County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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June 10, 2011

To: Supervisor Michael D. Antonovich, Mayor
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From: Jackie Contreras, Ph.D.
Acting Director

FIELDS COMPREHENSIVE YOUTH SERVICES 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.

Fields Comprehensive Youth Services is located in San Bernardino County and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to the agency's program statement, its goal is to "provide a safe, nurturing, structured living environment for adolescents in need of a group home placement." Fields Comprehensive Youth Services is licensed to serve a capacity of 12 children, ages 13 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted an initial review of Fields Comprehensive Youth Services in February 2010 at which time the agency had two six-bed sites and seven DCFS placed children. All seven children were males. For the purpose of this review, all placed children were interviewed and their case files reviewed. Their overall average length of placement was 10 months and their average age was 16. Six staff files were reviewed for compliance with Title 22 regulations and contract requirements.

Four 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.

We also conducted a follow-up review in January 2011 to determine the status of our prior findings at which time we reviewed four children's files and two staff files.

SCOPE OF REVIEW

The purpose of this review was to assess Fields Comprehensive Youth Services' compliance with the contract and State regulations. The visit included a review of the agency's program statement, administrative internal policies and procedures, seven children's case files, and a random sampling of personnel files. A visit was made to both facilities 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, Fields Comprehensive Youth Services was providing services as outlined in its program statement. The children interviewed stated they were satisfied with 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) and document Special Incident Reports (SIR) appropriately. One child's court-approved authorization did not coincide with the medication log and another child did not have a current court authorization on file. During our initial review, we also noted some deficiencies related to an insufficient quantity of clothing for two children and that report cards were not maintained for three children.

Fields Comprehensive Youth Services was receptive to implementing some systemic changes to improve compliance with regulations and the Foster Care Agreement and we noted marked improvement during the follow-up review. The Executive Director and Facility Manager stated they understood the findings and would develop a plan to correct the deficiencies.

NOTABLE FINDINGS

The following are the notable findings of our review:

- Of the 21 initial and updated NSPs reviewed, 20 were not comprehensive in that they did not complete all the required elements in accordance with the NSP template.

  During the follow-up review, nine of 10 NSPs reviewed were not comprehensive. More details were needed on Group Home contacts with the CSWs and on visits with relatives. There was no admission date noted on one NSP, and the child's signature was not found on one NSP.

- SIRs were not submitted via I-Track and not forwarded to OHCMD. The Monitor immediately brought this to the attention of the Facility Manager and requested SIRs be submitted via I-Track immediately. Prior to the review of the Group Home, SIRs were handwritten.

  During the follow-up review, one SIR was not sent to OHCMD, but was forwarded to the CSW.

- One of the four children prescribed psychotropic medication stated they were not aware of their right to refuse psychotropic medication. One child's court approved authorization did not coincide with the medication log. Per the Facility Manager, the child's medication was changed and the Group Home had not received the revised court approved authorization. After the exit conference, the court-approved authorization was re-submitted, approved and a copy was provided to the monitor.

  During the follow-up review, the children were aware of their right to refuse psychotropic medication, and the court-approved authorizations coincided with the medication log except for one child. No current court-approved authorization was found for this child, but documentation of the agency's efforts to obtain the court authorization was found in the child's file.

- Two of the seven children stated they did not have an adequate inventory of clothing. The Group Home Monitor conducted an inventory of the children's clothing and observed there was an inadequate quantity of clothing for the two children based on the DCFS 2282 Clothing Standard. The Monitor informed the Executive Director and Facility Manager and provided copies of the DCFS 2282 Clothing Standard.

  During the follow-up review, all four children's ongoing clothing inventories were of adequate quantity in accordance with the DCFS 2282 Clothing Standard.

- One of the seven children did not have a timely initial medical examination. Fields Comprehensive Youth Services provided a Corrective Action Plan (CAP) to address this finding.

  During the follow-up review, initial medical exams were timely for the children whose files were reviewed.

- Four of the seven children stated they were not encouraged to have life books/photo albums. The Group Home Monitor did not observe life books/photo albums for any of the seven children.

  During the follow-up review, all four children whose files were reviewed stated that they were encouraged to create and update life books/photo albums.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the exit conferences held July 6, 2010 for the initial review and February 10, 2011 for the follow-up review:

In attendance:

In attendance for the initial review exit conference: Arby Fields, Executive Director, Towana Bryant, Facility Manager, and Tina Blackshear, Administrator, Fields Comprehensive Youth Services; and LaDonna Jones, Monitor, DCFS OHCMD.

In attendance for the follow-up exit conference were Towana Bryant, Facility Manager, Fields Comprehensive Youth Services, and Kirk Barrow, Monitor, DCFS OHCMD.

Highlights:

The Executive Director was in agreement with our findings and recommendations. He was open to suggestions.

The Facility Manager stated she would ensure children received initial medical and dental examinations within 30 days of placement in the agency. Prior to the exit conference, the Facility Manager had begun to submit SIRs via I-Track timely and forward copies to OHCMD.

During the exit conference, the Executive Director instructed staff to purchase life books/photo albums and to encourage the children to utilize them. The Group Home Monitor reviewed the DCFS 2282 Clothing Standard with the Executive Director and Facility Manager at which time they stated they would follow the clothing standard, inventory children's clothing and meet the standard.

The Executive Director was informed that most NSPs were not comprehensive. He stated he would discuss this with the Clinician. After the exit conference, the Clinician contacted the Group Home Monitor regarding NSPs. She was receptive to additional NSP training to generate comprehensive and timely NSPs. In addition, the Clinician provided the Monitor with a newly implemented training manual.

Fields Comprehensive Youth Services was provided a draft copy of the report; however, the Executive Director stated they had no further responses to provide. As agreed, Fields Comprehensive Youth Services provided a timely 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 Aldo Marin, Board Relations Manager, at (213) 351-5530.

JC:RS:KR
EAH:DC:lj

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
Arby Fields, Executive Director, Fields Comprehensive Youth Services
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

FIELDS COMPREHENSIVE YOUTH SERVICES
CONTRACT COMPLIANCE MONITORING REVIEW - SUMMARY

SITE LOCATIONS

7062 Napa Ave.
Alta Loma, CA 91701
License Number: 366402086
Rate Classification Level: 10

1214 Eddington Ave.
Upland, CA 91786
License Number: 366407025
Rate Classification Level: 10

	Contract Compliance Monitoring Review	**Findings: February 2010**
I	**Licensure/Contract Requirements** (9 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Stabilization to Prevent Removal of Child	2. Full Compliance
	3. Transportation	3. Full Compliance
	4. SIRs	4. Improvement Needed
	5. Compliance with Licensed Capacity	5. Full Compliance
	6. Disaster Drills Conducted	6. Full Compliance
	7. Disaster Drill Logs Maintenance	7. Full Compliance
	8. Runaway Procedures	8. Full Compliance
	9. Allowance Logs	9. Full Compliance
II	**Facility And Environment** (6 Elements)	
	1. Exterior Well Maintained	1. Full Compliance
	2. Common Areas Maintained	2. Full Compliance
	3. Children's Bedrooms / Interior Maintained	3. Full Compliance
	4. Sufficient Recreational Equipment	4. Improvement Needed
	5. Sufficient Educational Resources	5. Full Compliance
	6. Adequate Perishable and Non Perishable Food	6. Full Compliance
III	**Program Services** (8 Elements)	
	1. Child Population Consistent with Program Statement	1. Full Compliance
	2. DCFS CSW Authorization to Implement NSPs	2. Improvement Needed
	3. Children's Participation in the Development of NSPs	3. Full Compliance
	4. NSPs Implemented and Discussed with Staff	4. Full Compliance
	5. Therapeutic Services Received	5. Full Compliance
	6. Recommended Assessments/Evaluations Implemented	6. Full Compliance
	7. DCFS CSWs Monthly Contacts Documented	7. Full Compliance
	8. Comprehensive NSPs	8. Improvement Needed
IV	**Educational and Emancipation Services** (4 Elements)	
	1. Emancipation/Vocational Programs Provided	1. Full Compliance
	2. ILP Emancipation Planning	2. Improvement Needed
	3. Current IEPs Maintained	3. Improvement Needed
	4. Current Report Cards Maintained	4. Improvement Needed

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	 1. Improvement Needed 2. Improvement Needed 3. Improvement Needed
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	 1. Improvement Needed 2. Improvement Needed 3. Improvement Needed 4. Improvement Needed 5. Improvement Needed 6. Full Compliance 7. Improvement Needed 8. Improvement Needed 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	 1. Full Compliance 2. Full Compliance 3. Improvement Needed 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Improvement Needed 8. Full Compliance 9. Improvement Needed 10. Full Compliance 11. Improvement Needed
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	 1. Full Compliance 2. Improvement Needed 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 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)

FIELDS COMPREHENSIVE YOUTH SERVICES PROGRAM
CONTRACT COMPLIANCE MONITORING REVIEW

SITE LOCATION

7062 Napa Ave.
Alta Loma, CA 91701
License Number: 366402086
Rate Classification Level: 10

1214 Eddington Ave.
Upland, CA 91786
License Number: 366407025
Rate Classification Level: 10

The following report is based on a "point in time" monitoring visit and addresses findings noted during the February 2010 monitoring review and January 2011 follow-up monitoring review.

CONTRACTUAL COMPLIANCE

Based on our initial review of seven children's files and six staff files, and/or documentation from the provider, Fields Comprehensive Youth Services was in full compliance with one of nine sections of our contract compliance review: Personnel Records. The following report details the results of our review:

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of seven children's case files and/or documentation from the provider, Fields Comprehensive Youth Services fully complied with eight of nine elements reviewed in the area of Licensure/Contract Requirements.

The Group Home was in compliance with licensed capacity, conducted disaster drills and maintained completed disaster drill logs. The Group Home notified DCFS within 24 hours of a child's relocation to another site. In addition, appropriate and comprehensive allowance logs were maintained.

The Group Home maintained runaway procedures in accordance with the contract. However, during our review, we noted that Special Incident Reports (SIR) did not contain important information and were not cross-reported to all required parties. The Facility Manager stated that Fields Comprehensive Youth Services would immediately begin appropriately submitting SIRs via I-Track.

Recommendation:

Fields Comprehensive Youth Services management shall ensure that:

1. SIRs are appropriately documented and cross-reported to all required parties via I-Track, in a timely manner.

During the follow-up review, one SIR was not sent to the OHCMD but was forwarded to the CSW.

FACILITY AND ENVIRONMENT

Based on our review of seven children's case files and/or documentation from the provider, Fields Comprehensive Youth Services fully complied with five of six elements in the area of Facility and Environment.

Generally, the exterior of the Group Home was well maintained. The front and back yards were clean and adequately landscaped. The interior of the home was clean and well maintained. The children's bedrooms were well maintained and fully furnished with clean linen, adequate lighting, and sufficient window coverings and storage space. The Group Home maintained an adequate supply of perishable and non-perishable foods and had an appropriate supply of reading materials and supplies. Computers were readily available to children.

However, the Group Home did not maintain sufficient age-appropriate recreational equipment in good condition. During the review, the Monitor did not observe sufficient recreational equipment at either site. The two sites had rusted weights with torn benches located in the backyards. One bike was observed at the Napa site but it had a flat tire and was inoperable.

Recommendation:

Fields Comprehensive Youth Services management shall ensure that:

2. Sufficient age-appropriate recreational equipment is maintained in good condition.

During our follow-up review, Fields Comprehensive was maintaining sufficient age-appropriate recreational equipment in good condition at both sites.

PROGRAM SERVICES

Based on our review of seven children's case files and/or documentation from the provider, Fields Comprehensive Youth Services fully complied with six of eight elements reviewed in the area of Program Services.

We noted that 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.

Age-appropriate children participated in the development of the Needs and Services Plans (NSP). In addition, reviewed NSPs were discussed with the Group Home staff. One initial and one updated NSP had no documentation of specific information regarding visits such as dates of the visits, quality of the visits and transportation arrangements. The 17 initial and updated NSPs reviewed were vague, did not have measurable progress documented, and did not complete all the required elements in accordance with the NSP template. Further, the Group Home did not obtain the CSW's authorization to implement one NSP. The Group Home was receptive to additional NSP training to generate comprehensive and timely NSPs. In addition, the Clinician provided the Monitor with a newly implemented training manual.

Recommendations:

Fields Comprehensive Youth Services management shall ensure that:

3. CSW authorization is obtained to implement NSPs.

4. NSPs are comprehensive, including all required elements in accordance with the NSP template.

During the follow-up review, Fields Comprehensive had received the CSWs' authorization to implement NSPs. However, nine of 10 NSPs reviewed were not comprehensive. More details were needed on Group Home contacts with the CSWs and visits with relatives; no admission date was found in one NSP; and the signature for one child was not found in one NSP.

EDUCATIONAL AND EMANCIPATION SERVICES

Based on our review of seven children's case files and/or documentation from the provider, Fields Comprehensive Youth Services did not fully comply with any of the four elements reviewed in the area of Educational and Emancipation Services.

Five of the seven children were provided opportunities to participate in Youth Development Services. However, there was no documentation of one child participating in Independent Living Programs or Youth Development Services Planning. Two children were under the age of 16 and were not required to participate in youth development services. Individualized Educational Plans (IEP) were maintained for four children. One child did not have an IEP maintained in his file and two children did not require an IEP. Copies of report cards or progress reports were maintained for four of the seven children. The agency provided a Corrective Action Plan (CAP) to address this finding.

Recommendations:

Fields Comprehensive Youth Services management shall ensure that:

5. Independent Living Programs and Youth Development Services Planning are provided and children attend in accordance with the developmental expectations of the child.

6. Current IEPs are maintained, if applicable.

7. Current copies of report cards or progress reports are maintained for all school age children.

During the follow-up review, all three age-appropriate children were provided Independent Living services in accordance with their developmental expectations. Current report cards or progress reports were maintained for all school age children. However, one child did not have a current IEP.

RECREATION AND ACTIVITIES

Based on our review of seven children's case files and/or documentation from the provider, Fields Comprehensive Youth Services did not fully comply with any of the four elements reviewed in the area of Recreation and Activities.

Two of the seven children interviewed stated they were not given the opportunity to plan activities. One child stated he did not participate in activities at home, in the community or school and the Group Home did not allow him to participate in activities of his choice. When this finding was presented during the exit conference, the staff provided no comment.

Recommendations:

Fields Comprehensive Youth Services management shall ensure that:

8. All children are given opportunities to participate in planning activities.

9. Children participate in activities at home, in the community or at school.

10. Children are given opportunities to participate in age-appropriate extra-curricular, enrichment and social activities in which they have an interest.

During the follow-up review, the two children interviewed disclosed that they were given opportunities to participate in planning activities; participate in activities at the group home, in the community or at the school; and to participate in age-appropriate extra-curricular, enrichment and social activities in which they had an interest.

CHILDREN'S HEALTH-RELATED SERVICES, INCLUDING PSYCHOTROPIC MEDICATION

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

Four of seven children placed at Fields Comprehensive Youth Services were prescribed and administered psychotropic medication. Of those four children, one did not have a current court approved authorization or current psychiatric evaluation on file. The Monitor returned to the Group Home to review a current court authorization, however, the child had been discharged and the Group Home was not in receipt of a current court authorization. Medication logs were properly maintained for three children. One child's court-approved authorization did not coincide with the medication log. Per the Facility Manager, the child's medication was changed and the Group Home had not received the revised court approved authorization. The Monitor informed the Facility Manager that she must immediately make efforts to obtain the revised court approved authorization. The Facility Manager provided this information to the child's psychiatrist, and the court-approved authorization was re-submitted, approved and a copy provided to the monitor.

Five of seven children had timely initial medical and dental examinations. There was no documentation that one child completed initial medical or dental examinations. Per the Group

Home Facility Manager, one child was not eligible due to having medical and dental examinations prior to placement in the Group Home, however, there was no documentation to support the Group Home's claim.

Five children had timely follow-up medical and dental examinations. Two children were placed in the Group Home less than six months and no follow-up examinations were required at the time the review was conducted.

Recommendations:

Fields Comprehensive Youth Services management shall ensure that:

11. Current court approved psychotropic medication authorizations are maintained.

12. Medications logs are properly maintained.

13. There is a current psychiatric evaluation/review for each child administered psychotropic medication.

14. Children receive initial medical and dental examinations within 30 days of placement.

During the follow-up review, the court-approved authorization coincided with the medication log except for one child. No current court-approved authorization was found for this child, but documentation of the agency's efforts to obtain the court authorization was found in the child's file. Also, during the follow-up review, initial medical and dental exams were timely for the children whose files were reviewed.

PERSONAL RIGHTS

Based on our review of seven children's case files and/or documentation from the provider, Fields Comprehensive Youth Services fully complied with six of 11 elements in the area of Personal Rights.

Overall, children reported they were informed of the Group Home's policies and procedures. All seven children reported feeling safe in the Group Home and that there was an appropriate rewards and discipline system in place. Six children reported satisfaction with the meals and snacks provided to them daily. However, one child was not satisfied with the meals. He stated, at times, the food did not taste good.

Six children stated staff treated them with respect and they were appropriately supervised. However, one child reported staff was dishonest and sometimes lied about his behavior. Also of the seven children, one child stated he did not have privacy during telephone calls. The children stated they were free to attend religious services and activities of their choice. Two children reported their chores were hard. When questioned about this, one child expressed that the chores were hard because he did not want to do any chores; the other child made no comment. The Group Home administration provided no comment regarding these findings.

All seven children interviewed were aware that they were free to receive or reject voluntary medical, dental and psychiatric care. The four children who were prescribed psychotropic medication stated they were informed about their psychotropic medications. However, one child stated he was not aware of the right to refuse psychotropic medication.

Recommendations:

Fields Comprehensive Youth Services management shall ensure that:

15. Children are provided satisfactory meals and snacks.

16. Staff treat children with respect and dignity.

17. Children are allowed to make and receive private telephone calls.

18. Children's chores are reasonable.

19. Children are aware of their right to refuse psychotropic medication.

During the follow-up review, the two children interviewed stated that they were provided with satisfactory meals and snacks, staff treated them with respect and dignity, they were allowed to make and receive private telephone calls, chores were reasonable, and they were aware of their right to refuse psychotropic medication.

CLOTHING AND ALLOWANCE

Based on our review of seven children's case files and/or documentation from the provider, Fields Comprehensive Youth Services fully complied with six of eight elements reviewed in the area of Clothing and Allowance.

All seven children stated that they were involved in the selection of their clothing, they were provided the minimum clothing allowance and their clothing inventories were of adequate quality. However, two children had an inadequate quantity of clothing. The Monitor immediately brought this to the attention of the Executive Director and Facility Manager and provided them with copies of the clothing inventories and DCFS 2282, Clothing Standard.

All seven children stated they were provided with adequate personal care items. Children stated they were always provided with the minimum monetary allowance and they were free to manage their allowances. However, four children stated they were not encouraged or assisted in creating and updating a life book/photo album. The monitor did not observe life books/photo albums for any of the children and brought this to the attention of the Executive Director and Facility Manager during the exit conference. The Executive Director stated they would ensure children are encouraged and assisted with creating life books/photo albums.

Recommendations:

Fields Comprehensive Youth Services management shall ensure that:

20. Children have ongoing clothing inventories of adequate quantity.

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

During the follow-up review, it was determined that the children were provided with an ongoing adequate quantity of clothing and were encouraged and assisted in creating and updating life books/photo albums.

PRIOR YEAR FOLLOW-UP FROM THE AUDITOR-CONTROLLER'S (A-C) REPORT

Objective

Determine the status of the recommendations reported in the A-C's prior monitoring review.

Verification

We verified whether the outstanding recommendations from the July 17, 2009 A-C's report were implemented.

Results

The A-C's prior monitoring report contained nine outstanding recommendations. Fields Comprehensive Youth Services was to replace the damaged window blinds in the hallway, re-caulk the area surrounding the bathtubs, develop comprehensive NSPs, maintain current court authorization for all children taking psychotropic medications, encourage and assist minors in creating and maintaining photo albums/life books, replace the burned backsplash on the kitchen stove, repair or replace the ripped carpet in three bedrooms, paint the walls in three bedrooms and replace the damaged blinds in three bedrooms. Based on our follow-up of these recommendations, Fields Comprehensive fully implemented the A-C's recommendations to replace the damaged window blinds in the hallway, re-caulk the area surrounding the bathtubs, replace the burned backsplash on the kitchen stove, repair or replace the ripped carpet in three bedrooms, paint the walls in three bedrooms and replace the damaged blinds in three bedrooms. The A-C's recommendations to develop comprehensive NSPs, maintain current court authorization for all children taking psychotropic medications, and encourage and assist minors in creating and maintaining photo albums/life books in accordance with Title 22 regulations were not fully implemented. Corrective action was requested of Fields Comprehensive Youth Services to further address these findings.

Recommendation:

Fields Comprehensive Youth Services management shall ensure that:

22. It fully implements the three outstanding recommendations from the A-C's monitoring report dated July 17, 2009, that the Group Home develop comprehensive NSPs, maintain current court authorizations for all children taking psychotropic medications and

encourage and assist minors in creating and maintaining photo albums/life books in accordance with Title 22 regulations which are noted in this report as Recommendations 6, 15 and 21.

During the follow-up review, it was determined that Fields Comprehensive Youth Services maintained current court authorization for all children taking psychotropic medications except for one, however documentation was provided that the Group Home submitted the request. In addition, the agency encouraged and assisted minors in creating and maintaining photo albums/life books in accordance with Title 22 regulations. However, it was determined that nine of 10 NSPs reviewed were not comprehensive.

Fields Comprehensive Youth Services, Inc
Corrective Action Plans for Contract Compliance
County of Los Angeles Department of Children and Family Services
Out of Home Care Management Division

October 1, 2010

I. **Licensure/Contract Requirements**

#4 Future plan to ensure Special Incident Reports (SIR's) appropriately documented and cross-reported:

Corrective Action Plan:

In addition to the reporting requirements in Title II, Division 6 Chapter1, Section 80061, and Chapter 5, Section 84061, all reportable incidents are currently being submitted via the I-track web-based system to Probation, DCFS and all other required parties. All employees will receive additional training on the LA County DCFS and Probation Special Incident Reporting Guideline for Group Homes procedures specifying type of reportable incidents, how, to whom, and when incidents are to be reported and cross reporting via the I-track web based system. They will know and understand the use of faxing when the I-track system is down and also to resubmit on the I-track as soon as system comes back up.

- Plan to prevent reoccurrence: The Facility Manager will ensure all reportable incidents are properly and timely submitted to Probation, DCFS via I-track web-based system according to the LA County SIR Guideline for group homes including cross reporting to the proper officials/authority
- Person responsible for implementing corrective action: Executive Director, Army E. Fields
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

II. **Facility and Environment**

#13 Future plan to maintain sufficient recreational equipment in good condition and age appropriate

Corrective Action Plan:

New recreational equipment including but not limited to weight machines, badminton set, balls, sporting equipment etc. will be purchased over the next 30 days.
The equipment will be properly covered if necessary to prevent rust and damage to the equipment. A check in and out form will be created to ensure accountability and longevity of the recreational equipment.

- Facility Manager will ensure all recreational equipment will be properly utilized and maintained properly
- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

III. **Program Services**

#17 Future plan to obtain the DCFS CSW's authorization to implement the Needs and Services Plan Also included future plan to develop comprehensive NSPs

Corrective Action Plan:

(a) At intake and regular communication written & verbal, the Facility Manager's will ensure that DCFS CSW's and/or Probation Officer are actively included in the process and implementation of all NSP's

(b) The Executive Director (Arby E. Fields), Supervisor (Towana Bryant) met with Group Home Support Service's, Sharon Heaston met to review the current Needs and Service Plans and their lack of

comprehensive details regarding health and education, visitations, types of services needed, family involvement why/why not, current progress, ILP, adjustments, behavior management and interventions.

(c) Group Home Support Services (Sharon Heaston's offices) now has a Clinical Director, Amber Martinez and the same information was submitted to her to ensure everyone has a solid understanding of expectations regarding the Needs and Service Plans.

(d) Treatment team including current staff members met to discuss the importance of documenting appropriately reviewed Needs & Service Planning and vital information that must be detailed in the NSP's.

(e) County workers were addressed individually on the need to ensure we are all on the same page with the NSPs and providing information to all necessary parties accurately and timely to ensure the best treatment possible for the minor's placed.

(f) A new informational packet was created for the facility manager's and therapist to complete to ensure all vital information is getting implemented into the NSP's. Also samples of NSP's standard provided by GHM-LaDonna Jones given to Sharon Heaston and therapist as a guide on what is expected when completing NSPs. The aforementioned steps were taken to ensure the NSP's are accurate, detailed, comprehensive, and timely.

All above parties were involved in this process to ensure everyone had a firm understanding and they will be held accountable.

- The process will be monitored closely by the Facility Manager who will report directly to the Executive Director.
- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

IV. <u>Educational and Emancipation Services</u>

Future plan to ensure the following:

#23 Provide minors with opportunities to participate in emancipation and vocational training programs

Corrective Action Plan:

New forms (Graduation Plan and ILP-Vocation/Emancipation Check List) were developed to ensure at placement all minors are afforded the opportunity to learn basic living skills and have a firm foundation to begin their program.

At placement all minor's will complete a tentative graduation plan to address behavioral expectations, life skills program, therapy program, family involvement, saving program, school program, employment program (if applicable) and reparation (if any).

For minor's 15 years or older at placement and/or when they turn 15 yrs of age they will complete the ILP-Vocation/Emancipation Check List to begin addressing all aspects of ILP-Vocation and/or Emancipation needs including but not limited to: vocational trainings, work experience, obtaining documents, housing, educational needs, self sufficiency, County ILP programs, employment-job training. Eligible minors will be enrolled in County ILP programs and various work shops and will be transported to and from (if needed) All pertinent documentation of participation, progress and completion will be appropriately documented in minor's individual file.

- The Facility Manager will ensure at initial placement all minors complete graduation plan to set the foundation of the program. Facility Manager will also ensure the ILP Vocation initiated immediately for eligible individual minors and follow up completed and regularly documented.

- Person responsible for implementing corrective action: Executive Director.

- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

#24 Ensure Independent Living Programs and Emancipation Planning is provided and attended in accordance with the developmental expectations of the child

Corrective Action Plan:

New forms (Graduation Plan and ILP-Vocation/Emancipation Check List) were developed to ensure at placement all minors are afforded the opportunity to learn basic living skills and have a firm foundation to begin their program.

At placement all minor's will complete a tentative graduation plan to address behavioral expectations, life skills program, therapy program, family involvement, saving program, school program, employment program (if applicable) and reparation (if any).

For minor's 15 years or older, at placement and/or when they turn 15 yrs of age they will complete the ILP-Vocation/Emancipation Check List to begin addressing all aspects of ILP-Vocation and/or Emancipation needs including but not limited to: vocational trainings, work experience, obtaining documents, housing, educational needs, self sufficiency, County ILP programs, employment-job training. Eligible minors will be enrolled in County ILP programs and various work shops and will be transported to and from (if needed) All pertinent documentation of participation, progress and completion will be appropriately documented in minor's individual file.

- The Facility Manager will ensure at initial placement all minors complete graduation plan to set the foundation of the program. Facility Manager will also ensure the ILP Vocation initiated immediately for eligible individual minors and follow up completed and regularly documented.

- Person responsible for implementing corrective action: Executive Director, Arby E. Fields

- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

#25 Ensure current IEPs are maintained

Corrective Action Plan:

At initial placement the placed minor's educational needs will be addressed immediately. The Facility Manager or a designated staff thoroughly familiar with their educational needs will monitor school progress, homework, and tutoring. Such designated person will attend parent meetings, IEP meetings, open houses, etc. The Facility Manager will work with school personnel to monitor educational progress, development, behaviors and achievement; encourage minor to participate in school activities and ensure proper transportation is provided to and from said activities. **Current IEP's**, updates, goal setting, behavior plans and any school progress and updates will be placed in the minor's individual file and copies sent to their County Workers and attached to their Quarterly Reports if requested by the courts or County Worker.

- Person responsible for implementing corrective action: Executive Director, Arby E. Fields

- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

#26 Ensure current copies of minor's report cards and progress reports are maintained

Corrective Action Plan

The Facility Manager will work with school personnel to monitor educational progress, development, behaviors and achievement; encourage minor to participate in school activities and

ensure proper transportation is provided to and from said activities. The Facility Manager will also obtain regular progress report updates and obtain and maintain **report cards** which will be placed in the minor's individual file and copies sent to their County Workers and attached to their Quarterly Reports if requested by the courts or County Worker.

- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager and/or Administrative Assistant

V. **Recreation and Activities**

Future plan to ensure the following:

#27 Ensure minor's are given opportunities to participate in planning activities

Corrective Action Plan:

Recreation schedules are to be completed quarterly by the Facility Manager, approved by Executive Director and posted monthly. To ensure minor's are given opportunities to participate in planning of recreational activities, there will be a suggestion box they can utilize regarding activities and we hold groups regularly; they will be allowed to give input and ideas on the different activities the like to participate in. Their suggestions and ideas will be implemented into the schedule within reason.

- The Facility Manager will be responsible for ensuring minors are given opportunities to participate in planning activities and their suggestions and ideas are implemented.
- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

#28 Ensure minor's participate in activities, which include at home, in the community or school

Corrective Action Plan:

The Facility Manager along with treatment team will actively explore individual minor's interest to implement their participation in activities, at the facility, in the community and/or at school. Minor's will be encouraged to participate in a sport, martial arts, musical instruments, different cultural activities, school activities i.e. clubs, athletics' and other school functions. Assigned staff will ensure proper transportation is provided to and from said activities.

- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager and/or Administrative Assistant

#29 Ensure minor's are given the opportunities to participate in age-appropriate extra-curricular, enrichment and social activities in which they have an interest

Corrective Action Plan:

The Facility Manager along with the treatment team will identify minor's individual interest and provide opportunities for them to enroll and/or participate in age-appropriate extra-curricular activities and social activities. Once the minor is actively involved, a primary staff member will be assigned to oversee the minor's progress, identify areas to keep minor motivated to continue and be a support system for the minor

- Person responsible for implementing corrective action: Executive Director

- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager and/or Administrative Assistant

VI. **Children's Health Related Services, Including Psychotropic Medication**

Future plan to ensure the following:

#30 Ensure there are current court-approved authorizations for the administration of psychotropic medication

Corrective Action Plan:

At initial intake the Facility Manger will ensure all minor's entering the placement on psychotropic medication obtain the proper court-approved authorization for the administration of the medication. The Facility Manger will also maintain a list and place on the calendar/schedule when the current court-approved authorization expires. 30 days before the expiration of current court authorization

Facility Manager will communicate with the psychiatrist to ensure the proper information is submitted timely to make certain the updated court authorization is received timely and placed in the minor's individual file.

- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager and/or Administrative Assistant

#31 Ensure there are current psychiatric evaluation/review for each child on psychotropic medication

Corrective Action Plan:

All minor's on psychotropic medications will receive monthly psychiatric evaluation/medication reviews.

- The Facility Manager will be responsible for ensuring minors receive monthly psychiatric evaluation/medication review.
- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

#32 Ensure medication logs are properly maintained

Corrective Action Plan:

A Staff member has been assigned to Medication Primary and it is their responsibility to ensure ample supplies of medication forms are available; the first aid kit in the van and in the facility are well stocked; accurate medication counts on each client; medication sheets are current and completed properly; oral medication, PRNS and external medications are stored separately; all medication properly labeled; all emptied and discontinued medication and/or containers, envelopes removed and given to facility manager; medication declarations (court order) current for psychotropic medication; medication cabinets & containers clean and locked.

It is also the medication primary's responsibility to bring any discrepancies to the facility manager's attention; it is the facility manager's responsibility to provide a corrective action plan and make all necessary adjustments to ensure we remain in compliance with regards to medication.

- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager

#33 Ensure initial medical examinations are conducted

Corrective Action Plan:

The Facility Manager will ensure initial medical examination including physical and TB screening completed within the minor's first 30 days of placement and documented on appropriate forms and continued follow up if needed. If Medi-cal issues CHDP will be utilize to ensure timely.

- Person responsible for implementing corrective action: Executive Director, Arby E. Fields
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager and Administrative Assistant

#34 Ensure initial medical examinations are timely

Corrective Action Plan:

The Facility Manager will ensure initial medical including physical and TB screening completed within the minor's first 30 days of placement and documented on appropriate forms and continued follow up if needed. If Medi-cal issues CHDP will be utilize to ensure timely.

- Person responsible for implementing corrective action: Executive Director, Arby E. Fields
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager and Administrative Assistant

#36 Ensure initial dental examinations are conducted

Corrective Action Plan:

The Facility Manager will ensure initial dental examinations are completed within the minor's first 30 days of placement and documented on appropriate forms and continued follow up if needed. If Medi-cal issues CHDP will be utilize to ensure timely.

- Person responsible for implementing corrective action: Executive Director.
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager and Administrative Assistant

#37 Ensure initial dental examinations are timely

Corrective Action Plan:

The Facility Manager will ensure initial dental examinations are completed within the minor's first 30 days of placement and documented on appropriate forms and continued follow up if needed. If Medi-cal issues CHDP will be utilize to ensure timely.

- Person responsible for implementing corrective action: Executive Director, Arby E. Fields
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager and Administrative Assistant

VII. Personal Rights

Future plan to ensure the following:

#41 One child reports he was not satisfied with meals and snacks

Corrective Action Plan:

We currently utilize state menu program to ensure we are meeting all the nutritional guidelines. At times the menu may become repetitive, but adjustments are made when this occurs.

Staff will continue to encourage minor's in group to participate in menu and meal preparations. Also part of in-house life skills minor's are often educated on proper meal preparations and nutritional content to ensure they understand the four basic food groups and different food contents. Minor's are not deprived of sweets and "junk foods" it's just done in moderation.

Minor's are and will continue to be encouraged to assist with menu preparations and have viable input on meals and snacks within reason and nutritional limitations. Minor's have suggestion box to submit any particular meal or snack request. Menus do consist of a variety of cultural foods to ensure fairness.

- Facility Manager will continue to ensure menus and meals are appropriate and will ensure minor's menu items and/or request is implemented within reason.
- Staff will continue to encourage minor's to participate in menu and meal preparations.
- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

#42 Ensure minor's are treated with respect and dignity

Corrective Action Plan:

At intake minor and their County Worker participate in an orientation process which includes reviewing personal rights, program rules, policies and procedures. Both minor and County Worker sign and date that they have reviewed and understand their rights. Also Foster Youth Rights are posted in each facility detailing their rights to be treated with dignity and respect.

Also note that employees are also required to participate in a new employee orientation which includes the same procedures and they must also sign that they are aware of minor's personal rights and must sign for accountability.

The Facility Manager will be responsible for ensuring minors are aware of their right to be treated with dignity and respect. They will also ensure all minors are treated with dignity and respect and that staff are properly trained. Training will be on-going to ensure staff understand the environment and given appropriate strategies to cope, guide, encourage and maintain positive relationships with minors

- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

#45 Ensure minor's are allowed to make and receive telephone calls

Corrective Action Plan:

At intake minor and their County Worker participate in an orientation process which includes reviewing personal rights, program rules, policies and procedures. Both minor and County Worker sign and date that they have reviewed and understand their rights. Also Foster Youth Rights are posted in each facility detailing regarding their rights makes and receives telephone calls.

Also note that employees are also required to participate in a new employee orientation which includes the same procedures and they must also sign that they are aware of minor's rights to make and receive telephone calls and must sign for accountability.

- The Facility Manager will be responsible for ensuring minor's rights to make and receive telephone calls are being adhered to.

- Person responsible for implementing corrective action: Executive Director

- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

#47 Ensure chores are reasonable

Corrective Action Plan:

Chores are utilized in the program as a preparation of basic life skills. They are divided among six minor's and rotated on a weekly basis. Minor's are never forced to complete chores and staff are there to assist and provide direction if necessary. If minor refuses chore, staff must complete the chore and minor will not be disciplined but misses the opportunity to receive extra money above their regular allowance.

- The Facility Manager will be responsible for ensuring chores remain simple and but utilized as basic life skills.

- Person responsible for implementing corrective action: Executive Director

- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

#49 Ensure minor's are aware if their right to refuse psychotropic medication

Corrective Action Plan:

At intake minor and their County Worker participate in an orientation process which includes reviewing personal rights, which include their right to refuse medications, program rules, policies and procedures. Both minor and County Worker sign and date that they have reviewed and understand their rights. Also Foster Youth Rights are posted in each facility in detail regarding their rights to refuse medications, which include psychotropic medication.

Also note that employees are also required to participate in a new employee orientation which includes the same procedures and they must also sign that they are aware of minor's rights to refuse psychotropic medications

- Facility Manger will ensure all minors educated on the medication and their right to refuse medication, but also follow proper reporting protocol when minor refuses.

- Person responsible for implementing corrective action: Executive Director

- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager and/or Administrative Assistant

VIII. <u>Clothing and Allowance</u>

Future plan to ensure the following:

#51 Ensure minor's on-going clothing inventories are of adequate quantity

Corrective Action Plan:

In order to assure Fields Comprehensive maintains the same clothing standard as required by the Los Angeles County DCFS; we revised our current monthly clothing inventory form to duplicate the DCFS

2281 Clothing Standard. Staff will assist minors and physically observe minor utilize the inventory form to complete clothing inventories accurately.
Minors will receive bi-monthly clothing orders to maintain the required clothing standards. A bi-monthly clothing inventory will be completed before clothing shopping and minor's will have to ensure they have all required clothing according to LA DCFS 2281 standards. Anytime a minor outgrows and/or damages clothing it will documented on the inventory form and minor will be required to replace the clothing if needed to maintain the clothing standard.

- *The Facility Manager will be responsible for ensuring minors obtain and maintain adequate clothing inventory as set by DCFS 2281 Clothing Standards.*
- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Managers

#57 Ensure minor's are encouraged and assisted in creating and updating a life book/photo album
Corrective Action Plan:

Photo albums/life books were purchased and distributed to minors. These books will serve as on-going life books, which they can utilize for maintaining memories and special occasions during their treatment with us. Staff will assist minors in creating and maintaining photo albums/life books.

- Facility Mangers will ensure all minors receive photo albums/life books and assigning staff to assist minors in maintaining them.
- Person responsible for implementing corrective action: Executive Director
- Person responsible for monitoring to ensure corrective action remains implemented: Facility Manager and/or Administrative Assistant

If you have any questions regarding the above CAP for contract compliance please feel free to contact me at 909 376-4148

Sincerely,

Arby E. Fields
Executive Director