County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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

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Interim Director

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April 27, 2011

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

From: Jackie Contreras, Ph.D.
Interim Director

TURMONT HOME FOR BOYS AND GIRLS 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.

Turmont Home for Boys and Girls (Turmont) has two sites. The Carson site is located in the 2nd Supervisorial District, and the Lancaster site is located in the 5th Supervisorial District. Turmont provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to Turmont's program statement, its stated goal is to "provide 24-hour non-medical care and supervision to residents placed by the Department of Children and Family Services." Both the Carson and Lancaster facilities are licensed to serve a capacity of six children, ages 13 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Turmont in November 2010, at which time the agency had two six-bed sites and eight placed DCFS children, four males and four females. For the purpose of this review, six placed children were interviewed and six case files were reviewed. Two of the placed children were not interviewed and their case files were not reviewed because they had been placed fewer than 30 days. The six children's overall average length of placement was four months and their average age was 15. Nine staff files were reviewed for compliance with Title 22 regulations and contract requirements.

None of the six placed children were prescribed psychotropic medication.

SCOPE OF REVIEW

The purpose of this review was to assess Turmont's compliance with the contract and State regulations. The visit included a review of Turmont's program statement, administrative internal policies and procedures, six sampled children's case files and a random sampling of personnel files. A visit was made 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, Turmont was providing good quality care to DCFS placed children and services were provided as outlined in its program statement. The children interviewed stated that they wanted to continue residing at the placement and that the staff treated them well.

The direct care staff stated that they felt supported by the administrative staff and that the Group Home administrative staff was attentive to the needs of the children.

At the time of the review, Turmont needed to ensure that all Needs and Services Plans (NSP) were timely and comprehensive; that the DCFS Children's Social Worker's signature was on each NSP, and that all elements of the NSP template were completed.

Turmont's management was receptive to implementing some systemic changes to improve their compliance with regulations and the Foster Care Agreement.

NOTABLE FINDINGS

The following are the notable findings of our review:

- Of the 11 initial and updated NSPs reviewed for the six children's case files, one updated NSP was not comprehensive in that not all required elements were completed in accordance with the NSP template. This included information concerning Educational ILP/YDS/Life Skills Training, medical outcomes and follow-up information.

- Of the six children reviewed, two updated NSPs were not developed and maintained.

- CSWs' signatures authorizing implementation of the NSPs were also missing as were some of the children's signatures confirming their participation in the development of the NSPs.

Each of the NSP findings was brought to Turmont's Administrator's attention and he understood the importance of developing comprehensive NSPs.

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The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conference held on January 13, 2011.

In attendance:

Victor Bradley, Executive Director, Turmont, and Linda Reusser, Monitor, DCFS OHCMD.

Highlights:

The Administrator was in agreement with our findings and recommendations. He stated that, based on the Monitor's explanation of the findings, he was able to see the importance of the Group Home staff obtaining and providing more information to the Social Worker so that the NSPs would be comprehensive. The Administrator further acknowledged that obtaining all signatures on the NSPs and the timeliness of NSPs was important and that he believed improvement could be made in this area.

As agreed, Turmont 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 any questions, your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

JC:RS:KR
EAH:BB:lr

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
Rhonna Carroll, President, Board of Directors, Turmont Home for Boys and Girls
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

TURMONT GROUP HOME
PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

SITE LOCATIONS

Turmont Home for Boys
741 East Turmont Street
Carson, CA. 90746
License Number: 191600783
Rate Classification Level: 8

Turmont Home for Girls
1519 E. Thomas Drive
Lancaster, CA. 93535
License Number: 197600325
Rate Classification Level: 8

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

CONTRACTUAL COMPLIANCE

Based on our review of six children's files and ten staff files, Turmont was in full compliance with eight of nine sections of our contract compliance review: Licensure/Contract Requirement, Facility and Environment; Educational and Emancipation Services, Recreation and Activities; Children's Health-Related Services, including Psychotropic Medication; Personal Rights, and Children's Clothing and Allowances. The following report details the results of our review:

PROGRAM SERVICES

Based on our review of six children's case files, Turmont fully complied with five of eight elements reviewed in the area of Program Services.

During our review, we found that placed children met the Group Home's population criteria as outlined in its program statement. We found that the treatment team assisted in developing the Needs and Services Plans (NSP).

However, of the 11 initial and updated NSPs reviewed for the six children's case files, one updated NSP was not comprehensive in that not all the required elements were completed in accordance with the NSP template. Of the six children reviewed, two updated NSPs were not developed and maintained. Some NSPs did not include the children's signatures indicating their participation in the development of the NSP nor the DCFS Children's Social Workers' signatures confirming authorization to implement.

Recommendation:

Turmont Group Home management shall ensure that:

1. NSPs are comprehensive and include all required elements.

2. Current NSPs are developed for each child.

3. Documentation is maintained verifying that the DCFS CSW has authorized the implementation of NSPs as well as the child's signature indicating his participation in the development of his NSP.

PRIOR YEAR FOLLOW-UP FROM DCFS' REPORT

Objective

Determine the status of the recommendations reported in the November 2009 monitoring review.

Verification

We verified whether the outstanding recommendations from the November 2009 review issued February 28, 2011 were implemented.

Results

The Out-of-Home Care Management Division's (OHCMD) prior report contained five recommendations. Specifically, Turmont was to develop comprehensive Needs and Services Plans (NSPs); ensure that the Children's Social Worker's (CSWs) signature was obtained authorizing implementation of the NSP, that all children age 16 and older are referred to participate in Youth Development Services; that staff document their efforts to follow up and contact case-carrying CSWs to determine the status of Youth Development Services, and ensure that all staff members receive timely First-Aid training.

Based on our follow up of these recommendations, Turmont fully implemented three of the five November 2009 monitoring review recommendations. These related to referring children and their participation in Youth Development Services; documentation of efforts to follow-up with the case-carrying CSW to determine the status of those services; and assuring that all staff receive timely First-Aid training.

As noted, two of the recommendations were not implemented and corrective action was requested of Turmont to address the findings.

Recommendations:

Turmont Group Home management shall ensure that:

4. It fully implements the two outstanding recommendations from the November 2009 monitoring review dated February 28, 2011, which are noted in that report as recommendation numbers 1 and 2.

TURMONT GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW - SUMMARY

9741 E. Turmont Street
Carson, CA. 90746
License Number: 191600783, 197600325
Rate Classification Level: 8

	Contract Compliance Monitoring Review	**Findings: November 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. 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	**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)
III	**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. Needs Improvement 3. Needs Improvement 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Needs Improvement
IV	**Educational and Emancipation Services** (4 Elements) 1. Emancipation/Vocational Programs Provided 2. ILP Emancipation Planning 3. Current IEPs Maintained 4. Current Report Cards Maintained	 Full Compliance (ALL)

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 Conducted 8. Initial Dental Exams Timely 9. Follow-Up Dental Exams Timely	1. N/A 2. Full Compliance 3. Full Compliance 4. N/A 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance
VII	**Personal Rights** (11 Elements) 1. Children Informed of Group 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 of Clothing Inventory 3. Adequate Quality of Clothing Inventory 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	Full Compliance (ALL)
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 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)

TURMONT HOME FOR BOYS/GIRLS

A HOME FOR CHILD NURTURE, CARE & DEVELOPMENT
COMMITTED TO AN EXCELLENT HOME ENVIRONMENT

February 12, 2011

Barbara Butler, Group Home Manager
DCFS-OHCMD
9320 Telstar Ave 3216
El Monte, CA. 91731

Dear Ms. Butler:

Please consider this as the Corrective Action for the November 2010 Monitoring and Compliance Review.

Deficiency: NSPs were not comprehensive.

Corrective Action: In the future, Victor Bradley will work closely with the Social Worker in order to include all information regarding the NSP template. This will include information concerning the child's education, ILP-YDS-Life Skills Training and medical outcomes and their follow information. The process will be that each NSP will be reviewed and corrections will be made prior to filing it in the child's file/notebook. Victor Bradley, Executive Director and Ora Quaynor, Administrator, will be responsible for this task.

Deficiencies: (1) Not all NSPs were timely (2) The signatures of the case-carrying CSW's were not obtained.

In the future, a calendar will be used and Victor Bradley will note when all NSPs due on this calendar for the current month. The calendar will be reviewed the first of each month. The NSP will be completed by the Group Home Social Worker then provided to Victor Bradley 10 days in advance of the due date so that Mr.Bradley can review it for informational/NSP template deficiencies and return the NSP to the Group Home Social Worker for corrections to be made. There will be a 3 day turnaround from Mr. Bradley to the Group Home Social Worker and back to Mr. Bradley. When the NSP is comprehensively completed and/or corrections made, it will be sent to the CSW so that a signature can be obtained for implementation of the NSP. In this way, the timeliness of NSPs will be improved as will obtaining the CSW's signature. Victor Bradley will be responsible for these two tasks.

Thank you

Victor Bradley

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