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County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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January 14, 2011

To: Supervisor Michael D. Antonovich, Mayor
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From: Antonia Jiménez
Interim Director

PROJECT SIX GROUP HOME 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.

Project Six Group Home is located in the 3rd Supervisorial District and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to Project Six Group Home's program statement, the stated goal is to "decrease residents' maladaptive behaviors and improve their social, emotional and academic/occupational functioning." Project Six Group Home is licensed to serve a capacity of 24 children, girls and boys ages 11 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Project Six Group Home in March 2010 at which time the agency had one 24-bed site and two DCFS placed children. Both children were males. For the purpose of this review, both DCFS children were interviewed, and their case files reviewed. The placed children's overall average length of placement was five and a half months, and their average age was 15. Five staff files were reviewed for compliance with Title 22 regulations and contract requirements.

Both 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 Project Six Group Home's compliance with the contract and State regulations. The visit included a review of Project Six Group Home's program statement, administrative internal policies and procedures, two 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

Generally, Project Six Group Home 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 stated they were satisfied residing in the home.

At the time of the review, we noted some documentation deficiencies. The Group Home needed to develop comprehensive Needs and Services Plans (NSP). In addition, both children did not have timely initial medical examinations and one child did not have a timely initial dental examination. Both children stated they were not encouraged to have life books/photo albums. The Group Home Monitor did not observe life books/photo albums for either child.

Project Six Group Home was receptive to implementing some systemic changes to improve its compliance with regulations and the Foster Care Agreement. The Program Director stated she understood the findings in the review and would develop a plan to correct the deficiencies.

NOTABLE FINDINGS

The following are the notable findings of our review:

- Of the five initial and updated NSPs reviewed, three were not comprehensive in that they did not contain all the required elements in accordance with the NSP template. The Monitor and Program Director discussed and reviewed the NSPs that were not comprehensive, and the Program Director stated she would ensure NSPs developed in the future were comprehensive.
- Neither child had timely initial medical examinations, and one child did not have a timely initial dental examination. The Monitor informed the Program Director that children are to have initial medical and dental examinations within 30 days of placement in the agency. The Program Director agreed and stated that children would receive timely initial medical and dental examinations.

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- Both children stated they were not encouraged to have life books/photo albums. The Group Home Monitor did not observe life books/photo albums for either child during the review. The Program Director stated one child kept his book at his mother's home. She stated that in the future, the agency staff would encourage children to have life books/photo albums and maintain them at the Group Home.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held July 6, 2010:

In attendance:

Jessica Romeyn, Program Director, Project Six Group Home, and LaDonna Jones, Monitor, DCFS OHCMD.

Highlights:

The Program Director was in agreement with our findings and recommendations. She and the Monitor discussed and reviewed the NSPs. The Program Director was open to suggestions and receptive to additional NSP training to generate comprehensive and timely NSPs.

A draft copy of the report was provided to the Program Director however she had no further responses to provide. As agreed, Project Six Group Home provided a timely Corrective Action Plan (CAP) addressing each recommendation noted in this Compliance Report.

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, your staff may contact Armand Montiel, Board Relations Manager, at (213) 351-5530.

AJ:LP:KR
EAH:DC:lj

Attachments:

- C: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Public Information Office
Audit Committee
Donald H. Blevins, Chief Probation Officer
Sybil Brand Commission
Jessica Romeyn, Program Director, Project Six Group Home
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

**PROJECT SIX
CONTRACT COMPLIANCE MONITORING REVIEW - SUMMARY**

SITE LOCATION

**15339 Saticoy St.
Van Nuys, CA 91405
License Number: 197606825
Rate Classification: 12**

	Contract Compliance Monitoring Review	Findings: March 2010
I	<p><u>Licensure/Contract Requirements</u> (9 Elements)</p> <ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 1. N/A 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance
II	<p><u>Facility and Environment</u> (6 Elements)</p> <ol style="list-style-type: none"> 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 	<p>Full Compliance (ALL)</p>
III	<p><u>Program Services</u> (8 Elements)</p> <ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Improvement Needed 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed
IV	<p><u>Educational and Emancipation Services</u> (4 Elements)</p> <ol style="list-style-type: none"> 1. Youth Development Services Provided 2. Youth Development Services Planning 	<ol style="list-style-type: none"> 1. N/A 2. N/A

	<ul style="list-style-type: none"> 3. Current IEPs Maintained 4. Current Report Cards Maintained 	<ul style="list-style-type: none"> 3. Full Compliance 4. Full Compliance
V	<p><u>Recreation and Activities</u> (3 Elements)</p> <ul style="list-style-type: none"> 1. Participation in Recreational Activity Planning 2. Participation in Recreational Activities 3. Participation in Extra-Curricular, Enrichment and Social Activities 	<ul style="list-style-type: none"> 1. Improvement Needed 2. Full Compliance 3. Full Compliance
VI	<p><u>Children's Health-Related Services (including Psychotropic Medications)</u> (9 Elements)</p> <ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Improvement Needed 6. N/A 7. Full Compliance 8. Improvement Needed 9. N/A
VII	<p><u>Personal Rights</u> (11 Elements)</p> <ul style="list-style-type: none"> 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 	<p>Full Compliance (ALL)</p>
VIII	<p><u>Children's Clothing and Allowance</u> (8 Elements)</p> <ul style="list-style-type: none"> 1. \$50 Clothing Allowance 2. Adequate Quantity of Clothing Inventory 3. Adequate Quality of Clothing Inventory 	<ul style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance

	<ul style="list-style-type: none"> 4. Involvement in Selection of Clothing 5. Provision of Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance 8. Encouragement and Assistance with Life Book 	<ul style="list-style-type: none"> 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed
IX	<p><u>Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)</u> (12 Elements)</p> <ul style="list-style-type: none"> 1. Education/Experience Requirement 2. Criminal Fingerprint Cards Timely Submitted 3. CAls Timely Submitted 4. Signed Criminal Background Statement Timely 5. Employee Health Screening Timely 6. Valid Driver's License 7. Signed Copies of GH Policies and Procedures 8. Initial Training Documentation 9. CPR Training Documentation 10. First Aid Training Documentation 11. On-going Training Documentation 12. Emergency Intervention Training Documentation 	Full Compliance (ALL)

**PROJECT SIX GROUP HOME PROGRAM
CONTRACT COMPLIANCE MONITORING REVIEW**

**15339 Saticoy St.
Van Nuys, CA 91405
License Number: 197606825
Rate Classification Level: 12**

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

CONTRACTUAL COMPLIANCE

Based on our review of two children's files and five staff files, and/or documentation from the provider, Project Six Group Home was in full compliance with five of nine sections of our Contract Compliance review: Licensure/Contract Requirements, Facility and Environment, Educational and Emancipation Services, Personal Rights and Personnel Records. The following report details the results of our review:

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of two children's case files and/or documentation from the provider, Project Six Group Home fully complied with eight of nine elements reviewed; the ninth element in the area of Licensure/Contract Requirements, Timely Notification for Child's Relocation, was not applicable as this is a one-site group home.

Recommendation:

None

FACILITY AND ENVIRONMENT

Based on our review of Project Six Group Home, review of two children's case files and/or documentation from the provider, Project Six Group Home fully complied with all six elements in the area of Facility and Environment.

Recommendation:

None

PROGRAM SERVICES

Based on our review of two children's case files and/or documentation from the provider, Project Six Group Home fully complied with six of eight elements reviewed in the area of Program Services.

We noted that placed children were placed in accordance with the Group Home's population criteria as outlined in the agency's program statement. Also, children were receiving required therapeutic services, and recommended assessments/evaluations were implemented.

NSPs were discussed with the Group Home staff. However, one child did not participate in the development of one NSP. Also, some NSPs were not comprehensive. Specifically, one

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updated NSP had no documentation of specific information regarding visits such as dates of the visits, quality of the visits and the transportation arrangement. One NSP did not document measurable progress and did not contain all the required elements in accordance with the NSP template. The Monitor discussed and reviewed the NSPs with the Program Director who stated that she would ensure future NSPs are comprehensive and that she was receptive to additional NSP training.

Recommendations:

Project Six Group Home management shall ensure that:

1. Age appropriate children participate in the development of NSPs.
2. NSPs are comprehensive, including all required elements in accordance with the NSP template.

EDUCATIONAL AND EMANCIPATION SERVICES

Based on our review of two children's case files and/or documentation from the provider, Project Six Group Home fully complied with two of four elements reviewed. Two elements were not applicable, as the children were under the age of 16 and were not required to participate in Youth Development Services.

Recommendation:

None

RECREATION AND ACTIVITIES

Based on our review of two children's case files and/or documentation from the provider, Project Six Group Home fully complied with two of three of the elements reviewed in the area of Recreation and Activities.

One of the two children interviewed stated he was not given the opportunity to plan activities. This was mentioned to staff during the exit conference; however, the staff provided no comments.

Recommendation:

Project Six Group Home Home management shall ensure that:

3. Children are given opportunities to participate in planning activities.

CHILDREN'S HEALTH-RELATED SERVICES, INCLUDING PSYCHOTROPIC MEDICATION

Based on our review of two children's case files and/or documentation from the provider, Project Six Group Home fully complied with seven of nine elements in the area of Children's Health-Related Services, including Psychotropic Medication.

Both placed children at Project Six Group Home were prescribed and administered psychotropic medication. Both children had current court approved medication authorizations and current

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psychiatric evaluations on file. In addition, medication logs were properly maintained for both children.

Neither child reviewed had timely initial medical examinations. Both were placed in the Group Home less than one year and no follow-up medical examinations were required at the time the review was conducted.

One child did not have a timely initial dental examination. Both children were placed in the Group Home less than six months and no follow-up dental examinations were required at the time the review was conducted. The Program Director stated the Group Home would ensure that children receive timely initial medical and dental examinations after placement in the Group Home.

Recommendation:

Project Six Group Home management shall ensure that:

4. Children receive timely initial medical and dental examinations.

PERSONAL RIGHTS

Based on our review of two children case files and/or documentation from the provider, Project Six Group Home fully complied with all 11 elements in the area of Personal Rights.

Recommendation:

None

CLOTHING AND ALLOWANCE

Based on our review of two children's case files and/or documentation from the provider, Project Six Group Home fully complied with seven of eight elements reviewed in the area of Clothing and Allowance.

Both children stated they were provided the minimum clothing allowance and their clothing inventories were of adequate quality and quantity. The children were involved in the selection of their clothing. Both children stated they were provided with adequate personal care items. The children stated they were always provided with the minimum monetary allowance and they were free to manage their allowances.

However, both children stated they were not encouraged or assisted in creating and updating a life book/photo album. The Monitor did not observe life books or photo albums for any of the children. The Monitor brought this to the attention of the Program Director during the exit conference. The Program Director stated they would ensure children are encouraged and assisted with creating life books or photo albums.

Recommendation:

Project Six Group Home management shall ensure that:

5. Children are encouraged and assisted in creating and updating life books/photo albums.

PERSONNEL RECORDS

Based on our review of five staff personnel files and/or documentation from the provider, Project Six Group Home fully complied with all 12 elements reviewed in the area of Personnel Records.

Recommendation:

None

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 whether the outstanding recommendation from the A-C report dated April 24, 2009 was implemented.

Results

The A-C's prior monitoring report contained one outstanding recommendation. Project Six Group Home was to repair and paint the walls in the girls' bedrooms. This recommendation was fully implemented.

Recommendation:

None

DATE: November 4, 2010
TO: LaDonna Jones, DCFS OHC Group Home Monitor
Dorothy Channel, DCFS OHC Group Home Manager
FROM: Project Six
RE: Corrective Action Plan for
Group Home Contract Compliance Review (8/16/10)

The Corrective Action Plan (CAP) has been implemented as follows for the Project Six Group Home located at 15339 Satcoy Street, Van Nuys, California 91406 (License # 197600205):

III. Program Services Recommendation

Corrective Action Plan

- Project Six therapists will continue to encourage all children to participate in the development of the Needs and Service Plans. Effective immediately, all initial NSP's and updated NSP/Quarterlies will document client participation in the establishment of treatment goals.
- All initial NSP's and updated NSP/Quarterlies will be comprehensive. NSPs will contain goals that are specific, measurable, attainable, and have specific time frames for deliverance. Included will be the plan for health and education, visitation, strengths of family, and will document progress or lack of progress. Families and children will continue to collaborate with therapists in the development of the Needs and Service Plans.

Therapist and supervisors will audit Needs and Service Plans on a monthly basis to ensure they are comprehensive and include documentation of collaboration with children and families.

V. Recreation and Activities

Corrective Action Plan

- Project Six will continue to give children the opportunity to participate in the planning of activities and events. Project Six continues to engage and support the resident council. Currently there is a resident that acts as "Activities Advocate". The resident advocate will continue to solicit requests from current residents to ensure that all residents are able to provide input into activities and events.
- Project Six counselors will continue to encourage all residents to participate in planned activities. If a resident chooses to not participate, the therapist will be notified, any clinical issues will be explored and the refusal will be documented. Project Six counselors will be responsible for tracking outing refusals. Refusal will be listed on the NSP if it is determined to be clinically significant.

VI. Children's Health Related-Services

Corrective Action Plan

- Effective immediately, the Project Six intake coordinator will require a medical hub pre-authorization document at the time of admission. The pre-authorization will ensure that all clients are able to have initial medical & dental appointments

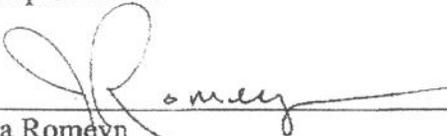
within 30 days of placement. Provided the residents are eligible for medical and dental examinations, Project Six will ensure that all initial examinations occur within 30 days of initial placement. If residents are not eligible for medical or dental examinations, CSW will be notified and a plan of action will be devised with the assistance of CSW. All plans of actions will be documented in the NSP along with CSW signature and parent, if appropriate. Project Six program coordinator will devise a tracking sheet to confirm and document when medical and dental examinations take place. Program coordinator as well as Jessica Romeyn will be responsible for reviewing and approving medical and dental tracking sheets to ensure that all children are being examined within the initial 30 days of placement.

VIII. Clothing and Allowance

Corrective Action Plan

- As part of the curriculum at Project Six, residents will continue to be encouraged and assisted in the creation of life/ memory books. Residents will be encouraged to maintain and update the life/memory books. Residents will be required to maintain the memory books while at Project Six. If a resident wishes to not develop a life/ memory book, the therapist will explore any significant clinical issues. Any clinical issues as well as the refusal will be documented in the NSP. Therapists will be responsible for implementing this corrective action plan.

Jessica Romeyn, Program Director, will be responsible for ensuring that the CAP will be fully implemented.



Jessica Romeyn
Program Director
Project Six

11.17.10

Date