Food | Full Compliance (ALL) |
| III | **Program Services** (8 Elements)<br><br>1. Child Population Consistent with Program Statement<br>2. DCFS CSW Authorization to Implement NSPs<br>3. Children's Participation in the Development of NSPs<br>4. NSPs Implemented and Discussed with Staff<br>5. Therapeutic Services Received<br>6. Recommended Assessments/Evaluations Implemented<br>7. DCFS CSWs Monthly Contacts Documented<br>8. Comprehensive NSPs | Full Compliance (ALL) |

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

| | | |
|---|---|---|
| VIII | **Children's Clothing and Allowance** (8 Elements)<br><br>1. $50 Clothing Allowance<br>2. Adequate Quantity of Clothing Inventory<br>3. Adequate Quality of Clothing Inventory<br>4. Involvement in Selection of Clothing<br>5. Provision of Personal Care Items<br>6. Minimum Monetary Allowances<br>7. Management of Allowance<br>8. Encouragement and Assistance with Life Book | Full Compliance (ALL) |
| IX | **Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)** (12 Elements)<br><br>1. Education/Experience Requirement<br>2. Criminal Fingerprint Cards Timely Submitted<br>3. CACIs Timely Submitted<br>4. Signed Criminal Background Statement Timely<br>5. Employee Health Screening Timely<br>6. Valid Driver's License<br>7. Initial Training Documentation<br>8. Signed Copies of GH Policies and Procedures<br>9. CPR Training Documentation<br>10. First Aid Training Documentation<br>11. On-going Training Documentation<br>12. Emergency Intervention Training Documentation | 1. Full Compliance<br>2. Full Compliance<br>3. Full Compliance<br>4. Full Compliance<br>5. Improvement Needed<br>6. Full Compliance<br>7. Full Compliance<br>8. Full Compliance<br>9. Full Compliance<br>10. Full Compliance<br>11. Full Compliance<br>12. Full Compliance |

# MARYVALE CONTRACT COMPLIANCE MONITORING REVIEW

## SITE LOCATION

**7600 E. Graves Avenue**
**Rosemead, CA 91770**
**License Number: 191500468**
**Rate Classification Level: 12**

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

## CONTRACTUAL COMPLIANCE

Based on our review of 15 children's files and five staff files, Maryvale was in full compliance with six of nine sections of our Contract Compliance review: Licensure/Contract Requirements; Facility and Environment; Program Services; Education and Emancipation Services; Recreation and Activities; and Clothing and Allowance.

## CHILDREN'S HEALTH-RELATED SERVICES, INCLUDING PSYCHOTROPIC MEDICATION

Based on our review of 15 children's case files and interviews with 14 children, Maryvale fully complied with eight of nine elements in the area of Children's Health Related Services, including Psychotropic Medication.

The Group Home maintained a current court-approved authorization and psychiatric evaluation/review for each child on psychotropic medication. The Group Home also conducted timely initial and follow-up medical examinations for the 15 children reviewed. Follow-up dental examinations were also timely.

However, four of the 15 children's case files reviewed indicated that their initial dental examinations were not timely.

**Recommendation:**

Maryvale management shall ensure that:

1. Initial dental examinations for all children are completed within 30 days of placement.

## PERSONAL RIGHTS

Based on our review of 15 children's case files and interviews with 14 children, Maryvale fully complied with ten of 11 elements in the area of Personal Rights.

The 14 children reported that Maryvale informed them of the Group Home policies and procedures, they feel safe in the Group Home and staff treated them with respect and dignity. An appropriate rewards and discipline system was in place and the children

were free to receive or reject voluntary medical, dental and psychiatric care. The children were allowed private visits, to make and receive telephone calls and to send and receive unopened correspondence/mail. The children were also free to attend religious services and activities of their choice. In addition, the children were given reasonable chores. During our review, two children stated that the food served at Maryvale did not taste good.

**Recommendations:**

Maryvale management shall ensure that:

2. The children report satisfaction with their meals and snacks.

## PERSONNEL RECORDS

Based on our review of five staff personnel files, Maryvale fully complied with 11 of 12 elements in the area of Personnel Records.

All five staff reviewed met the educational/experience requirements, and submitted timely criminal fingerprint cards, Child Abuse Central Index (CACI) Clearances and signed criminal background statements in a timely manner. They also had valid driver's licenses and received the required initial training, CPR and First Aid training, on-going training and emergency intervention training. Additionally, the five staff had signed copies of the Group Home policies and procedures.

However, two staff members did not receive their initial health screenings (TB tests) in a timely manner.

**Recommendations:**

Maryvale management shall ensure that:

3. All staff members receive timely initial health screenings, including TB tests.

## PRIOR YEAR FOLLOW-UP FROM THE AUDITOR CONTROLLER'S REPORT

### Objective

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

### Verification

We verified that there were no A-C monitoring review reports posted for the years 2009 and 2010.

maryvale

December 15, 2010

Dear Mr. Song:

In response to the **Group Home Contract Compliance Review Field Exit Summary** dated November 12, 2010, please find Maryvale's response to the request for a Corrective Action Plan for the **Personal Rights** and **Personnel Records** sections under **Compliance Review**

**Personal Rights**

**Findings:** Two children reported not being satisfied with meals and snacks.

**CAP Requested:** Children should have a process to provide feedback on the satisfaction of meals and snacks served.

**Corrective Action Plan:** As part of the children's council and/or community meetings in each group, as minimum once a month, children can report likes and dislikes and concerns regarding meals and snacks served.

**Persons Responsible:** Group Supervisors in each of the six groups

**Personnel Records**

**Findings:** Two employees had late TB tests.

**CAP Requested:** Employees are to receive timely initial health screenings.

**Corrective Action Plan:** The Human Resources Department implemented the attached policy

**Person Responsible:** Renee Chan, Vice President of Human Resources

Should you have any questions or should you need any further information, please feel free to contact me at 626-280-6510. Maryvale remains committed to work in collaboration with the Department of Children and Family Services.

Sincerely,

Michael F. Giron
Vice President of Administrative Services

7600 East Graves Avenue ❖ Rosemead, California 91770 ❖ 626.280.6510 ❖ www.maryvale-ca.org
*Founded in 1856 by the Daughters of Charity*

**SECTION I:**

| | | |
|---|---|---|
| | **SUBJECT:** Medical Examination | NUMBER: |
| | AUTHORIZED: | EFFECTIVE DATE: 12/01/2010 |
| | | REVISED DATE: |
| | PRESIDENT/Executive Director: | PAGE NO. 1 OF 2 |

**Policy**

Upon offer of employment each Associate must complete a physical examination. This includes an examination by a doctor, a drug test, and a tuberculosis test and/or chest x-ray.

For prevention purposes and to continue quality programs and services, Maryvale will administer a tuberculosis test to Associates every two (2) years. Please note that those Associates who are required to test with a chest x-ray will be asked to go to their personal physician and provide a doctor's note that they are symptom free.

**Purpose**

To ensure the heath and well being of new Maryvale Associates and to protect the children and families we serve, medical examinations are required for all final selection candidates. These examinations also must be completed in order to comply with General Licensing Requirements listed in Title 22 regulations, section 80065 Personnel Requirements:

*All personnel, including the licensee, administrator and volunteers, shall be in good health, and shall be physically, mentally, and occupationally capable of performing assigned tasks. Good physical health shall be verified by a health screening, including a test for tuberculosis, performed by or under the supervision of a physician not more than one year prior to or seven days after employment or licensure. (**CALIFORNIA-DSS-MANUAL-CCL**)*

Bi-annual tuberculosis testing is completed to confirm Associates have not contracted tuberculosis.

**Procedure**

**New Hire Associates**

1. Upon receiving an employment offer candidates will be sent to receive a physical examination at Maryvale's chosen medical provider.

2. The medical provider will send pre-employment result information to Maryvale's Human Resource department.

3. Candidates who meet the requirements of the physical examination will be cleared to start employment at Maryvale. No candidate will be able to begin employment at Maryvale without a tuberculosis test clearance.

**Bi-annual Tuberculosis Testing**

1. A member of the Human Resource staff will notify supervisors when an Associate they supervise is due to have their bi-annual tuberculosis test.

2. On the Rosemead campus, supervisors will send Associates due to have a tuberculosis test to the Maryvale Health Services Office to receive their test. Those Associates who are required to test with a chest x-ray will be asked to go to their personal physician and provide a doctor's note that they are symptom free.

3. On the Duarte campus, supervisors will send Associates due to have a tuberculosis test to Maryvale's chosen medical provider to receive the test. Those Associates who are required to test with a chest x-ray will be asked to go to their personal physician and provide a doctor's note that they are symptom free.

4. Human Resources will obtain test results from the medical provider; test results will be maintained in Human Resources.

This policy will be administered by the Vice President of Human Resources.

December 15, 2010

Dear Mr. Song:

In response to the **Group Home Contract Compliance Review Field Exit Summary** dated November 12, 2010, please find Maryvale's response to the request for a Corrective Action Plan for the **Children's Health-Related Services, Personal Rights and Personnel Records** sections under **Compliance Review**.

**Children's Health-Related Services**

**Findings:** Initial dental examinations were late (beyond 30 days from placement date) for [redacted], [redacted], [redacted] and [redacted].

**CAP Requested:** Ensure that all newly placed children will have an initial dental examination within 30 days of placement.

**Corrective Action Plan:** Currently Maryvale has an on-site dental office with the dentist seeing residents once a month. As a corrective action plan, all new placements will be taken to the dentist in the community when the on-site dental appointments would be beyond 30 days of placement.

**Person Responsible:** [redacted], Health Services Supervisor

**Personal Rights**

**Findings:** Two children reported not being satisfied with meals and snacks.

**CAP Requested:** Children should have a process to provide feedback on the satisfaction of meals and snacks served.

**Corrective Action Plan:** As part of the children's council and/or community meetings in each group, as minimum once a month, children can report likes and dislikes and concerns regarding meals and snacks served.

**Persons Responsible:** Group Supervisors in each of the six groups

**Personnel Records**

**Findings:** Two employees had late TB tests.

**CAP Requested:** Employees are to receive timely initial health screenings.

Mr. Scott Song
December 15, 2010

**Corrective Action Plan:** The Human Resources Department implemented the attached policy.

**Person Responsible:** [redacted] Vice President of Human Resources

Should you have any questions or should you need any further information, please feel free to contact me at 626-280-6510. Maryvale remains committed to work in collaboration with the Department of Children and Family Services.

Sincerely,

Michael F. Giron
Vice President of Administrative Services

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