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DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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August 16, 2012

To: Supervisor Zev Yaroslavsky, Chairman
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From: Philip L. Browning
Director

T & T HOME FOR BOYS 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 T & T Home for Boys (T & T) in January 2012, at which time they had one six-bed site and five placed DCFS children.

T & T is located in the Second Supervisorial District and provides services to DCFS foster youth. According to T & T's program statement, "The T & T Group Home program is designed to provide comprehensive behavior and social adjustment services to its adolescent males who experience emotional disturbance, physical abuse, poor social adjustment and behavioral problems learning disabilities." T & T is licensed to serve a capacity of six male children, ages 12 through 17. The placed children's overall average length of placement was six months and the average age was 16.

For the purpose of this review, four currently placed children were interviewed and their case files were reviewed. Two discharged children's case files were reviewed to determine if they were meeting their Needs and Services Plan (NSP) goals and discharged per their permanency plan. Three staff files were reviewed for compliance with Title 22 Regulations and the County contract requirements.

None of the four sampled children were prescribed psychotropic medication.

SCOPE OF REVIEW

The purpose of this review was to assess T & T's compliance with the County contract and State regulations. The visit included a review of T & T's program statement, administrative internal policies and procedures; four placed children's case files; two discharged case files and a random sampling of personnel files. A visit was made to the group home site to assess the quality of care and supervision provided to 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, T & T was providing good quality care to DCFS placed children and the services were provided as outlined in its program statement. The children interviewed stated that they liked residing in the home; they felt safe and were treated with respect and dignity.

Deficiencies were noted during our review. The common quarters of the facility required some maintenance. The review also revealed that T & T had admitted a child for placement who did not meet T & T's population criteria. In addition, T & T needed to develop comprehensive initial and updated NSPs, the DCFS CSWs' authorizations to implement the NSPs were not obtained for some NSPs, and efforts to obtain the authorizations were not documented.

T & T needed to ensure DCFS Children's Social Workers (CSWs) were contacted monthly by the group home staff and the contacts were appropriately documented.

Follow-up dental exams were not conducted timely. T & T needed to also ensure that staff signed criminal background statements in a timely manner and that staff received timely health-screenings.

T & T's Director and Administrator were accessible and receptive to implementing systemic changes to improve its compliance with regulations and the County contract. Further, the Director stated that all of the findings brought to his attention would be corrected.

NOTABLE FINDINGS

- The common quarters were not well maintained. Paint was peeling from the wall above the kitchen sink. The area was re-painted after it was brought to the attention of the Facility Manager.

- One child who did not meet T & T's program statement population criteria was admitted for placement; T & T accepted a child who had a history of sexual acting-out and predatory behaviors. The program statement clearly states that children who are sexual predators/exploit others would not be admitted/accepted. T & T has assured OHCMD that they will not accept children who do not meet the program population criteria in the future. It should be noted that since the young man's placement, he has received individual and group counseling, and T & T and the CSW have worked collaboratively to ensure he was enrolled in sexual abuse counseling and attended consistently.

- The DCFS CSWs' authorizations to implement the NSP were not obtained, and efforts to obtain CSWs' authorizations were not properly documented.

- DCFS CSWs were not contacted monthly by the T & T staff. The Facility Manager reported that they will do a better job of contacting CSWs monthly and appropriately documenting the contacts. The Facility Manager was receptive to utilizing a CSW contact log, to immediately begin documenting all contacts with CSWs.

- Follow-up dental exams were not timely. T & T's Facility Manager understands the importance of timely follow-up dental examinations and agreed to ensure that all follow-up exams are timely.

- None of the initial and updated NSPs reviewed were comprehensive, as they lacked complete and accurate face sheet information; information regarding visitation was vague; goals did not have realistic projected completion dates; and NSPs did not include T & T's staff contacts with the CSWs. The Group Home Director and the Facility Manager were receptive to additional NSP training to assist them in developing comprehensive NSPs and they also attended the NSP training conducted by OHCMD in January 2012.

- One employee had not signed a criminal background statement in a timely manner. T & T's Director understands the importance of timely documentation and agreed to submit timely criminal background statements.

- One employee had not received a timely health-screening. T & T's Director understands the importance of timely health-screenings and agreed to submit a timely health-screening effective immediately. The employee has since submitted a recent updated health-screening.

A detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held May 4, 2012.

In attendance:

Jimmy Theragood, Director; Zachary William, Facility Manager; Delorese Daniels, Licensed Clinical Social Worker (LCSW), T & T; and Sonya Noil, Monitor, DCFS OHCMD.

Highlights:

The Director was in agreement with our findings and recommendations. The Facility Manager and the LCSW agreed that the NSPs were not comprehensive and both stated that the recommendations given by the Monitor were very helpful. The Director stated that T & T will improve in every aspect in order to be in compliance with OHCMD requirements, the County contract and State regulations.

The Director and the Facility Manager reported that they appreciated the recommendations given to them at the Exit Conference and that they will continue to work with OHCMD to improve their quality of care.

T & T submitted an approved Corrective Action Plan (CAP) addressing each recommendation noted in this compliance report.

We will assess for full implementation of the recommendations during our next monitoring review.

If you have any questions, please call me or your staff may contact 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
Jimmy Theragood, Director, T & T Home for Boys Group Home
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

T &T HOME FOR BOYS GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW-SUMMARY

19504 Tillman Avenue
Carson, CA 90746
License Number: 191600883
Rate Classification Level: 8

	Contract Compliance Monitoring Review	Findings: January 2012
I	**Licensure/Contract Requirements** (9 Elements) 1. Timely Notification for Child's Relocation 2. Transportation 3. SIRs 4. Compliance with Licensed Capacity 5. Disaster Drills Conducted & Logs Maintained 6. Runaway Procedures 7. Allowance Logs 8. CCL Citations/OHCMD Investigation Reports on Safety/Plant Deficiencies 9. Detailed Sign In/Out Logs for Placed Children	Full Compliance (ALL)
II	**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	1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance
III	**Maintenance of Required Documentation and Service Delivery** (13 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	1. Improvement Needed 2. Improvement Needed 3. Full Compliance 4. Full Compliance

	5. Children Progressing Toward Meeting NSP Case Goals 6. Development of Timely Initial NSPs 7. Development of Comprehensive Initial NSPs 8. Therapeutic Services Received 9. Recommended Assessment/Evaluations Implemented 10. DCFS CSWs Monthly Contacts Documented 11. Children Assisted in Maintaining Important Relationship 12. Development of Timely Updated NSPs 13. Development of Comprehensive Updated NSPs	5. Full Compliance 6. Full Compliance 7. Improvement Needed 8. Full Compliance 9. Full Compliance 10. Improvement Needed 11. Full Compliance 12. Full Compliance 13. Improvement Needed
IV	**Education and Workforce Readiness** (8 Elements) 1. Children Enrolled in School Timely 2. Children Attending School 3. GH Facilitates in Meeting Child's Educational Goals 4. Children's Academic or Attendance Increase 5. Current IEPs Maintained 6. Current Report Cards Maintained 7. YDS/Vocational Programs Opportunities Provided 8. GH Encourages Children's Participation in YDS	Full Compliance (ALL)
V	**Health And Medical Needs** (6 Elements) 1. Initial Medical Exams Conducted 2. Initial Medical Exams Timely 3. Follow-up Medical Exams Timely 4. Initial Dental Exams Conducted 5. Initial Dental Exams Timely 6. Follow-Up Dental Exams Timely	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Improvement Needed
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** (15 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. Fair Consequences 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed About Their Medication 11. Children Aware of Right to Refuse Medication 12. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 13. Children Given Opportunities to Plan Activities 14. Children Participate in Activities (GH, School, Community) 15. Children's Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities	Full Compliance (ALL)
VIII	**Personal Needs/Survival And Economic Well-Being** (8 Elements) 1. $50 Clothing Allowance 2. Adequate Quantity of Clothing Inventory 3. Adequate Quality of Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Ethnic Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance/Earnings 8. Encouragement and Assistance with Life Book/Photo Album	Full Compliance (ALL)
IX	**Discharged Children** (3 Elements) 1. Children Discharged According to Permanency Plan 2. Children Making Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement	Full Compliance (ALL)

X	**Personnel Records** (14 Elements) 1. DOJ Submitted Timely 2. FBI Submitted Timely 3. Child Abuse Central Index's Timely Submitted 4. Signed Criminal Background Statement Timely 5. Education/Experience Requirement 6. Employee Health-Screening Timely 7. Valid Driver's License 8. Signed Copies of GH Policies and Procedures 9. Initial Training Documentation 10. One-Hour Child Abuse and Reporting Training 11. CPR Training Documentation 12. First-Aid Training Documentation 13. Ongoing Training Documentation 14. Emergency Intervention Training Documentation	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Improvement Needed 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance 14. Full Compliance

T & T HOME FOR BOYS GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW

19504 Tillman Avenue
Carson, CA 90746
License Number: 191600883
Rate Classification Number: 8

The following report is based on a "point in time" monitoring visit and addresses findings noted during the January 2012 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review, T & T Home for Boys Group Home (T & T) was in full compliance with six of 10 sections of our contract compliance review: Licensure/Contract Requirements; Education and Workforce Readiness; Psychotropic Medication; Personal Rights and Social/Emotional Well-being; Personal Needs/Survival and Economic Well-being; and Discharged Children. The following report details the results of our review.

FACILITY AND ENVIRONMENT

Based on our review of four children's case files and/or documentation from the provider, T & T fully complied with five of six elements reviewed in the area of Facility and Environment.

The paint on the wall directly above the kitchen sink was peeling and was in need of re-painting. The Facility Manager reported that it would be re-painted as soon as possible. The Monitor verified that the work had been completed.

Recommendations:

T & T's management shall ensure:

1. Common quarters are well-maintained.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review, T & T fully complied with eight of 13 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery.

We found that T & T had accepted a child for placement who did not meet T & T's program statement population criteria. The program statement clearly states T & T will not accept children who are sexual perpetrators/exploit others. However, one placed child had exhibited this behavior prior to placement at the group home. T & T reported that they will not accept children who do not meet the population criteria. It should be noted; however, no incidents involving this youth have been reported since his placement at T & T. The agency has ensured that the child receives individual and group counseling, and T & T's staff and the DCFS Children's Social Worker (CSW) have worked collaboratively to ensure the child was enrolled in and participated in sexual abuse counseling.

It was further noted that T & T staff did not obtain or document their efforts to obtain the DCFS CSWs' authorizations to implement the NSPs. The Facility Manager reported that effective immediately, T & T staff will begin documenting all efforts to obtain the DCFS CSWs' authorization to implement the NSPs on the monthly contact log, which was provided to T & T's management by the OHCMD Monitor immediately following the Exit Conference.

In addition, CSWs were not contacted monthly by the T & T staff. The Administrator reported that they will do a better job of contacting the CSWs monthly and appropriately documenting the contacts. The agency was receptive to utilizing a CSW contact log, effective immediately.

None of the initial and updated NSPs reviewed were comprehensive, as they lacked complete and accurate face sheet information (dates were not clear); information regarding visitation was vague; goals did not have realistic projected completion dates; NSPs did not address the T & T's staff contacts with the CSWs. The Director and Facility Manager were receptive to additional NSP training to assist them in generating comprehensive NSPs; they attended the NSP training conducted by the OHCMD in January 2012.

Recommendations:

T & T's management shall ensure:

2. Children are placed in accordance with the T & T program statement's population criteria.

3. CSWs' authorization is obtained to implement NSPs.

4. Development of comprehensive initial NSPs.

5. All CSWs are contacted monthly by the group home staff, and the contacts are appropriately documented and maintained in the children's files.

6. Development of comprehensive updated NSPs.

HEALTH AND MEDICAL NEEDS

Based on our review, T & T fully complied with five of six elements reviewed in the area of Health and Medical Needs.

We noted one child had not received a follow-up dental exam by the date recommended during the last dental visit. The Monitor reminded the Facility Manager that T&T is responsible for ensuring placed children attend follow-up exams. The follow-up exam was never conducted as the child was replaced. The Facility Manager understands that all exams should be conducted timely.

Recommendation:

T & T's management shall ensure:

7. All follow-up dental exams are conducted timely.

PERSONNEL RECORDS

Based on our review, T & T fully complied with 12 of 14 elements in the area of Personnel Records.

During our review, it was noted that one staff person did not sign a criminal background statement in a timely manner, and another staff members health-screening was not timely. Per the Director, T & T understands and agrees to submit timely criminal background statements and ensure staff receive timely health-screenings.

Recommendations:

T & T's management shall ensure:

8. Employees sign a criminal background statement in a timely manner.

9. Staff receives timely health-screenings.

FOLLOW-UP FROM OHCMD'S PRIOR MONITORING REPORT

Objective

Determine the status of the recommendations reported in the OHCMD's prior monitoring review.

Verification

We verified whether the outstanding recommendations from our prior review were implemented. The last report was issued July 14, 2011.

Results

The OHCMD's prior monitoring report contained 11 outstanding recommendations. Specifically, T & T was to ensure the following: special incident reports were appropriately documented; common areas and children's bedrooms were maintained and that there was sufficient recreational equipment; perishable and non-perishable foods were maintained; NSPs were comprehensive; the DCFS CSWs' authorizations were obtained to implement the NSPs; copies of the children's report cards are maintained; initial medical and dental exams are timely and that dental exams are conducted; children report satisfaction with meals and snacks; and that children are encouraged and assisted in creating and updating a Life Book.

Based on our follow-up of these recommendations, T & T fully implemented seven of 11 recommendations. T & T did not implement the recommendations regarding common quarters being maintained, comprehensiveness of initial and updated NSPs, and obtaining the DCFS CSWs' authorizations to implement NSPs.

Recommendation:

T & T's management shall ensure:

10. Full implementation of the outstanding recommendations from the 2010 monitoring report, which are noted in this report as Recommendations 1, 3, 4, and 6.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The Auditor-Controller (A-C) conducted a fiscal review of T & T Group Home for the period of July 1, 2003 through June 30, 2004. The A-C's fiscal report dated May 27, 2008 identified $15,467 in questioned costs, including $1,631 in disallowed costs, $9,649 in unsupported/inadequately supported expenditures, and $4,187 in unaccounted expenses for clothing payments. T & T has paid its fiscal responsibility in full.

T & T Home for Boys

19504 Tillman Ave ~ Carson, CA 90746

310-635-2469 landline ~ 310-537-8797 fax

June 1, 2012

Out of Home Care Management Division

II. FACILITY AND ENVIRONMENT

11. Are common quarters maintained?

T & T Home for Boys facility manager [redacted] will do a walk through quarterly to make sure that all common quarters are maintained. He will report the findings to the administrator, [redacted] will put in a work order to have the problem corrected. It should be noted that the peeling paint above the kitchen sink was repainted.

III. MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

16. Are the children placed in accordance with the group home's population criteria?

Effective immediately our agency will abide by our program statement. The administrator, [redacted] will only accept children that are in accordance with the group home population criteria to ensure that the agency is in compliance. Our intake worker will also follow the same criteria before placing minors in our agency.

17. Did the group home obtain the DCFS CSW's authorization to implement the needs and service plan?

The facility manager, [redacted] will fax over the NSP'S immediately to request signatures from social workers. If the social worker does not respond, [redacted] will personally hand deliver the NSP's to the appropriate office.

22. Did the treatment team development comprehensive initial needs and services plans (NSP) with the child?

Upon entering T & T Home for Boys program facility manager [redacted] and group home's Social Worker, [redacted] will meet every other Friday to ensure that a comprehensive initial service plan will be developed.

25. Are DCFS CSW's contacted monthly by the GH and are the contacts appropriately documented?

Facility Manager, [redacted] has acquired the CSW's monthly contact forms from [redacted] DCFS CSW's monthly contacts will be documented and kept in a special folder designed to meet this need.

28. Did the treatment team develop comprehensive updated needs and service plans (NSP) with the child?

T & T Home for Boys has developed a check and balance procedure to ensure that the needs and service plans are comprehensive and updated as required by group home monitoring. Team includes [redacted] and LCSW [redacted] and [redacted] will meet every other Friday to ensure that the needs and service plans are completed.

V. HEALTH AND MEDICAL NEEDS

42. Are required follow-up dental examinations conducted timely?

GH Facility Manager, [redacted] will ensure that all follow-up dental exams are conducted timely. [redacted] will review all medical and dental records weekly to ensure all follow-ups are noted and executed.

X. PERSONNEL RECORDS

76. Did appropriate employee sign a criminal background statement in a timely manner?

All employees will receive a criminal background statement and this statement must be completed and signed prior to employment.

78. Have employees received timely health screenings?

Prior to employment [redacted] will ensure that all new employees will have a timely health screening.

Respectfully submitted,

Jimmie Theragood 06/01/12

Jimmie Theragood, Administrator