County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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

PHILIP L. BROWNING
Director

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

July 17, 2012

To: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Mark Ridley-Thomas
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

VISTA DEL MAR GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

The Los Angeles County Department Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a review of Vista Del Mar in November 2011, at which time they had one 24-bed site. At the time of the review, there were 21 placed children: eight DCFS children, six Department of Mental Health (DMH) children, one Probation youth and 6 privately placed children; 12 males and 9 females.

Vista Del Mar is located in the Third Supervisorial District and provides services to DCFS' foster youth, Probation youth, DMH youth, and privately placed children. According to Vista Del Mar's program statement, its stated goal is to "serve emotionally disturbed, abused and/or neglected, court dependent children, males and females." Vista Del Mar is licensed to serve a capacity of 24 children, ages seven through 18.

For the purpose of this review, four DCFS currently placed children were interviewed, and their case files were reviewed. The placed children's overall average length of placement was six months, and the average age was 16. Three discharged children's files were reviewed to determine if the destination of placement was per their permanency plan and if the children were meeting their Needs and Services Plan (NSP) goals at the time of discharge. Three staff files were reviewed for compliance with Title 22 Regulations and County contract requirements.

Three sampled children were prescribed psychotropic medication. We reviewed their case files to assess timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm documentation of psychiatric monitoring was maintained as required.

SCOPE OF REVIEW

The purpose of this review was to assess Vista Del Mar's compliance with the County contract and State regulations. The visit included a review of Vista Del Mar's program statement, administrative internal policies and procedures, four children's case files, and a random sampling of personnel files. A visit was made to the facility to assess the quality of care and supervision provided to the children, and we conducted interviews with 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, the children interviewed reported feeling safe at Vista Del Mar. They also reported that they were provided with good care and appropriate services, were comfortable in their environment, and were treated with respect and dignity.

The review revealed the need for Vista Del Mar to address the development of comprehensive initial NSPs that meet all the required elements in accordance with the NSP template.

Vista Del Mar was receptive to implementing systemic changes to improve compliance with State regulations and the County contract. The Administrator stated that she understood the findings of the review and would develop a Corrective Action Plan (CAP) to address the deficiencies.

NOTABLE FINDINGS

The following are the notable findings of our review:

- Three of four initial NSPs reviewed were not comprehensive or did not meet all the required elements in accordance with the NSP template. The review revealed errors of omissions of required information; information was not documented in the correct location; and identified concerns were not addressed. Initial NSP goals were not realistic.

  Staff's involvement in addressing the children's educational needs or school related concerns was not documented, and detailed information regarding visitation plans and treatment services was not provided. In addition, goals were not correctly identified, and one child's poor hygiene was not addressed.

  The Administrator planned to follow-up to ensure initial and updated NSPs are comprehensive, including all the required elements in accordance with the NSP template; goals are realistic; information is appropriately documented; and identified concerns are addressed. In addition, Vista Del Mar representatives attended the January 2012 NSP training conducted by the OHCMD.

A detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held January 19, 2012.

In attendance:

Amy Jaffe, Senior Vice President of Operations; Marcela Morales, Quality Assurance Manager; Lynn Cohen, Unit Director, Vista Del Mar; and Edward Preer, Monitor, DCFS OHCMD.

Highlights:

The Administrator felt there has not been sufficient NSP training provided by OHCMD, and she was therefore, not in agreement with all our findings and recommendations. However, she was open to suggestions to ensure full compliance in the future and agreed to make the necessary corrections. The OHCMD Monitor reviewed the NSP deficiencies with Vista Del Mar's staff. Vista Del Mar staff attended the January 20, 2012 OHCMD NSP training.

Vista Del Mar provided an approved written CAP addressing each recommendation noted in this compliance report. The Approved CAP is attached.

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

If you have any questions please call me, or your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:RRS:KR:
EAH:PBG:ep

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Pamela Cutchlow, Executive Director, Vista Del Mar Group Home
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

VISTA DEL MAR GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

3200 Motor Avenue
Los Angeles, CA 90034
License Number: 191600721
Rate Classification Level: 12

	Contract Compliance Monitoring Review	**Findings: November 2011**
I	**Licensure/Contract Requirements** (9 Elements) 1. Timely Notification for Child's Relocation 2. Transportation 3. Special Incident Reports 4. Compliance with Licensed Capacity 5. Disaster Drills Conducted & Logs Maintained 6. Runaway Procedures 7. Allowance Logs 8. CCL Citations/OHCMD Investigation Reports on Safety/Plant Deficiencies 9. Detailed Sign In/Out Logs for Placed Children	Full Compliance (ALL)
II	**Facility and Environment** (6 Elements) 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non Perishable Food	Full Compliance (ALL)
III	**Maintenance of Required Documentation and Service Delivery** (13 Elements) 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement Needs and Services Plans (NSPs) 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Children Progressing Toward Meeting NSP Case Goals 6. Development of Timely Initial NSPs 7. Development of Comprehensive Initial NSPs 8. Therapeutic Services Received 9. Recommended Assessment/Evaluations Implemented 10. DCFS CSWs Monthly Contacts Documented 11. Children Assisted in Maintaining Important Relationships 12. Development of Timely Updated NSPs 13. Development of Comprehensive Updated NSPs	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance

IV	**Education and Workforce Readiness** (8 Elements) 1. Children Enrolled in School Timely 2. Children Attending School 3. Children Facilitated in Meeting Educational Goals 4. Children's Academic or Attendance Increase 5. Current IEPs Maintained 6. Current Report Cards Maintained 7. YDS/Vocational Programs Opportunities Provided 8. Group Home Encourage Children's Participation in Youth Development Services	Full Compliance (ALL)
V	**Health And Medical Needs** (6 Elements) 1. Initial Medical Exams Conducted 2. Initial Medical Exams Timely 3. Follow-Up Medical Exams Timely 4. Initial Dental Exams Conducted 5. Initial Dental Exams Timely 6. Follow-Up Dental Exams Timely	Full Compliance (ALL)
VI	**Psychotropic Medication** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	Full Compliance (ALL)
VII	**Personal Rights and Social/Emotional Well-being** (15 Elements) 1. Children Informed of 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. Fair Consequences 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed About their Medication 11. Children Aware of Right to Refuse Medication 12. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 13. Children Given Opportunities to Plan Activities 14. Children Participate in Activities (GH, School, Community) 15. Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities	Full Compliance (ALL)

VIII	**Personal Needs/Survival and Economic Well-being** (8 Elements) 1. $50 Clothing Allowance 2. Adequate Quantity of Clothing Inventory 3. Adequate Quality of Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Ethnic Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance/Earnings 8. Encouragement and Assistance with Life Book	Full Compliance (ALL)
IX	**Discharged Children** (3 Elements) 1. Children Discharged According to Permanency Plan 2. Children Making Progress Toward NSP Goals 3. Attempts to Stabilize Children's Placement	Full Compliance (ALL)

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

VISTA DEL MAR GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW

3200 Motor Avenue
Los Angeles, CA 90034
License Number: 191600721
Rate Classification Level: 12

The following report is based on a "point in time" monitoring visit and addresses findings noted during the November 2011 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review, Vista Del Mar was in full compliance with nine of 10 sections of our contract compliance review: Licensure/Contract Requirements; Facility and Environment; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records. The following report details the results of our review.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of four children's files and/or documentation from the provider, Vista Del Mar fully complied with 12 of 13 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery.

Three initial NSPs were not comprehensive or did not include all NSP required elements. Some goals in the initial NSPs were not correctly identified. One initial NSP goal for one child was unrealistic, while one NSP did not address a child's poor hygiene. Another initial NSP did not address the father's participation in the visitation plan, while some initial NSPs did not address the staff's involvement in addressing the children's educational needs or school related concerns.

The Vista Del Mar's Social Workers and Administrator attended the January 2012 NSP training conducted by OHCMD. Vista Del Mar planned to follow-up to ensure initial NSPs were comprehensive, including all the required elements in accordance with the NSP template; goals are realistic; information is appropriately documented; and identified concerns are addressed.

Recommendation:

Vista Del Mar's management shall ensure:

1. The treatment team develops comprehensive initial NSPs which include all required elements, in accordance with the NSP template.

FOLLOW-UP FROM OHCMD'S PRIOR MONITORING REVIEW

Objective

Determine the status of the recommendations reported in the prior monitoring review.

Verification

We verified whether the outstanding recommendations from our prior monitoring review were implemented. The last report was issued August 10, 2010.

Results

The OHCMD's prior monitoring report contained two outstanding recommendations. Specifically, Vista Del Mar was to ensure the treatment team worked closely with DCFS CSWs to assist the placed children in improving academic performance and/or attendance. In addition, Vista Del Mar was to ensure the NSPs were comprehensive and all the required elements were addressed, in accordance with the NSP template. Based on our follow-up of these recommendations, Vista Del Mar fully implemented one recommendation.

Recommendation

Vista Del Mar Group Home's management shall ensure:

2. Full implementation of the outstanding recommendation from the 2010 monitoring report, which is noted in this report as Recommendation 1.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A current fiscal review of Vista Del Mar has not been posted by the A-C.

Rick Wolf
Co-Chair, Board of Directors

Lyn Konheim
Co-Chair, Board of Directors

Elias Lefferman
President/Chief Executive Officer

GROWING TOGETHER
VISTA DEL MAR
A COMMUNITY OF SERVICES
FOR 103 YEARS

February 23, 2012

Out of Home Care Management Division
9320 Telstar Avenue, Suite 206
El Monte, CA 91731
(626) 569-6819

Attention: Patricia Bolanos-Gonzalez/Edward Preer

RE: CORRECTIVE ACTION PLAN

We are providing the Out of Home Care Management Division (OHCMD) with a Corrective Action Plan (CAP) as requested regarding the findings revealed during the monitoring of our facilities.

FINAL MONITORING REVIEW FIELD EXIT SUMMARY January 19, 2012:

III Maintenance of Required Documentation and Services Delivery

22 Did the treatment team develop comprehensive initial and updated Needs and Services Plans (NSP) with the children?

Findings: [redacted], [redacted] and [redacted]'s initial NSPs were not comprehensive:

1) The projected date of [redacted] achieving sobriety in 60 days was unrealistic.
2) [redacted]s and [redacted]s initial NSPs did not explain why the fathers were not involved in the visitation plan.
3) [redacted]s initial NSP goal #4 was not part of goal #1 and #2, the intervention-treatment plan for the psychological goals.
4) [redacted]s initial goal #5 was not correctly identified as Independent Living goal.
5) [redacted]s identified problem of poor hygiene was not addressed as a health related goal.

CAP: The Vista Del Mar treatment team has taken the following actions to ensure the initial NSPs are comprehensive.

1) *The facility will consistently identify achievable and realistic goals.*
2) *The facility will clearly document family member's lack of participation in visitation and will include an explanation as to why this member was not involved.*
3) *The facility will clearly document the interventions required to address goal areas.*
4) *Independent Living goals will be correctly identified under that heading.*
5) *Hygiene related goals will be categorized under the health related goal area.*

IN ADDITION

- Handler Clinicians [redacted] and [redacted]) and [redacted] unit director attended an NSP training with [redacted] on 7/13/201. (please see attached outline)

- On February 17, I conducted another training with the clinicians [redacted] and [redacted] as well as with [redacted] Unit Director emphasizing the following:
  1) Objectives need to be realistic and achievable (ie. [redacted] goal of achieving sobriety in 60 days was not realistic).
  2) There needs to be clear explanation as to why a family member is not involved in the visitation plan.
  3) The template for NSPs has been corrected to reflect the Psychological goal areas.
  4) The goal area of Independent Living was discussed and clarified for the clinicians.
  5) The Health related goal area was discussed and clarified.

- [redacted] Unit Director will carefully review NSPs prior to submission to ensure standards are met.

- As per the January training with DCFS, this agency will be conducting trainings for our clinicians re the new NSP template which will soon be in effect.

Please let me know if additional information is needed.

Sincerely,

Amy Jaffe, LCSW
Senior Vice President of Intensive Intervention Programs

Cc: Edward Preer, DCFS
Elias Lefferman, PhD, CEO
Lynn Cohen, Handler Unit Director
Quality Management Department
Susan Allen

7/13/2011-NSP Protocol review with clinicians as per Edward Preer (from site visit)

- **Objectives** must be *more* attainable-Try to identify objectives that we believe that the specific child can attain fairly easily.

  Please see [redacted], [redacted] or myself for specific suggestions re this.

- Less **objectives** under each category is optimal (i.e. 2 objectives).

- Do not identify a **HEALTH related problem** area unless there is a specific physical health related issues.

  If you want to identify an objective having to do with a child taking his/her prescribed psychotropic medications, include that in a pertinent psychologically related area.

  Also frame the objective something like this. *"Child to take psychotropic medications as prescribed with an understanding that the child may refuse."*

- **Under Interventions**, please be more child specific and creative so that the interventions do reflect some of the specific and creative interventions that are used.

  Also, under each problem area, there needs to be the following intervention or something similar:

  '[redacted] Unit Director to follow up with treatment team members to ensure that identified interventions are being implemented."