



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

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

PHILIP L. BROWNING
Director

June 19, 2015

To: Supervisor Michael D. Antonovich, Mayor
Supervisor Hilda Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Don Knabe

From: Philip L. Browning
Director

Board of Supervisors
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First District
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PARAGON CENTER, INC. GROUP HOME CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a review of Paragon Center, Inc. Group Home (the Group Home) in May 2014. The Group Home has one site located in Orange County and provides services to DCFS foster children, as well as children from other counties. According to the Group Home's Program Statement, its stated purpose is "to enable these children to increase their independent adaptive skills and decrease their maladaptive behaviors in order to gain the necessary skills for successful adult adjustment."

At the time of review, the Group Home served four County of Los Angeles DCFS female youth, as well as two children placed through Orange County. The Group Home maintains a six-bed site, licensed to serve a capacity of six female children, ages 12-17. The sampled placed children's overall average length of placement was 6 months and their average age was 17.

SUMMARY

During CAD's review, the interviewed children generally reported feeling safe, having been provided with good care and appropriate services, being comfortable in their environment, and being treated with respect and dignity.

The Group Home was in full compliance with 7 of 9 applicable areas of our contract compliance review: Facility and Environment; Educational and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Records. The tenth area of review: Discharged Children was not applicable due to the Group Home not having any County of Los Angeles children discharged during the review period.

"To Enrich Lives Through Effective and Caring Services"

CAD noted deficiencies in the areas of: Licensure/Contract Requirements, related to clothing allowance logs not being comprehensive; and Maintenance of Required Documentation and Service Delivery, related to County Children's Social Worker's (CSW's) monthly contacts not being documented and an updated Needs and Services Plan (NSP) was not comprehensive

Attached are the details of our review.

REVIEW OF REPORT

On June 18, 2014, Vanessa Gutierrez, Maria Rosas, and Lorena Moya-Rivas, DCFS CAD Contract Compliance Administrators, held an Exit Conference with Denita Trowel, Group Home Administrator and Yvonne Yohn, Assistant Executive Director. Kristine Kropke Gay, CSA I, DCFS Out-of-Home Care Management Division (OHCMD), participated via speaker phone. The Group Home representatives agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve compliance with regulatory standards; and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this 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. On April 1, 2015, CAD verified implementation of the CAP addressing the recommendations in this report. OCHMD will provide on-going technical support prior to the next contract compliance review.

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

PLB:EM:LTI
DLF:AB:vg

Attachments

c: Sachi A. Hamai, Interim Chief Executive Officer
John Naimo, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Doris Stockstill, President, Board of Directors, Paragon Center, Inc.
Pamela Cutchlow, Executive Director, Paragon Center, Inc.
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Leonora Scott, Regional Manager, Community Care Licensing Division

**PARAGON CENTER GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY**

714 Morse Ave.
Placentia, CA 92834
License Number: 306001904
Rate Classification Level: 12

	Contract Compliance Monitoring Review	Findings: May 2014
I	<p><u>Licensure/Contract Requirements</u> (9 Elements)</p> <ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 1. Not Applicable 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed 8. Full Compliance 9. Full Compliance
II	<p><u>Facility and Environment</u> (5 Elements)</p> <ol style="list-style-type: none"> 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 	Full Compliance (All)
III	<p><u>Maintenance of Required Documentation and Service Delivery</u> (10 Elements)</p> <ol style="list-style-type: none"> 1. Child Population Consistent with Capacity and Program Statement 2. County CSW'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 CSW's Monthly Contacts Documented 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 	<ol style="list-style-type: none"> 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. Full Compliance 10. Improvement Needed

IV	<p><u>Educational and Workforce Readiness</u> (5 Elements)</p> <ol style="list-style-type: none"> 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	<p><u>Health and Medical Needs</u> (4 Elements)</p> <ol style="list-style-type: none"> 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	<p><u>Psychotropic Medication</u> (2 Elements)</p> <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 	Full Compliance (All)
VII	<p><u>Personal Rights and Social/Emotional Well-Being</u> (13 Elements)</p> <ol style="list-style-type: none"> 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 12. Children Given Opportunities to Plan 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) 	Full Compliance (All)

VIII	<p><u>Personal Needs/Survival and Economic Well-Being</u> (7 Elements)</p> <ol style="list-style-type: none"> 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 	Full Compliance (All)
IX	<p><u>Discharged Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. Children Discharged According to Permanency Plan 2. Children Made Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement 	Not Applicable (All)
X	<p><u>Personnel Records</u> (7 Elements)</p> <ol style="list-style-type: none"> 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)

**PARAGON CENTER, INC.
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2013-2014**

SCOPE OF REVIEW

The following report is based on a “point in time” review. This compliance report addresses findings noted during the May 2014 review. The purpose of this review was to assess Paragon Center, Inc. Group Home’s (the Group Home’s) compliance with its Los Angeles 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 ten 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.

In the monitoring review, the area of “Discharged Children” was not deemed applicable because at the time of review, there were no discharged files for Department of Children Family Services (DCFS) foster children. The Group Home is a six-bed facility located in Orange County.

For the purpose of this review, three Los Angeles County DCFS placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed each child and reviewed their case files to assess the care and services they received. At the time of the review, one of the three placed youth was prescribed psychotropic medication. The case file was reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed 13 Group Home staff files for compliance with Title 22 Regulations and County contract requirements and a site visit was conducted to assess the provision of quality of care and supervision.

CONTRACTUAL COMPLIANCE

CAD found the following areas to be out of compliance.

Licensure/Contract Requirements

- Clothing allowance logs were not comprehensive.

Clothing allowance logs determined that three children were provided their March and April 2014 allowances in the month of April 2014. The children were given a combined \$200 clothing allowance for the months of March and April, rather than on a monthly basis. Documentation did not exist to indicate the children were given an option to purchase clothing during the month of March or if they were in agreement to hold this allowance over to April.

During the review, the Group Home Program Administrator stated she was unaware of the need to document the children's agreement to receiving their allowance in April for both March and April instead of on a monthly basis. The Group Home representative stated she would, from this point forward, obtain the child's signature indicating agreement in their clothing allowance log.

During the exit conference, the Group Home representative stated the Group Home always provides the children \$100 monthly clothing allowance; however, there are times when the children will request to have their allowance be held to the following month. The Group Home Administrator stated she will maintain documentation as to the children's request in their existing individual clothing allowance logs. This additional documentation in the children's clothing logs was verified during CAD's follow-up visit on April 1, 2015.

Recommendation:

The Group Home's management shall ensure that:

1. Comprehensive monetary and clothing allowance logs are maintained.

Maintenance of Required Documentation and Service Delivery

- The County Children Social Worker's (CSW's) monthly contacts were not documented.

One file reviewed determined that the Group Home did not document their efforts to contact the CSW for the month of April, 2014. During the review, the Group Home Program Administrator reviewed the case file and acknowledged there was an oversight in documenting contact with that child's CSW.

During the exit conference, the Group Home representative stated that the child was doing well during this period; therefore, there did not appear to be a need to communicate with the CSW. The Group Home representative stated she understands the need to maintain monthly communication with the CSW and will ensure there is monthly documentation indicating the Group Home's efforts. During a follow-up visit on April 1, 2015, CAD reviewed case files and verified proper monthly documentation of the Group Home's contact with the children's CSW.

- Updated Needs and Services Plans (NSP) were not timely or comprehensive.

During the review, the updated NSP contained one child's signature with no date. The timeliness of the child agreement to the updated NSP could not be verified without a date. For another child, CAD noted the child's medical file had several documents indicating the need for the child to maintain a healthy weight; however, the updated NSP did not include any goals relating to the child's physical health.

During the exit conference, the Group Home representative agreed the child's signature on the updated NSP needs to include the date and that the child's medical needs should have been included as a goal in the updated NSP. During a follow-up visit on April 1, 2015, CAD reviewed case files and verified that children's signatures on the updated NSPs included the date and goals were child specific.

Recommendation:

The Group Home's management shall ensure that:

2. County CSW's monthly contacts are documented.
3. Updated NSPs are timely, comprehensive, with the child's participation.

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

The OHCMD's last compliance report dated October 17, 2013, identified four recommendations.

Results

Based on CAD's follow-up, the Group Home fully implemented four of the four recommendations for which they were to ensure:

- The vehicle in which the children are transported is maintained and in good repair.
- Disaster drills are conducted and accurately documented in a disaster drill log.
- Sign In/Out Logs are maintained and document all required information in accordance with Title 22 Regulations.
- All staff members complete all required training in a timely manner.

The Group Home representatives expressed their desire to remain in compliance with Title 22 Regulations and Contract requirements. During the exit conference, Denita Trowel, Group Home Administrator, and Irene Yohn, Assistant Executive Director, reaffirmed their commitment to making the changes necessary to ensure the children's continued well-being. During a follow-up visit on April 1, 2015, CAD verified that all the recommendations have been implemented. Additionally, OHCMD will provide on-going technical assistance prior to the next monitoring review.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A current fiscal review of the Group Home has not been posted by the Auditor-Controller.



PARAGON CENTER, INC.

July 14, 2014 (Revised CAP)

Vanessa Gutierrez, MSW
Department of Children & Family Services
Contracts Administration Division
3530 Wilshire Blvd., 4th Floor
Los Angeles CA 90010

Dear Ms. Gutierrez,

In response to the Group Home Compliance Audit conducted on May 19th, 20th & 22nd, 2014 at Paragon Center, Inc., following is the Corrective Action Plan:

I. Clothing Allowance

If the Clients decide they would like to roll over their monthly clothing allowance of \$100.00 to the following month (thus increasing their monetary shopping amount), the Administrator and/or the Assistant Manager will document this clothing allowance adjustment. A clothing allowance roll over form will be signed by the Clients and maintained in the Clothing Allowance Log.

II. CSW Monthly Contacts

The last week of the month, the Administrator or the Assistant Manager will contact the Client(s) County Social Worker in the event the County Social Worker DOES NOT make his/her mandatory monthly contact with a Client. We will continue to document all communication with the CSW in our Contact Log

III. NSP/ QRTLY Report

The Administrator and the Group Home Therapist will collaborate and review goals set by a Medical Physician or other pertinent individuals involved with the Client(s). Such goals will be included in the Appraisal Needs & Service Plans and Quarterly Reports. Administrator and Group Home therapist will ensure after NSP and Qrtly



PARAGON CENTER, INC.

Ms. Vanessa Gutierrez

July 14, 2014

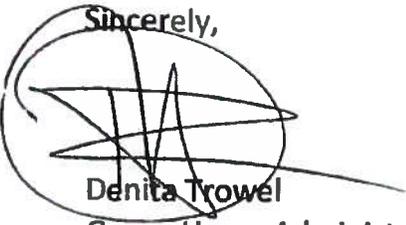
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III. NSP/ QRTLY Report Continue

review with client will ensure that after client signs NSP they will also date it this also goes for therapist as well. Group home Administrator will complete and final review of NSP and Qrtly to ensure all signatures and dates are completed.

If you have any questions, please feel free to contact Denita Trowel, Administrator 714-321-5704 or Irene Yohn Assistant Executive Director at 714-213-1428.

Sincerely,



Denita Trowel

Group Home Administrator

714-321-5704

paragoncenter@msn.com

cc: Kristine Grope-Gay

Irene Yohn

Pamela Cutchlow