County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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

PATRICIA S. PLOEHN, LCSW
Director

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December 13, 2010

To: Supervisor Michael D. Antonovich, Mayor
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Supervisor Don Knabe

From: Patricia S. Ploehn, LCSW
Director

PARAGON CENTER 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.

Paragon Center is located in Orange County and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth and Probation Department youth. According to Paragon Center's program statement, its stated goal 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." Paragon Center is licensed to serve a capacity of six children, ages 11 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Paragon Center in October 2010, at which time it had one six-bed site and two placed DCFS children. Both children were females. For the purpose of this review, the two placed children were interviewed and their case files were reviewed. The sampled children's overall average length of placement was one month and their average age was 15. Six staff files were reviewed for compliance with Title 22 regulations and contract requirements.

One child was on psychotropic medication. We reviewed her case file 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 Paragon Center's compliance with the contract and State regulations. The visit included a review of Paragon Center's program statement, administrative internal policies and procedures, two placed 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 the 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

Paragon Center was providing good quality care to DCFS placed children, and the services were provided as outlined in the agency's program statement. The children interviewed expressed satisfaction with the services.

The direct care staff stated that they were pleased with the support they received from the administrative staff. In fact, the facility manager reported that the Group Home administrative staff was attentive to the needs of the children and open to listening to the direct care staff's suggestions for improvement.

At the time of the review, the Group Home needed to develop comprehensive Needs and Services Plans (NSP), submit all Serious Incident Reports (SIR) in a timely manner, and ensure staff members complete initial and on-going training and emergency intervention training per Title 22 regulations and the Group Home's program statement. Further, the Group Home needed to encourage and assist children in creating and updating a life book/photo album.

Paragon Center was receptive to implementing some systemic changes to improve its compliance with regulations and the Foster Care Agreement. Further, the Assistant Executive Director stated that she welcomed the findings in the review so that the agency's current operating systems could be improved.

NOTABLE FINDINGS

The following are the notable findings of our review:

- Of the two initial NSPs reviewed for the two children's case files, neither was comprehensive in that they did not include all the required elements in accordance with the NSP template. Additionally, not all of the NSPs included specific and measureable treatment goals as they related to education, behaviors, permanency, life skills and visitation. Also, the methods to achieve the goals and the persons responsible for the treatment goals were not always

included. Subsequent to this review, Group Home Monitor Jui Ling Ho provided the agency with an additional refresher NSP training on November 22, 2010.

- Three of the six reviewed staff did not complete their initial/annual staff training and/or Emergency Intervention training as required in Title 22 regulations and Paragon Center's Program Statement.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held on October 21, 2010:

In attendance:

Irene Yohn, Assistant Executive Director, Paragon Center; Denita Trowel, Administrator, Paragon Center; and Jui Ling Ho, DCFS OHCMD Monitor.

Highlights:

The Assistant Executive Director was in agreement with our findings and recommendations. She stated that Paragon Center would make all necessary corrections to the NSPs and follow up to ensure that all staff received the required trainings in a timely manner.

As agreed, Paragon Center 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 further questions, please call me or your staff may contact Armand Montiel, Board Relations Manager at (213) 351-5530.

PSP:LP:KR
EAH:BB:jh

Attachments

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
Doris Stockstill, President, Board of Directors, Paragon Center
Pamela Cutchlow, Executive Director, Paragon Center
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

PARAGON CENTER PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

714 Morse Avenue
Placentia, CA 92834
Phone: (714) 572-0175
License Number: 306001904
Rate Classification Level: 12

	Contract Compliance Monitoring Review	October 2010
I	**Licensure/Contract Requirements** (9 Elements) 1. Timely Notification for Child's Relocation 2. Stabilization to Prevent Removal of Child 3. Transportation 4. SIRs 5. Compliance with Licensed Capacity 6. Disaster Drills Conducted 7. Disaster Drill Logs Maintenance 8. Runaway Procedures 9. Allowance Logs	 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. Full Compliance
II	**Program Services** (8 Elements) 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Therapeutic Services Received 6. Recommended Assessments/Evaluations Implemented 7. DCFS CSWs Monthly Contacts Documented 8. Comprehensive NSPs	 1. Full Compliance 2. Not Applicable 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed
III	**Facility and Environment** (6 Elements) 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non Perishable Food	 Full Compliance (ALL)

IV	**Educational and Emancipation Services** (4 Elements) 1. Emancipation/Vocational Programs Provided 2. ILP and Emancipation Planning 3. Current IEPs Maintained 4. Current Report Cards maintained	 1. Not Applicable 2. Not Applicable 3. Full Compliance 4. Full Compliance
V	**Recreation and Activities** (3 Elements) 1. Participation in Recreational Activity Planning 2. Participation in Recreational Activities 3. Participation in Extra-Curricular, Enrichment, and Social Activities.	 Full Compliance (ALL)
VI	**Children's Health-Related Services (including Psychotropic Medications)** (9 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation/Review 3. Medication Logs 4. Initial Medical Exams Conducted 5. Initial Medical Exams Timely 6. Follow-Up Medical Exams Timely 7. Initial Dental Exams 8. Initial Dental Exams Timely 9. Follow Up Dental Exams Timely	 Full Compliance (ALL)
VII	**Personal Rights** (11 Elements) 1. Children Informed of Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Staff Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Children Free to Receive or Reject Voluntary Medical, Dental, and Psychiatric Care 7. Children Allowed Private Visits, Calls, and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed about Psychotropic Medication 11. Children Aware of Right to Refuse Psychotropic Medication	 Full Compliance (ALL)

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

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

CONTRACTUAL COMPLIANCE

Based on our review of two children's files and six staff files, and/or documentation from the provider, Paragon Center was in full compliance with five of nine sections of our Contract Compliance review: Facility and Environment; Educational and Emancipation Services; Recreation and Activities; Children's Health-Related Services (including Psychotropic Medications) and Personal Rights. The following report details the areas found to be out of compliance.

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of two children's case files and/ or documentation from the provider, Paragon Center fully complied with eight of nine elements reviewed in the area of Licensure/Contract Requirements.

Based on our review, Paragon Center was in compliance with licensing capacity. The Group Home conducted disaster drills at least every six months and maintained runaway procedures in accordance with the contract. The Group Home was also using all available resources to attempt to stabilize the placement prior to requesting the removal of the child. However, while the agency was utilizing the I-Track system to report all SIRs, not all of the SIRs were submitted in a timely manner.

Recommendation:

Paragon Center management shall ensure that:

1. All SIRs are submitted in a timely manner according to Exhibit A-VIII (Special Incident Reporting Guide for Group Home).

PROGRAM SERVICES

Based on our review of two children's case files, Paragon Center fully complied with six of eight elements reviewed in the area of Program Services. One element was not applicable because the time frames for obtaining the DCFS CSW's authorization to implement the NSP had not expired at the time of review.

We noted that placed children met the Group Home's population criteria as outlined in the program statement, and they were assessed for needed services within thirty days of placement.

Based on our review, we found that the treatment team developed and implemented the NSPs with input from the children, and both initial NSPs were developed in a timely manner. However, neither of the two initial NSPs reviewed was comprehensive in that they did not include all the required elements in accordance with the NSP template. Additionally, not all NSPs included specific and measureable treatment goals as they related to education, behaviors, permanency, life skills and visitation. Also, the methods to achieve the goals and the persons responsible for the treatment goals were not always included. The provider stated that they had re-trained the Group Home social workers so that any NSPs/Quarterly Reports issues could be resolved.

Recommendations:

Paragon Center management shall ensure that:

2. NSPs are comprehensive and include all required elements.

CLOTHING AND ALLOWANCE

Based on our review of two children's case files and interviews with the both children, Paragon Center fully complied with seven of eight elements in the area of Clothing and Allowance.

Based on our review, both children received their initial clothing allowance. According to the Group Home administrator, the Agency gave placed children $100 for every two months. All children received an average of $50 per month for clothing. Children were provided with opportunities to select their own clothes, and clothing provided to the children was of good quality and sufficient quantity. The clothing allowance logs and inventories confirmed that the requirements were being met.

Both reviewed children reported that the Group Home provided them with the required minimum weekly allowance and both children reported that they spent their allowances as they chose.

The Group Home provided children with adequate personal care items. However, neither reviewed child was encouraged and assisted in creating and maintaining their photo albums/life books. The provider stated that the creating of photo albums and life books will be implemented during activity time.

Recommendations:

Paragon Center management shall ensure that:

3. All children are encouraged and assisted in creating and maintaining photo albums/life books.

PERSONNEL RECORDS

Based on our review of six staff personnel files, Paragon Center fully complied with nine of 12 elements in the area of Personnel Records.

All six reviewed staff met the educational/experience requirements, submitted timely criminal fingerprint cards, Child Abuse Central Index Clearance (CACI) and signed criminal background statements in a timely manner. They also signed copies of the Group Home policies and procedures, had a valid driver's license, and completed First-Aid as required per the Group Home's program statement. However, four staff members did not complete their initial and/or on-going training as required per Title 22 regulations and Paragon Center's program statement. Two of the four staff members did not complete their initial 24 hours training in a timely manner. Both missed nine and half hours of the initial training. One of the staff members who missed the initial training also missed five out of 30 required on-going training hours. The other two staff members missed five hours and seven and a half hours, respectively, of their on-going training. Also, one staff missed 10 hours refresher emergency intervention training. The provider stated that the agency will ensure that all required trainings are done in accordance with Title 22 regulations and the Group Home program statement.

Recommendations:

Paragon Center management shall ensure that:

4. All staff members receive the required training per Title 22 regulations and the Group Home's program statement.

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

Paragon Center has not recently been monitored by the Auditor-Controller's Office.

PARAGON CENTER, INC.

November 19, 2010

Ju Ling Ho
Department of Children & Family Services
Out of Home Care Management Division
9320 Telstar Avenue #206
El Monte, California 91731

Dear Ms Ho:

In response to the Annual Group Home Evaluation Review conducted on Oct 6, 7, 8 & 13th at Paragon Center, Inc. The following is the Group Home Corrective Action Plan (CAP) for the Group Home Compliance review.

I. LICENSE/ CONTRACT REQUIREMENTS

SIR's- Special Incident reports were documented and cross reported but the facility AWOL that occurred over the weekends were not submitted timely. Paragon Center was unaware that AWOL's occurring over the weekend had to be submitted within 24hrs. AWOL's occurring over the weekend will be submitted within 24hrs and will not be submitted that following business day (Mondays). Paragon Center will ensure that all SIR's are submitted in a timely matter. Group Home Administrator Denita Trowel will be responsible for submitted all SIR's timely.

II. CLOTHING AND ALLOWANCE

Life Books/Photo Album- Group home will begin creating life book and photo albums for all clients. Clients will be encouraged to participate in monthly life book creation with group home staff and therapist. Group home will also provide scraping booking material/ photos for clients in preparation for there life books. Group Home Administrator Denita Trowel will be responsible for up keep of life books and providing proper items for the creation of life books.

Mailing Address: P.O. Box 6803 Fullerton, CA 92834
Telephone: (714) 572-0175

III. PROGRAM SERVICES

1. **NSP**- Paragon Center ensures that all NSP's will be comprehensive, have specific and measurable treatment goals and method to achieve the goals. Treatment Team will review all areas of NSP before submitting final NSP's. Group Home Therapist Monica Topete, LCSW will be meeting with Group Home Monitor Ju Ling Ho to go over the NSP comprehensively. The meeting is schedule for November 22nd, 2010 at 9:30am. This meeting will help to ensure that all NSPs will be more comprehensive with regards to the following:

A). Case Planning (Permancey):
B). Education:
C).NSP Treatment & Visitation:
D).Life Skills Training/ Emancipation Preparation:
E).Number of Special Incidents Reports (SIRs)-
F). Identified Treatment Needs/ Outcome Goals:

Administrator will be responsible for final review of all NSP's to ensure that all element of the NSP before submitted to SW and other treatment team members.

2. Per your request an NSP will be submit in December 2010. No NSP's were currently due at the time of this CAP therefore, no NSP will be submitted in this CAP.

IV. PERSONNEL RECORDS

Required On-Going Training- The Group home will create staff tracking logs to ensure all staff receive the required training. Administrator Denita will be responsible for tracking all required hours on there on going training. Paragon Center will offer staff additional training sessions in which will be conducted by facility Administration. Give a verbal warning, write up and/or suspend those Staff who does not meet the mandatory training.

PARAGON CENTER, INC.

Required Initial Training- Administration will create an Initial training tracking log. Administrator Denita will utilize for its entire employee to ensure all employees meet the required initial training.

Emergency Intervention Training- Employee Sonia Dominquez was missing her 10 Hr Annual Emergency Intervention Training. Staff Sonia Dominguez will take the next available Annual TCI Refresher training on November 20th, 2010. Employee Sonia Dominguez will not be left alone with any clients until she completes and pass her refresher 10 Hr. Annual Emergency Intervention Training. Upon receipt of the certificates it will be submitted to your office. No certificate will be available at the time of this CAP.

If you have any questions regarding the Group Home Compliance CAP, please feel free to contact Irene Yohn, Assistant Executive Director 714-213-1428 or myself at 714-321-5704.

Sincerely,

Denita Trowel
Group Home Administrator

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Telephone: (714) 572-0175