County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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

PHILIP L. BROWNING
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

November 26, 2012

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

From: Philip L. Browning
Director

MOZELL PENNINGTON BOY'S CENTER 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 Mozell Pennington Boy's Center Group Home (Mozell Pennington) in July 2012. Mozell Pennington has one site located in the Second Supervisorial District and provides services to Los Angeles County DCFS foster children and youth. According to Mozell Pennington's program statement, "the facility will accomplish its goal by providing a treatment program which emphasizes academic and independent/adaptive and social skills development and improved decision making through cognitive-behavioral self-control training as prerequisites to independent living skill and vocational development."

Mozell Pennington has one six-bed site and is licensed to serve a capacity of eight boys, ages 10 through 17. At the time of the review, Mozell Pennington served five placed DCFS children. The placed children's overall average length of placement was three months and their average age was 16.

SUMMARY

During our review, the children interviewed generally reported feeling safe at Mozell Pennington; having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity.

Mozell Pennington was in full compliance with four of 10 areas of our Contract compliance review: Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; and Discharged Children.

We noted deficiencies in the areas of vehicle maintenance, maintenance of common areas, maintaining an adequate supply of perishable foods, maintenance of documentation and service delivery, ensuring the personal rights and needs of placed children, and maintenance of personnel records for staff having direct contact with children.

Subsequent to our Exit Conference, held on September 28, 2012, Mozell Pennington was placed on an Investigative Hold on October 24, 2012. Several serious deficiencies were substantiated by Community Care Licensing (CCL); therefore, a HOLD status has been imposed on Mozell Pennington Boys Center Group Home.

Attached are the details of our review.

REVIEW OF REPORT

On August 28, 2012, the DCFS OHCMD Monitor, Sonya Noil, held an Exit Conference with Mozell Pennington staff, Mozell Pennington, Chief Executive Officer and Director, and Sonya Givens, Administrator. Mozell Pennington's representatives were in agreement with the review findings and recommendations. They were receptive to implementing systemic changes to improve their compliance with regulatory standards and to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

Mozell Pennington provided the attached approved CAP addressing the recommendations noted in this compliance report.

We 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:RRS:KR
EAH:PBG:sn

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
Mozell Pennington, Executive Director, Mozell Pennington Group Home
Lenora Scott, Regional Manager, Community Care Licensing
Angelica Lopez, Acting Regional Manager, Community Care Licensing
Deborah Santos, Acting Regional Manager, Community Care Licensing

MOZELL PENINGTON BOY'S CENTER GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2012-2013

SCOPE OF REVIEW

The purpose of this review was to assess Mozell Pennington's compliance with its County contract requirements and State regulations and included a review of the Mozell Pennington'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
- Personnel Records

For the purpose of this review, two placed children were selected for the sample. We 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 Mozell Pennington's compliance with permanency efforts. At the time of the review, one child was prescribed psychotropic medication. We reviewed his case file to assess timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring.

We 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

We found the following six areas out of compliance.

Licensure/Contract Requirements

- We noted that the vehicle in which the children were being transported was not maintained in good repair. The van did not have door paneling, there were holes in the ceiling upholstery and seats. The deficiencies were brought to the Executive Director's attention.

On October 17, 2012, the Administrator contracted the Monitor and notified her that the agency purchased a vehicle. The Monitor conducted a follow-up visit to the facility and observed that this vehicle was a recently purchased used vehicle. The vehicle was well maintained in good repair.

Recommendation

Mozell Pennington's management shall ensure that:

1. The vehicle in which the children are transported is maintained in good repair.

Facility and Environment

- Common areas were not well maintained. Both bathrooms needed to be painted, and the floor and cabinets in one bathroom needed to have old paint stains removed. The agency had begun painting the bathrooms prior to the monitor's completion of the review.

- Children's bedrooms needed to be painted. The agency had begun painting the bedrooms prior to the monitor's completion of the review.

- Mozell Pennington did not have a two-day supply of fresh fruits and vegetables; there was only a one-day supply. It should be noted that on that same day, staff went to the store and purchased additional fruits, vegetables and perishables to meet the minimum required two-day supply.

Recommendations

Mozell Pennington's management shall ensure that:

2. Common areas are well maintained.

3. Children's bedrooms are well maintained.

4. There is an adequate amount of perishable and non-perishable foods.

Maintenance of Required Documentation and Service Delivery

- Mozell Pennington needed to obtain the DCFS Children's Social Workers' (CSW) authorizations to implement the Needs and Services Plans (NSP). Both the initial and updated NSPs were missing the DCFS CSWs' authorizations. The Administrator reported that effective immediately, she will ensure that all NSPs include the DCFS CSWs' authorizations.

- It was noted and discussed with the Administrator that Mozell Pennington representatives did not attend the OHCMD NSP training for all providers held in January 2012. The Administrator understands the importance of attending all OHCMD trainings provided contracted agencies. It should be noted that all documents that were handed out/sent out to the agencies that attended the training were also sent to Mozell Pennington via e-mail. At the time of the Exit Conference, the Monitor reviewed all concerns pertaining to the NSPs in detail and shared highlights of the NSP training with the Administrator.

- One child was not progressing toward meeting his NSP case plan goals. The Administrator reported that in the future, staff will ensure children's progress toward meeting their NSP goals is clearly documented in their NSPs.

- DCFS CSWs were not contacted monthly by the group home staff, and the contacts were not appropriately documented in the case file. The Administrator reported that the DCFS CSWs will be contacted monthly, and the contacts will be appropriately documented in the case files, effective immediately.

- Mozell Pennington needed to assist the children with maintaining important relationships. One child had been placed for over four months with visits from no one and this child did not have a connection with a caring adult in his life. The Administrator reported that staff will assist the child with identifying and maintaining important relationships with appropriate people.

- Two initial NSPs and one updated NSP were reviewed and it was noted that Mozell Pennington needed to develop comprehensive NSPs. CSW signatures and concurrent case plan goals were not documented and the progress of one child was not documented in the updated NSP. We instructed Mozell Pennington supervisory staff to enhance their monitoring system in order to eliminate documentation issues.

Recommendations

Mozell Pennington's management shall ensure that:

5. Staff obtains or documents efforts to obtain the DCFS CSW authorizations to implement the NSPs.

6. Sampled children are progressing toward meeting the NSPs case plan goals.

7. DCFS CSWs are contacted monthly by the group home and the contacts are appropriately documented in the case file.

8. GH will assist children in maintaining important relationships.

9. Comprehensive initial NSPs are developed and include all required elements in accordance with the NSP template.

10. Comprehensive updated NSPs are developed and include all required elements inaccordance with the NSP template.

Personal Rights and Social/Emotional Well-Being

- Children reported they were not given an opportunity to participate in age-appropriate, extra-curricular, enrichment and social activities in which they have an interest, at school, in the community or at the group home. The children expressed a desire to participate in athletic programs and while at the facility, the Monitor noted that children appeared restless. As the review was conducted during the summer, the temperature was nearly 90 degrees, and the children had expressed that they wanted to go somewhere and/or do something social. On several occasions, the Monitor heard several children ask, "When are we going somewhere? We don't want to stay in the house again."

  The Director and the Administrator were reminded that the placed children should be participating in extra-curricular activities, especially during the summer months when school is not in session. The children have since been given an opportunity to participate in extra-curricular activities after this matter was brought to the Agency's attention. One youth is playing basketball and another is playing football.

Recommendation

Mozell Pennington's management shall ensure that:

11. All placed children are given an opportunity to participate in age-appropriate, extra-curricular, enrichment, and social activities in which they have an interest, at school, in the community or at the group home.

Personal Needs/Survival and Economic Well-Being

- Children were not encouraged and assisted in creating and updating a Life Book/Photo Album. The one minor, who did not have a life book during the review, did have a life book at the Exit Conference and the Group Home representatives stated they would begin a monthly (Saturday) life book/photo album day for creating and updating the children's life books.

Recommendation

Mozell Pennington's management shall ensure that:

12. Children are encouraged and assisted in creating and updating a Life Book/Photo Album.

Personnel Records

- Staff had not received all required trainings. Two staff did not have the required Therapeutic Crisis Intervention (TCI) certificates in their file. The Administrator reported that both staff had completed the required TCI training, and that she will submit the necessary documentation as soon as possible. Both staff members will participate in the next TCI training scheduled for October 27, 2012. Until training is completed, both staff members will be paired with a second staff member who has received TCI training and certification.

Recommendation

Mozell Pennington's management shall ensure that

13. Staff shall have all the required trainings.

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

The OHCMD's last compliance report dated May 22, 2012 identified 12 recommendations.

Results

Based on our follow-up, Mozell Pennington fully implemented five of 12 of the previous recommendations that Mozell Pennington was to ensure that:

- The child population was consistent with the criteria in the Group Home Program Statement.
- Children were enrolled in school timely.
- Youth Development Services and Vocational Programs were encouraged by the Agency.
- Each child received a current Court Authorization for the Administration of Psychotropic Medication.
- All employees received emergency intervention training per the Group Home's Program Statement.

Mozell Pennington did not implement the prior recommendations regarding maintenance of the common areas and children's bedrooms. Mozell Pennington did not ensure DCFS CSWs' authorizations for NSPs were obtained, develop comprehensive NSPs or ensure CSWs were contacted monthly. Mozell Pennington did not implement assisting and encouraging children with Life Books/Photo Albums and ensure all staff had timely health-screenings.

Recommendation

14. Full implementation of the outstanding recommendations from the May 2, 2011 monitoring report, which are noted in this report as Recommendations 2, 3, 5, 7, 9, 10 and 12.

Subsequent to our Exit Conference, which was held on September 28, 2012, Mozell Pennington was placed on an Investigative Hold on October 24, 2012. Several serious deficiencies were substantiated by Community Care Licensing (CCL); therefore, a HOLD status has been imposed on Mozell Pennington Boys Center Group Home.

Attached are the details of our review.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of Mozell Pennington was posted on December 6, 2011. The A-C identified $2,852 in unallowable expenditures and $10,914 in unsupported/inadequately supported expenditures for the 2009 calendar year.

The DCFS Fiscal Monitoring & Special Payments Section informed the OHCMD that the agency submitted a Fiscal CAP and has paid-off the disallowed costs.

MOZELL PENNINGTON GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

14818 South Butler
Compton, CA 90221
License # 191600243
Rate Classification Level: 8

	Contract Compliance Monitoring Review	Findings: July 2012
I	**Licensure/Contract Requirements** (9 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Transportation Needs Met	2. Full Compliance
	3. Vehicle Maintained In Good Repair	3. Improvement Needed
	4. Timely, Cross-Reported SIRs	4. Full Compliance
	5. Disaster Drills Conducted & Logs Maintained	5. Full Compliance
	6. Runaway Procedures	6. Full Compliance
	7. Comprehensive Monetary and Clothing Allowance Logs Maintained	7. Full Compliance
	8. Detailed Sign In/Out Logs for Placed Children	8. Full Compliance
	9. CCL Complaints on Safety/Plant Deficiencies	9. Full Compliance
II	**Facility and Environment** (5 Elements)	
	1. Exterior Well Maintained	1. Full Compliance
	2. Common Areas Maintained	2. Improvement Needed
	3. Children's Bedrooms	3. Improvement Needed
	4. Sufficient Recreational Equipment/Educational Resources	4. Full Compliance
	5. Adequate Perishable and Non-Perishable Foods	5. Improvement Needed
III	**Maintenance of Required Documentation and Service Delivery** (10 Elements)	
	1. Child Population Consistent with Capacity and Program Statement	1. Full Compliance
	2. County Worker's Authorization to Implement NSPs	2. Improvement Needed
	3. NSPs Implemented and Discussed with Staff	3. Full Compliance
	4. Children Progressing Toward Meeting NSP Case Goals	4. Improvement Needed
	5. Therapeutic Services Received	5. Full Compliance
	6. Recommended Assessment/Evaluations Implemented	6. Full Compliance
	7. County Workers Monthly Contacts Documented	7. Improvement Needed
	8. Children Assisted in Maintaining Important Relationships	8. Improvement Needed

	9. Development of Timely, Comprehensive Initial NSPs with Child's Participation 10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation	9. Improvement Needed 10. Improvement Needed
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	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. Full Compliance 10. Full Compliance 11. Full Compliance

	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)	12. Full Compliance 13. Improvement Needed
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. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed
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 RequiredTraining	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed

MOZELL PENNINGTON BOYS CENTER

A NON-PROFIT ORGANIZATION

To Patricia Bolanos-Gonzalez, Manager
Children Services Administrator II
L.a. County Department of Children and Family Services
Out-of-Home Care Management Division

Mozell Pennington Boys Center
14818 South Butler Ave
Compton, Ca. 90221

Correction Action Plan
2012 Compliance Report Results/Corrective Action Plan

I. LICENSURE/CONTRACT REQUIREMENTS

3. Does the group home maintain vehicle in which the children are transported in good repair?

Correction: Mozell Pennington Boys Center has had company vehicle serviced; seat belts and seat cushions were replaced, tires, brakes, tune-up and oil-change were done on July 17th, 2012. Executive Director will be replacing current vehicle with a new vehicle no later than Jan 18th, 2013. The Administrator and Facility Manager will ensure proper maintenance of company vehicle every six months or as needed to ensure proper maintenance.

II. FACILITY AND ENVIRONMENT

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

Correction: Mozell Pennington Boys Center has re-painted bathroom walls, bathroom cabinets, ceiling of bathroom and bathroom floor tile was replaced. The refrigerator was thoroughly cleaned on July 19, 2012, day after the exit conference. Effectively immediately the Administrator will conduct a walk-thru of the facility monthly to ensure all common quarters are well- maintained. The Group Home has since created a repair log which will be used at each walk-thru (see attached document).

12. Are children's bedrooms well maintained? (Clean/sanitary; neat; comfortable; adequate lighting, window coverings, and storage space; beds; mattresses, furniture, flooring, full complement of linens on beds, age-appropriate decorations, and appropriate sleeping arrangements)

Correction: Mozell Pennington Boys Center has painted all bedroom walls and replaced all bedroom doors. Executive Director will have bedroom walls painted every six months or as needed to ensure children's bedrooms are well-maintained.

14. Does the group home maintain adequate nutritious perishable and non-perishable foods and adhere to product "used or freeze by, "best by, "sell by," or expiration dates? (A minimum of a two-day supply of perishables and a one week supply of non-perishables)

Correction: Mozell Pennington Boys Center Executive Director, Administrator and Facility Manager will ensure that there are a minimum of a two-day supply of perishable foods and a week supply of non-perishables. All clients will have access to fresh fruit on a daily basis.

III. MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

18. Are the sampled children progressing toward meeting the Needs and Services Plans case goals?

Correction: Executive Director and Administrator will ensure that clients are progressing towards meeting their case plan goals. The Administrator will review each NSP prior to signing off to ensure age- appropriate goals are in place and that each client is progressing towards meeting each goal.

21. Are County workers contacted monthly by the GH and are the contacts appropriately documented in the case file?

Correction: The Administrator will ensure that County workers will be contacted monthly. The agency has created a form to document all CSW/DPO contacts. In addition to the above the LCSW will ensure that the county worker contacts are appropriately documented in the NSP's.

22. Does the agency assist the children in maintaining important relationships?

Correction: Mozell Pennington Boys Center group home staff/Administrator will ensure each placed child is assisted in maintaining important relationships. The agency and the CSW will work in collaboration to ensure each child is assisted with an important relationship, effectively immediately.

23. Did the treatment team develop timely, comprehensive, initial Needs and Services Plans (NSP) with the participation of the developmentally age-appropriate child?

Correction: The Administrator and LCSW will ensure that all initial NSP's are developèd timely, comprehensive with the participation of the developmentally age-appropriate child. The Administrator will review all NSP's monthly to ensure compliance with the above.

24. Did the treatment team develop timely, comprehensive, updated Needs and Services Plans (NSP) with the participation of the developmentally age-appropriate child?

Correction: The Administrator and LCSW will ensure that all updated NSP's are updated timely, comprehensive with the participation of the developmentally age-appropriate child. The Administrator will review all updated NSP's monthly to ensure compliance with the above.

VII. PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

48. Are children given opportunities to participate in age-appropriate, extra-curricular, enrichment, and social activities in which they have an interest, at school, in the community or at the group home?

Correction: Administrator will ensure that all children are given the opportunity to participate in age-appropriate extra-curricular, enrichment and social activities in which they have an interest, at school, in the community or at the group home. Administrator has recently obtained information for clients to participate in sports with Rancho Dominguez Park. It should be noted that Mozell Pennington Boys Center currently has two children that are participating in extra-curricular sport's activity at school. The agency will continue to work with all children on an on-going basis to develop their interest.

VIII. PERSONAL NEEDS/SURIVIVAL AND ECONOMIC WELL-BEING

55. Are children encouraged and assisted in creating and updating a life book/photo album?

[redacted]

Correction: Mozell Pennington Boys Center Group Home staff will upon arrival of a new client provide the child with a Life Book, Client signs and dates form when Life Book is issued. The Life Books will be maintained with the case files, Staff will assist clients with obtaining photos and newspaper clippings to put in Life Book . Life Books are updated monthly.

X. PERSONNEL RECORDS

65. Have appropriate employees received all required training (initial, minimum of one-hour child abuse reporting, CPR, First-Aid, required annual, and emergency intervention?

Correction: All staff will receive the required training as per Title 22 regulation. Group Home Administrator will ensure that all staff files are maintained and updated quarterly.

MOZELL PENNINGTONS BOYS CENTER

A non-profit organization

Administration:
President : Mozell Pennington
Asst. Director: Demetrius Pillors

Administrative Office:
16952 s. Ron Drive
Carson, Ca 90746
323-321-6495 phone
310-329-4101 fax

Compton Facility:
14818 S. Butler Ave.
Compton, Ca. 90221
310-639-2472

Fax Sheet

Date: Oct. 15, 2017 #Pages: 5

To: Sonya Voil
Company Name: Out of Home Care
(626) 572-2368

From: Mistress Watkins Manager/Mozell Pennington
Telephone: 310 631-2402
Fax: 310 603-0569

Comments: