COUNTY OF LOS ANGELES
PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY – DOWNEY, CALIFORNIA 90242
(562) 940-2501

JERRY E. POWERS
Chief Probation Officer

May 24, 2012

Board of Supervisors
GLORIA MOLINA
First District
MARK RIDLEY-THOMAS
Second District
ZEV YAROSLAVSKY
Chairman - Third District
DON KNABE
Fourth District
MICHAEL D. ANTONOVICH
Fifth District

TO: Each Supervisor

FROM: Jerry E. Powers
Chief Probation Officer

SUBJECT: **GUIDING LIGHT HOME FOR BOYS SITE I & II COMPLIANCE MONITORING REVIEW**

We have completed a review of Guiding Light Home for Boys, Sites I & II, operated by Guiding Light Home For Boys, Inc., a Contractor with the County of Los Angeles.

Guiding Light Home for Boys consists of two (2) six (6) bed homes, which provide care for boys' ages 14-17 years who exhibit behavioral, psychological, and emotional difficulties. Guiding Light Home for Boys provides services to Probation youth or youth dually supervised by both Probation and Department of Children and Family Services. At the time of the monitoring review in December 2011, Guiding Light Home for Boys was providing services for nine (9) Probation children, 5 were placed at Site I and 4 were placed at Site II. There were no dual supervision youth residing there at this time.

Guiding Light Home for Boys Sites I & II are located in Moreno Valley, in the County of Riverside, Fifth District.

SCOPE OF REVIEW

The purpose of our review is to determine whether the Agency is providing the services as outlined in their Program Statement. In addition, the review covers basic child safety and licensing issues and includes an evaluation of the Agency's Program Statement, internal policies and procedures, child case records, a facility inspection and interviews with children placed in the Group Home at the time of the review. Interviews with children are designed to obtain their perspectives on the program services provided by

the Agency and to ensure adherence to the Foster Youth Bill of Rights. In addition, a review of the most current Auditor Controller Fiscal Review was conducted.

SUMMARY

Based on child interviews, our review of five (5) Probation children's files, the contents of the Needs and Service Plans, and/or documentation provided by the Agency, Guiding Light Home for Boys is generally providing the services as outlined in their Program Statement. There are no egregious deficiencies that require correction. All of the children reported that they feel safe living in the Group Home and report that the staff treats them with respect. All of the staff files were in order. All of the child files were in order with exception to the deficiencies listed in the "notable findings" below and described in further detail in the "Program Contract Compliance Monitoring Review" section of this report. Overall, the Group Home reached the level of "Substantial Compliance".

NOTABLE FINDINGS

- The Needs and Service Plans (NSPs) were "cookie cutter" and not child specific.
- Needs and Service Plan goals were not youth specific and could not be measured.
- Discharged child files were significantly out of compliance.
- Minor facility deficiencies.

EXIT CONFERENCE

In attendance: Stanley Powell, Group Home Administrator

Highlights:

The Exit Conference was conducted on February 3, 2012. The deficiencies cited were addressed at the time of the exit conference. The representative present was in agreement with improving the Needs and Service Plans and discharged file issues and addressing the minor facility issues. A written Corrective Action Plan was received on March 2, 2012. A follow-up visit was conducted on March 20, 2012, to ensure that all deficiencies have been corrected. The results of the follow up visit, which can be found in detail on the final page of the "Compliance Monitoring Review" section, are as follows: interior and exterior repairs and/or replacements have been completed; allowance logs were maintained and clearly documented, the Corrective Action Plan detailed how future Needs and Service Plans are to be comprehensive, child-specific, time-orientated, and measurable.

If you need additional information or have questions or concerns, please contact Director, Lisa Campbell-Motton, Placement Permanency and Quality Assurance, at (323) 240-2435.

JEP:REB:LCM:ed

Attachments (3)

c: William T Fujioka, Chief Executive Officer
Sachi A. Hamai, Executive Officer, Board of Supervisors
Brence Culp, Chief Deputy Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Philip L. Browning, Director, Department of Children and Family Services
Public Information Office
Audit Committee
Sybil Brand Commission
Candace Hache, Executive Director, Guiding Light Home for Boys
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing
Georgia Mattera, Public Safety, Chief Executive Officer
Chief Deputies
Justice Deputies

GUIDING LIGHT HOME FOR BOYS SITES I & II PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW- SUMMARY

	Contract Compliance Monitoring Review	Findings: December/2011
I	**Licensure/Contract Requirements** (9 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Transportation	2. Full Compliance
	3. SIRs	3. Full Compliance
	4. Compliance with Licensed Capacity	4. Full Compliance
	5. Disaster Drills Conducted/Logs Maintained	5. Full Compliance
	6. Runaway Procedures	6. Full Compliance
	7. Allowance Logs	7. Needs Improvement
	8. CCL citations for safety/plant deficiencies	8. Needs Improvement
	9. Detailed sign in/out log for children	9. Full Compliance
II	**Facility and Environment** (6 Elements)	
	1. Exterior Well Maintained	1. Needs Improvement
	2. Common Quarters Maintained	2. Full Compliance
	3. Children's Bedrooms/Interior Maintained	3. Needs Improvement
	4. Sufficient Recreational Equipment	4. Full Compliance
	5. Sufficient Educational Resources	5. Full Compliance
	6. Adequate Perishable and Non Perishable Food	6. Full Compliance
III	**Maintenance of Required Documentation and Service Delivery** (13 Elements)	
	1. Child Population Consistent with Program Statement	1. Full Compliance
	2. Probation Caseworker Authorization to Implement NSPs	2. Needs Improvement
	3. Children's Participation in the Development of NSPs	3. Needs Improvement
	4. NSPs Implemented and Discussed with Staff/Parents	4. Needs Improvement
	5. Sampled children progressing towards meeting the NSP case goals	5. Needs Improvement
	6. Treatment team developed timely **initial** NSP with the child	6. Full Compliance
	7. Treatment team develop comprehensive **initial** NSP with the child	7.Needs Improvement
	8. Therapeutic Services Received (individual, group, substance abuse, etc.)	8.Full Compliance
	9. Recommendation Assessments/Evaluations Implemented (psychological, psychiatric, medical evaluations/assessments)	9.Full Compliance
	10. Probation Caseworkers Monthly Contact Verified	10.Full Compliance
	11. Agency assist the child in maintaining important relationships	11.Full Compliance
	12. Treatment team develop timely **updated** NSP with the child	12.Full Compliance

	13. Treatment team develop comprehensive **updated** NSP with the child	13.Needs Improvement
IV	**Education and Workforce Readiness** (8 Elements) 1. Child enrolled in school within three (3) days after placement or efforts documented 2. Child attends school as required 3. Agency facilitates in meeting the child's educational goals (IEP conference, tutoring, parent/teacher conference, homework, etc.) 4. Based on services provided, has the child's academic performance and/or attendance increased (improved grades, test scores, promotion to the next level, High School graduated, IEP goals?) 5. Current IEPs maintained 6. Current copies of the child's report cards or progress cards maintained 7. Group Home provides children with opportunities to participate in age appropriate youth development services (YDS) and vocational training programs 8. Group Home encourages children's participation in YDS or equivalent programs.	Full Compliance (All)
V	**Health and Medical Needs** (6 Elements) 1. Initial medical examinations conducted 2. Initial medical examinations timely 3. Required follow-up medical examinations conducted timely 4. Initial dental examinations conducted 5. Initial dental examinations timely 6. Required follow-up dental examinations conducted timely	Full Compliance (All)
VI	**Psychotropic Medications** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication or document effort to obtain 2. Current Psychiatric Evaluation/Review for each child on psychotropic medication	Full Compliance (All)
VII	**Personal Rights and Social/Emotional Well-Being** (17 Elements) 1. Children informed of Group Home's policies and procedures 2. Children feel safe at Group Home 3. Children supervised by staff	Full Compliance (All)

	4. Group Home provides appropriate staffing and supervision 5. Children report satisfaction with meals and snacks 6. Staff treats children with respect and dignity 7. Appropriate rewards and discipline system in place 8. Consequences fair 9. Children allowed private visits, make and receive telephone calls and to send and receive unopened correspondence/mail 10. Children free to attend religious services and activities of their choice 11. Children's chores easy or hard (reasonable) 12. Children informed about their medication 13. Children aware of their right to refuse medication 14. Children free to received or reject voluntary medical, dental and psychiatric care 15. Children given opportunities to participate in planning activities 16. Children participate in activities, including at the Group Home, in the community or school 17. Children given opportunities to participate age-appropriate extra-curricular, enrichment and social activities in which they have an interest	
VIII	**Personal Needs/Survival and Economic Well-Being** (8 Elements) 1. $50.00 Clothing Allowance 2. Adequate Quantity Clothing Inventory 3. Adequate Quality 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	**Discharge Plan** (3 Elements) 1. Children placed at least 30 days, was the child discharged according to the permanency plan 2. Children placed at least 30 days, did the child make progress toward meeting their NSP goals 3. Group Home using available resources to attempt to stabilize the placement prior to requesting the removal of the child.	1. Needs Improvement 2. Needs Improvement 3. Full Compliance
X	**Personnel Records** (14 Elements) 1. DOJ submitted timely 2. If applicable, FBI submitted timely	Full Compliance (All)

	3. Child Abuse Clearance Index (CACI) submitted timely 4. Appropriate employees sign a criminal background statement timely 5. Group Home staff who have direct contact with children meet the educational/experience requirements 6. Employees received timely health screenings 7. Required employees have a valid CA drivers license 8. Appropriate Group Home employees signed copies of the Group Home policies and procedures 9. Appropriate employees received the required initial training 10. Appropriate employees received minimum one-hour training in the area of child abuse identification and reporting 11. Appropriate employees received CPR training 12. Appropriate employees received First-Aid training 13. Appropriate employees received the required annual on-going training 14. Appropriate employees received emergency intervention training per the Group Home's program statement	

GUIDING LIGHT HOME FOR BOYS GROUP HOME SITES I AND II
PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

Guiding Light Home for Boys I
24720 Clearwater
Moreno Valley, CA 92551
License Number: 336424036
Rate Classification Level: 10

Guiding Light Home for Boys II
25123 Middlebrook Way
Moreno Valley, CA 92553
License Number: 336423724
Rate Classification Level: 10

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of seven (7) case files, four (4) currently placed children and three (3) discharged child files, five (5) staff files, and/or documentation provided by the provider, Guiding Light Home for Boys, Sites I and II, was in compliance with seven (7) out of the (9) nine elements in the area of "Licensure/Contract Requirements". The areas of non-compliance were: Allowance Logs and CCL citations for safety/plant deficiencies.

Disaster Drills are completed every six (6) months and the last drill was completed on November 15, 2011 at both sites. The Disaster Drill logs were reviewed and found to be well-maintained and accurate. Runaway Procedures are completed in accordance with the contract, and a detailed sign in/out log for children was utilized and maintained. The Group Home transports the youth to all appointments and activities and ensures that Probation is notified in a timely manner of a child's relocation to a new site. In addition to this, Guiding Light Home for Boys reports serious incidents on a routine basis via the i-Track system.

In April of 2011 during a routine visit, Probation had concerns regarding the maintenance of the landscape at Guiding Light Site I. The issue was immediately addressed and corrected informally by the Group Home within the same month. To date, the Group Home has maintained the landscaping to standard. According to Riverside County Community Care Licensing (CCL), Guiding Light Site I received a citation on September 14, 2011, for the water being too hot. This deficiency was corrected, and to date, the water temperature has been maintained to standard CCL did not have to issue any citations for Guiding Light Site II at that time.

The Group Home was not in compliance with the maintenance and accuracy of the allowance log. A review of the Group Home's allowance log indicated that the log was not properly documented or maintained. The allowance log was not clearly detailed with dates or names, and it could not be determined if the children were receiving their weekly allowance; however, during the child interviews, the children did report that they are receiving their weekly allowance. They also reported that they receive the correct amount of money.

Recommendations:

1. Guiding Light Home for Boys, Sites I and II shall ensure that the aforementioned deficiency cited will be corrected in a timely fashion by ensuring that all children physically receive their weekly allowance and that the names of the children and dates of issuance are properly documented on the allowance log.

2. Guiding Light Home for Boys, Sites I and II shall continue to maintain their water temperatures and avoid further citations in accordance to the corrective action plans that has been previously submitted and approved.

FACILITY AND ENVIRONMENT

Based on our review of Guiding Light Home for Boys Sites I and II and interviews conducted with four (4) placed children, Guiding Light Home for Boys Sites I and II were in compliance with four (4) out of the six (6) elements in the area of "Facility and Environment". The areas of non-compliance were: "Exterior Well Maintained", "Children's Bedrooms/Interior Maintained".

Guiding Light Home for Boys, Sites I and II are located in residential communities. The overall building structures for both sites were in good condition. Both sites had adequate paint and trimmed shrubs. There were no broken windows, and the entrance walk was clean and free of debris; however, the grass at both sites was a little tall and needed to be trimmed. Both sites were clean and neat. The common quarters were clean the carpet was free of stains or tears. The furniture was in good condition, and the overall appearance was "homelike". All the children have their own lockers with locks located in den, in case they want to store some of their personal belongings. The Group Home has recreational equipment for the children to use. For example, both sites have basketball courts, basketballs and footballs. In addition, they also provide memberships to "Fitness 19 Gym" for all the residents, since it can be extremely hot in the summer. Since the last monitoring visit in October 2010, Guiding Light has purchased a new marble-like dining table with six (6) white leather type chairs for Site I. They also purchased a new chocolate brown sofa and love seat with burgundy throw pillows and living room pictures that contain positive messages. The back yard of Site I is now fenced in and has a lemon tree. Guiding Light Site II also has a new marble-like dining room table and leather type chairs.

The children's bedrooms were neat and clean. They have color coordinated bed comforters and window coverings. The mattresses were in good repair. All the beds have a complete compliment of linens. The children have an adequate supply of storage for their clothing and furniture. However, graffiti was found on the dressers in bedrooms at both sites. In addition, there was a broken outlet plate at Site I and repairs needed in the bathrooms at Site II. The Group Home has central heating and cooling, and according to child interviews, temperatures are maintained at comfortable levels year-round. The fire escape/evacuation routes were posted in visible areas and the smoke detectors and fire extinguishers were fully operational and updated.

The Group Home provides age appropriate and accessible educational and recreational equipment. Both sites have an "Everlast" punching bag, and the Group Home provides memberships to "Fitness 10" gym. There were a variety of science fiction and non-fiction books including Encyclopedias and Bibles. The Group Home also provides working computers, one at each site, that are kept in newly purchased computer desks. The computer desks have a flip up compartment where the monitor is located. There are working televisions with an X Box video gaming system and DVD player. There were also board games like, "Life", "Bingo", checkers, dominos and traditional playing cards.

There was a sufficient supply of perishable and non perishable foods located at both sites. Examples of the types of food were: Site I had two (2) gallons of milk, fresh tomatoes and cucumbers and ground beef patties in the refrigerator. In the freezer, there were frozen burritos, taquitos, frozen fruit and steak. The pantry contained canned green beans, "Rice a Roni", canned fruit and a variety pack of instant oatmeal. There was also a deep freezer in the garage for additional frozen food. Site II had "Hebrew National Salami", "Stouffers" lasagna and chocolate chip waffles. The refrigerator contained two (2) gallons of milk, juice, fresh pears, grapes and apples. The pantry contained "Jiffy" corn bread mix, canned vegetables and fruit and "Kool-Aid" drink mix.

The deficiencies noted are as follows:

Guiding Light Home for Boys Site I:

- Front and back grass need to be trimmed.
- Remove the graffiti from the dressers in bedrooms 1, 2, and 3
- Replace the broken outlet plate in bedroom 3

Guiding Light Home for Boys Site II:

- Front and back grass need to be trimmed
- Remove the graffiti from the front and back of the dresser in bedroom 2
- Repair or replace the bathroom door of bedroom 3 which has a hole in it
- Fill in the holes located in the bathroom of bedroom 3

Aside from the aforementioned deficiencies cited, both sites provide a home like environment for the children.

Recommendations:

1. Guiding Light Home for Boys, Sites I and II shall ensure that the aforementioned deficiencies cited will be corrected in a timely fashion by ensuring that the grass is cut and the dressers are repaired or replaced and free of graffiti, the broken outlet is replaced and the bathrooms are repaired.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of Guiding Light Home for Boys, Sites I and II, interviews conducted with four (4) placed children and documentation provided by the Agency, Guiding Light Home for Boys, Sites I and II complied with seven (7) of the 13 elements of "Maintenance of Required Documentation and Service Delivery". The areas of non-compliance were: "Probation Caseworker authorization to implement NSPs", "Children's participation in the development of NSPs", "NSPs implemented and discussed with staff/parents", "Sampled children progressing towards meeting the NSP case goals", Treatment team develop comprehensive initial NSP with the child", "Treatment team develop comprehensive updated NSP with the child".

The children meet the Group Home's population criteria as outlined in their Program Statement and are assessed for needed services; such as, psychological, psychiatric, and medical evaluations within 30 days of placement according to the initial NSP. Case

files reflect adequate documentation to show that children are receiving treatment services such as anger management, drug and alcohol counseling and individual and family counseling. During the child interviews, the children also confirmed that they are receiving treatment services. The children reported that they are attending individual and group counseling as well as attending drug and alcohol counseling.

The Needs and Services Plans (NSP's) that were reviewed were completed in a timely manner; however, they were not comprehensive or child specific. The NSP's were very "cookie cutter" meaning that they all read the same. The individual responsible for completing the NSP's used general goals that could be applied to all children. The NSP goals were not specific to each child, were not measurable and were not time orientated. Due to the issues noted, there was no way to determine if the children were progressing towards their goals. An example of a NSP goal was, "Decrease maladaptive behaviors". Of the four (4) children's NSP's that were reviewed, two (2) had Probation Caseworker signatures authorizing the implementation of the NSP. The remaining two (2) NSPs did not have signatures present on the document. Three (3) of the four (4) children indicated that they participated in the development of their NSP, and the remaining child reported that he was not present during the development of his plan. He reported that he just signed the signature page after it was completed. Although the NSP's did include the children's signatures, one of the children interviewed reported that he did not know what a NSP was. The child's signature was present on the signature page, but he indicated that he had never seen the actual NSP and did not remember participating in his treatment plan. The children reported that they felt as if they were making progress towards their goals. One of the four (4) NSP's did not have a staff signature implementing the NSP, and none of the NSP's had parent signatures.

The Group Home also assists the children in maintaining important relationships. Of the four (4) children interviewed, only one (1) child stated that he was not having any family visits. He is 18 years of age and reported that he was not having any visits because his mother was not accepting of his sexual orientation.

Of the four (4) updated NSP's reviewed, three (3) were completed in a timely manner. The remaining one (1) did not have a quarterly NSP to review due to his length of placement. The updated NSP's that were reviewed were not comprehensive and were not specific to the individual needs of the child. A review of the visitation log book confirms that the children are having monthly contact with their case worker.

Recommendations:

1. Guiding Light Home for Boys, Sites I and II shall ensure that the aforementioned deficiencies cited will be corrected in a timely manner by ensuring that all NSP's are child specific and comprehensive. Each child is to be a part of their NSP and understand their goals. The NSP's should include goals that are measurable and the reader should be able to determine if the child is making progress toward their goals.

2. Guiding Light Home for Boys, Sites I & II shall ensure that all appropriate parties are a part of implementing the child's NSP and that all signatures are obtained.

3. Guiding Light Home for Boys, Sites I & II shall ensure that the updated NSPs are comprehensive and child specific and that each child participates in the planning and understands their goals.

EDUCATIONAL AND WORKFORCE READINESS

Based on our review of Guiding Light Home for Boys Sites I and II, interviews conducted with four (4) placed children and documentation provided by the Agency, Guiding Light Home for Boys, Sites I and II complied with all eight (8) elements of "Education and Workforce Readiness".

The children are enrolled in school within three (3) days, they are attending school and provided with educational support and resources to meet their educational needs. The children report that Group Home staff attends meetings to help with school issues. They also report that the Group Home provides transportation to all of the school functions and supports them if they decide to participate in extracurricular activities. One of the children interviewed reported that he has been accepted into three (3) universities and currently has a 3.8 grade point average. A review of the child's report card reflects that he is doing well in school and on target to graduate in May of 2012. Another child interviewed reported that since being placed at the Group Home his school attendance has improved. The children interviewed indicated that they are taught daily living skills; such as, how to cook, grocery shopping, budgeting, how to wash their clothes and being organized. The children also reported that Group Home staff attends school conferences to assist with problems that may arise while at school.

Out of the four (4) children interviewed, none had an Individualized Education Plan (IEP). The children also report that the Group Home encourages them to participate in youth development services; such as the Independent Living Program (ILP). One of the children interviewed reported being on his school's basketball team. He indicated that he is the starting point and shooting guard. Another child interviewed reported that he is a member of the cheerleading squad, the school choir, plays tennis and is a member of the National Honor Society. Both youth reported that the Group Home provides transportation to and from these activities.

Recommendations:

None

HEALTH AND MEDICAL NEEDS

Based on our review of Guiding Light Home for Boys, Sites I and II, interviews conducted with four (4) placed children and documentation provided by the Agency, Guiding Light Home for Boys, Sites I and II were in compliance with all six (6) elements in the area of "Health and Medical Needs".

Initial medical and dental exams conducted were conducted within the first 30 days of placement. The children reported that if they request medical or dental care the Group Home responds immediately. They also reported that if medical or dental treatment required any follow up exams, they were completed timely. Children are informed of their right to refuse medication. Of the four (4) children interviewed, only one was on prescribed medication. He indicated that he was aware of his right to refuse his

medication and stated that if he refused Group Home staff would "just write it down." A review of the medication log indicates that mediation is properly distributed and documented. The children indicated that they are receiving regular doctor and dentist check ups.

Recommendations:

None

PSYCHOTROPIC MEDICATION

Based on our review of Guiding Light Home for Boys, Sites I and II, interviews conducted with four (4) placed children and documentation provided by the Agency, Guiding Light Home for Boys, Sites I and II were in compliance with both elements in the area of "Psychotropic Medications".

Of the four (4) child interviews, only one of the children had a current court authorization for psychotropic medication. Documentation based on the psychotropic medication review tool confirms that this child is routinely seen by the prescribing psychiatrist. The child was aware of his right to refuse his medication and knew why he was taking the medication. The child stated that he feels that his medication helps to keep him focused. He also stated that he feels that his medication is helping overall.

Recommendations:

None

PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

Based on our review of Guiding Light Home for Boys, Sites I and II and interviews conducted with four (4) placed children, Guiding Light Home for Boys, Sites I and II were in compliance with all 17 elements in the area of "Personal Rights and Social/Emotional Well-Being".

Children reported that they are informed about the Group Home's policies and procedures when they are first placed. During the child interviews, the children reported that they feel safe in the Group Home and are provided with appropriate staff supervision. Children expressed satisfaction with the quality of their interactions with staff and reported that overall, the facility staff treat them with dignity and respect.

Children reported that they are assigned chores that are reasonable and not too demanding such as cleaning the kitchen, mopping the kitchen floor, vacuuming the living room carpet and cleaning the bathroom.

Children reported that the discipline policies are consistently enforced, and there are fair and appropriate consequences for inappropriate behavior. The children indicated that the Group Home operates on a "level system", and when they do not follow the rules, the consequence is a drop in their level. An example may be a loss of video game usage, an extra chore or possibly a behavior contract.

The children reported that they are allowed to make and receive personal telephone calls, send and receive unopened mail and have private visits. The children report that they are allowed to attend religious services and activities of their choice and are informed about their medication and their right to refuse. The children also reported that they receive voluntary medical, dental and psychiatric care.

Children are given the opportunity to participate in planning activities. Examples of planned activities stated during the child interviews include going to the movies, go-kart racing and going to the park. One child reported, during the interview, that one of his favorite and most recent planned activities was going to a dinner show to see "Battle of the Dances". Another child reported that his favorite planned activity is going to the movies. The last movie he saw was "The Baby Sitter". Children also reported participating in extracurricular school activities. One child is on the basketball team at Val Verde Regional Learning Center. Another child is a member of the choir at school.

Children reported satisfaction with meals and snacks. Three out of the four (4) children interviewed rated the food as good, and the fourth child indicated that the food is fair. All four (4) children reported that they are satisfied with the snacks that they receive. Examples of the types of snacks stated during the child interviews were juice boxes, individual packaged chocolate chip cookies, fruit snacks, fresh fruit and granola bars.

Recommendations:

None

PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

Based on our review of Guiding Light Home for Boys, Sites I and II, interviews conducted with four (4) placed children and documentation provided by the Agency, Guiding Light Home for Boys, Sites I and II, was in compliance with all eight (8) elements of "Personal Needs/Survival and Economic Well-Being".

The Group Home provides the appropriate clothing items of necessity and the required $50 monthly clothing allowance to the children. Children are provided with opportunities to select their own clothes and the clothing provided is of good quality and of sufficient quantity. The children reported that they shop for their clothing at stores like "Target", "Wal-Mart", various stores at the "Rio Rancho Swap Meet", "Forever 21" and "H & M". Guiding Light Home for Boys, Sites I and II, transports the children to clothing stores where they can purchase appropriate attire at a reasonable price. The clothing allowance logs and clothing receipts were reviewed to ensure that the children are receiving their clothing vouchers. The log revealed that the Children receive their clothing allowance every month.

The children all reported that they receive the required minimum weekly allowance and they spend their allowances as they choose. Guiding Light Home for Boys, Sites I & II, reported that the children currently do not have savings accounts due to the fact that the residents are not employed and they spend their entire allowance once it is received. The children indicated that they spend their allowance on things like "Bath and Body Works", potato chips, soda pop and T-shirts. As noted under "Licensure/Contract Requirements", a review of the allowance log book revealed that The Group Home was not in compliance with the maintenance and accuracy of the allowance log.

The Group Home provides children with adequate personal care items; such as, body wash, shampoo, lotion, deodorant, hair products, combs and brushes. Guiding Light Home for Boys, Sites I and I, also provide the children with "Life Books" and encourage the children to add pictures to their Life Books that are taken by Group Home staff while on recreational outings. The "Life Books" are "sports themed" and the Group Home is also including a "how do I feel insert" which encourages the children to express their feelings on paper. All of the "Life Books" were reviewed after the child interviews were conducted. The "Life Books" consisted of pictures that were taken during various outings while at the Group Home.

Recommendations:

None

DISCHARGE PLAN

Based on our review of three (3) closed files from Guiding Light Home for Boys, Sites I and II, the Group Home complied with only one (1) out of the three elements in the area of "Discharge Plan". The areas of non-compliance were: "Children placed at least 30 days, was the child discharged according to the permanency plan", Child placed at least 30 days, did the child make progress toward meeting their NSP goals".

Of the three (3) discharged files reviewed, none of the children were discharged in accordance with their permanency plan. Two of the children received 7-day notices from the Group Home, and the third child was arrested while on home pass and a violation petition was prepared. All three (3) children's permanency plan was family reunification. Group Home staff reported that two (2) of the children displayed physical aggression towards staff, would leave the facility without permission and continued to use drugs. The children were attending weekly drug and alcohol counseling as well as individual therapy; however, they were not receptive to treatment. The Needs and Service Plans that were reviewed were not child specific and were "cookie cutter", meaning that they all read the same. The goals were very general and not specific to the individual child. There was no way to determine if the children were making progress towards their goals because the goals were not measurable or time orientated. The Group Home did attempt to stabilize the children prior to removal by having treatment services in place; however, the children were not receptive to treatment.

Recommendations:

1. Guiding Light Home for Boys, Sites I and II shall ensure that they complete child-specific and timely Needs and Service Plans (NSPs) to assist the children in making progress towards meeting their goals and successfully achieving their permanency plan goal.

PERSONNEL RECORDS

Based on our review of Guiding Light Home for Boys, Sites I and II, and a review of five (5) personnel files, Guiding Light Home for Boys, Sites I and II complied with all 14 elements of "Personnel Records".

A review of five (5) personnel records was completed. All training and background checks (DOJ, FBI and CACI) were completed and current. The appropriate criminal background statements were signed and present in the files. All five (5) staff had de-escalation and restraint training. Of the staff files reviewed, they all had the minimum one (1) hour training in the area of child abuse identification and reporting. All files reviewed had the required educational documentation and criminal and child abuse clearances for their employees prior to being hired. The employee files had current CPR and First-Aid training. There were also signed copies of the Group Home policies and procedures in the files. All files reviewed had timely initial health screenings and emergency intervention training. The staff files had the required initial training as well as the annual required on-going training. There were also current copies of the employee's driver's licenses in the files.

Recommendations:

None

AUDITOR CONTROLLER FISCAL REVIEW

The most recent Fiscal Review for Guiding Light Home for Boys from the Department of Auditor-Controller is dated March 10, 2010, for the fiscal period of January 1, 2008, to December 31, 2008. The report dated March 10, 2010, indicated that Guiding Light Home for Boys had questioned/disallowed cost. Guiding Light Home for Boys submitted a timely approved fiscal Corrective Action Plan, which is being monitored by the Department of Children and Family Services, Fiscal Monitoring Section.

Recommendations:

None

FOLLOW-UP VISIT

A follow-up visit was conducted on March 20, 2012, at Guiding Light Home for Boys, sites I & II, to verify that all recommendations have been completed.

- A complete walk through of the interior and exterior of Sites I and II was conducted. All recommendations have been repaired or replaced. The interior deficiencies had been corrected as recommended. The grass in the front and back yards at both sites was trimmed to an appropriate height. The dressers had been sanded and varnished to remove the graffiti and were in the process of receiving a high gloss finish.

- At the time of the review, the Group Home did not have a properly maintained Allowance Log. During the follow-up visit, a review of the Allowance Log was conducted and found it to be in compliance. The notations for each child were clearly documented and showed that the children are receiving their allowance and making withdrawals. Signatures were present from the children as well as from the Group Home staff. The dates were also present indicating when the allowance was issued.

- At the time of the review, the Group Home did not have comprehensive or child-specific Needs and Service Plans (NSP's) for the children. The Group Home has provided a written Corrective Action Plan detailing how they will ensure that future NSP's are comprehensive, child-specific, time-orientated, and measurable.

Guiding Light Home for Boys, Inc.
25123 Middlebrook Way Moreno Valley, CA 92551
Facility (951) 485-0423 Fax (951) 485-9165
Candace Hache, Executive Director/Administrator (951) 906-1424

Los Angeles County Probation Department
Group Home Monitoring Unit
Attn: Deputy Probation Officer Ratasha Smith
3965 S. Vermont Avenue, 3rd Floor
Los Angeles, CA 9003

I. LICENSURE/CONTRACT REQUIREMENTS

a) Area of Concern

Allowance log not properly maintained. Youth not physically receiving their allowance

a) Corrective Action Plan

The Guiding Light Administrator shall be responsible for maintaining the Allowance Binder weekly; to ensure that all recording are accurate.

Guiding Light Clients will be given their allowance to spend personally verses staff handling the allowance for them, exception are written verification given to Guiding Light by the Probation Department.

II. FACILITY AND ENVIRONMENT

a) Area of Concern

Front and back yards at both group homes need to be cut. Site 1 – remove graffiti from the dressers in bedroom 1, 2, and 3. Replace broken outlet plate in room 3, remove graffiti from dresser in bedroom 2, Fill hole in bathroom 3, repair or replace bathroom door in hallway

b) Corrective Action Plan

Guiding Light Executive Director/Administrator has contracted with a local handyman who has agreed to the following maintenance duties:

On-call for interior and exterior repairs;

Guiding Light Home for Boys, Inc.
25123 Middlebrook Way Moreno Valley, CA 92551
Facility (951) 485-0423 Fax (951) 485-9165
Candace Hache, Executive Director/Administrator (951) 906-1424

Maintaining the facility yards weekly;

Graffiti removal as needed;

Weekly up-keep of the facilities.

The Guiding Light Administrator is responsible for communicating any maintenance concerns and/or needed facility upkeep to the contracted handyman weekly.

The Administrator of Guiding Light has scheduled a Staff Meeting on March 13, 2012, at which time Guiding Light Residential Counselors will be informed of the following:

Utilizing the Maintenance Request Form in a timely manner;

Reporting property damage immediately for replacement or repairs;

Reporting the removal of tagging and graffiti;

Review their responsibilities/duty to ensure facility upkeep, supervision of daily chore and room checks;

Guiding Light Facility Managers is responsible for conducting weekly/daily facility inspections, reporting findings and complete maintenance request forms if applicable.

In addition to weekly facility inspections, all clients of Guiding Light are expected to keep their bedrooms in a clean and orderly fashion. This includes making their beds, keeping their drawers neatly, vacuuming the carpeting and keeping their closets in order. Guiding Light Residential Counselors are responsible for conducting daily "room checks" of all facility bedrooms and reporting in writing any client's bedrooms which are not free of the following:

Contraband: i.e., markers, no white-out, no glass bottles, etc.

Items that could be used or identified as a weapon, gang item, or drug paraphernalia.

Damages to property or furniture

Guiding Light Home for Boys, Inc.
25123 Middlebrook Way Moreno Valley, CA 92551
Facility (951) 485-0423 Fax (951) 485-9165
Candace Hache, Executive Director/Administrator (951) 906-1424

Guiding Light Home for Boys, Inc.

MAINTENANCE REQUEST FORM

[Please fill out one form per request]

Facility: _____ Facility Manager _____ Date: _____

Repair/Replacement Needed:

_____

_____

Date Received:_____ Approved by: _____

Repair/Replacement Completed On: _____

Guiding Light Home for Boys, Inc.

ROOM INSPECTION AND CHORES

Facility: _____

Resident: _____ For the Week of: _____

Morning Inspection:

AREA	SUN	MON	TUES	WED	THUR	FRI	SAT	Comments/Staff Initials
Bed								
Carpet								
Window Sills/Blinds								

Guiding Light Home for Boys, Inc.
25123 Middlebrook Way Moreno Valley, CA 92551
Facility (951) 485-0423 Fax (951) 485-9165
Candace Hache, Executive Director/Administrator (951) 906-1424

Drawers								
Dresser								
Hygiene								
Trash								
Walls								
Windows								
Chore								

III. MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

a) Area of Concern

Youth – NSP did not have a signature line for the youth. Youth – Initial NSP goals are cookie cutter and not youth specific. Youth Quarterly NSP date is incorrect, Quarterly NSP Goals are identical to initial. NSP does not show if youth is making progress.

b) Corrective Action Plan

Guiding Light will facilitate Monthly Treatment Planning Meeting; at which time the treatment team will develop, modify and/or review NSPs. Probation Caseworkers are invited to take part as a member of the treatment team, and to assist in the development or modification of their client's Needs and Services Plan.

Once the NSP has been developed, the Probation Caseworker will be asked to sign the NSP, authorizing their approval to implement the client's NSP.

When the Probation Caseworker is unable to attend the Treatment Team Planning Meeting, the Guiding Light Administrator will resume the responsibility of forwarding the NSP to the Probation Caseworker in order to obtain authorization for implementing the client's NSP. The Administrator will document their efforts by facilitate the following:

Guiding Light Home for Boys, Inc.
25123 Middlebrook Way Moreno Valley, CA 92551
Facility (951) 485-0423 Fax (951) 485-9165
Candace Hache, Executive Director/Administrator (951) 906-1424

The Probation Caseworker will receive the NSP with an attached letter via email and followed by a hard copy via US Postal Service. The attached letter will request:

The Probation Caseworker's signature, authorizing the implementation of the client's NSP

The Probation Caseworker to provide feedback if they're in disagreement with the developed NSP

The Probation Caseworker to reply within the next 14 business days of the dated letter. The letter will also notify the Probation Caseworker that after the 14th day Guiding Lights intends to implement the enclosed NSP unless instructed otherwise.

The Administrator will make several attempts to contact the Probation Caseworker to obtain their signatures authorizing the approval of the NSP. Each attempt shall be documented and will become a part the Client's Clinical File.

Guiding Light clients shall play an important part in the development of their NSP therefore; it is the Administrator's responsibility to ensure that clients are available and have the opportunity to attend the Treatment Team Planning Meeting.

As a means to involve the clients in the development of their treatment plan goals and objectives the Guiding Light Therapist is responsible for the following:

Explaining to the client what a NSP details, its purpose and why it is important that they actively participant in the development of their NSP

Review with the client all clinical assessments and/or evaluations that might be addressed during the Treatment Team Planning Meeting

Drafting a working individualized NSP that is specific to the client's needs

Work with the client to prepare a rough draft of the NSP, allowing the client an opportunity to express their feelings and concerns so that the Therapist may be an advocate during the meeting if the client is unable to express themselves

Obtain client's signature which knowledge their participation in the development of their NSP.

Guiding Light Home for Boys, Inc.
25123 Middlebrook Way Moreno Valley, CA 92551
Facility (951) 485-0423 Fax (951) 485-9165
Candace Hache, Executive Director/Administrator (951) 906-1424

Any modifications and changes in the NSP will be done during the Treatment Team Planning Meeting, with the responsibility for the NSP given to the Guiding Light Therapist.

At the Treatment Team Planning Meeting the Therapist can and often will make changes in the Needs and Services Plan depending upon the progress, or lack thereof, of the client. Implementation for the changes is done at the time of the Treatment Team Planning Meeting, with the Therapist assigning responsibility to various team members. Areas in which may require modification are:

Social/Developing interpersonal relationships
Emotional needs / skill building
Intellectual Functioning / Decision-Making
Medical / Psychiatric & Health
Daily Functioning, Independent Living Skills and Self-Esteem issues.

Quarterly Reports shall reflect client's progress or lack thereof, include services and methods used, accomplishments and challenges over the last 90days.

As a corrective measure Guiding Light Therapist and Administrators attended a Needs and Services Plan training facilitated by Los Angeles County DCFS Out of Home Care Management Division and Probation Placement Permanency /QA.

Guiding Light Therapist and Administrator shall co-facilitate Treatment Team Planning Meeting and Staff Meetings which will occur monthly. Attendance is mandatory by all Guiding Light direct staff members, including residential counselors, and others as needed. All input and/or reports from consulting psychiatric or psychological professionals are presented at the meeting. Each client's treatment plan is open to review or discussion. Staff members responsible for each area of the NSP will report on the client's progress.

In addition to therapeutic responsibilities by the Therapist, there will be Residential Counselors assigned to monitor and provide services for school/vocational skills, recreation, and life skills.

The Therapist will ensure each client's NSP is updated when needed, and that each member of the treatment team is following the treatment plan.

As a means of quality assurance the Guiding Light Administrator is responsible for conducting a monthly review of all clinical documentation including but not limited to:

Ensure that each NSP is individualize and specific to the needs of the client

Ensure that each NSP is developed within the time frame allotted

Ensure that Needs and Services Plans are authorized by the Probation Caseworker by obtaining signatures and/or ensure that all attempts to obtain their signatures are documented

Ensuring that Guiding Light clients played an active role in the development of the Initial NSP and any modification of the NSP

Monthly Reviews conducted by the Administrator will be shared with the Therapist, so that deficiencies can be corrected immediately.

IV. EDUCATION AND WORKFORCE READINESS - MET

V. HEALTH AND MEDICAL NEEDS - MET

VI. PSYCHOTROPIC MEDICATION - MET

VII. PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING - MET

VIII. PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING – MET

IX. DISCHARGE CHILDREN

a) Area of Concern

NSPs on the discharged youth were cookie cutter, youth missing his initial NSP

b) Corrective Action Plan

The Guiding Light Therapist will be responsible for ensuring that all Discharge Plans are individualized and relevant to the Permanency Plan. At the time of a planned permanent releases or transfer from the program, the therapist will ensure that documentation includes a summary of findings, progress and after-care plans.

The entire plan for the actual release from the program is under the direct charge and orchestration of the Guiding Light Therapist. The Therapist is responsible for not only all of the legal and logistical

Guiding Light Home for Boys, Inc.
25123 Middlebrook Way Moreno Valley, CA 92551
Facility (951) 485-0423 Fax (951) 485-9165
Candace Hache, Executive Director/Administrator (951) 906-1424

implications required, but the Therapist also sets the stage and is directly responsible for all after care matters.

As a means of quality assurance the Guiding Light Administrator is responsible for conducting a monthly review of all clinical documentation including but not limited to:

Ensure that Discharge Plans are individualize and specific to the needs of the client,
Ensure that Discharges are developed within the time frame allotted and relevant to the Permanency Plan,

Ensure that Guiding Light clients played an active role in the development of their discharge plan.

Monthly Reviews conducted by the Administrator will be shared with the Therapist so that deficiencies can be corrected immediately.

c) PERSONNEL RECORDS – MET

If you have any further questions or concerns, please do not hesitate to give me a call.

Candace Hache, Executive Director March 2, 2012