County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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August 13, 2012

To: Supervisor Zev Yaroslavsky, Chairman
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Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

DREAM HOME CARE 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 Dream Home Care in October 2011, at which time they had three six-bed sites and 18 male placed children.

Dream Home Care is located in the Third Supervisorial District and provides services to DCFS foster youth. According to Dream Home Care's program statement, its stated goal is to "service court dependent, abused, neglected, emotionally disturbed children." Dream Home Care is licensed to serve a capacity of 18 children, ages 12 through 18.

For the purpose of this review, five currently placed children were interviewed and their case files were reviewed. The placed children's overall average length of placement was five months and the average age was 15. Three discharged children's files were reviewed to determine if the destination of placement was consistent with 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 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 Dream Home Care's compliance with the County contract and State Regulations. The visit included a review of Dream Home Care's program statement, administrative internal policies and procedures, five children's case files, and a random sampling of personnel files. A visit was made to the sites to assess the quality of care and supervision provided to children, and interviews were conducted 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 Dream Home Care. They also reported being provided with good care and appropriate services, being comfortable in their environment, and were treated with respect and dignity.

Our review revealed the need for Dream Home Care to develop comprehensive NSPs that meet all the required elements in accordance with the NSP template. Additionally, CCL had cited Dream Home Care for a lack of supervision on February 10, 2011, April 6, 2011, and on October 4, 2011.

Dream Home Care 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 five initial NSPs and none of the nine updated NSPs reviewed were comprehensive or met all the required elements in accordance with the NSP template. Dream Home Care's staff attended the January 2012 OHCMD NSP training, and it is anticipated they will ensure the initial and updated NSPs are comprehensive and address all the required elements in accordance with the NSP template.

- CCL cited Dream Home Care on three occasions during a 12-month period due to lack of supervision. Dream Home Care was cited on February 10, 2011, April 6, 2011, and October 4, 2011, as children had engaged in inappropriate sexual conversations and inappropriate sexual behavior with each other on each of these occasions. Ms. Cora Manalang, CEO/Administrator, reported a CAP

was submitted to CCL that provided staff with training addressing sex education, inappropriate sexual behaviors and sensitive issues of rights and sexuality.

On April 17, 2012, OHCMD held a meeting with Dream Home Care administration to further address these concerns. Dream Home Care demonstrated being proactive, as prior to our request for the meeting, an administrator was hired for each site to ensure better supervision of children and staff. A consultant was also hired to review policies and procedures and to assist them in improving their program.

A detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held December 5, 2011:

In attendance:

Cora Manalang, CEO/Administrator; Julee Campbell, Social Worker; Kristen Deck, Social Worker; Dream Home Care, and Edward Preer, Monitor, DCFS OHCMD.

Highlights:

The Administrator, Ms. Manalang was in agreement with our findings and recommendations. She was open to suggestions to ensure full compliance in the future and agreed to make necessary corrections. The OHCMD Monitor addressed the lack of supervision issues with the Dream Home Care staff. Ms. Manalang stated that Dream Home Care staff would receive additional training to ensure improvement in their supervision of the children. In addition, Dream Home Care hired an administrator for each site and also hired a consultant to review policies and procedures and assist them in improving their program.

The Dream Home Care staff attended the January 2012 OHCMD NSP training to ensure the initial and updated NSPs are comprehensive, and address all the required elements in accordance with the NSP template.

Dream Home Care provided an approved written CAP addressing each recommendation noted in this compliance report. The CAP is attached.

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

If you have further 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
Cora Manalang, CEO/Administrator, Dream Home Care Group Home
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

DREAM HOME CARE GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

Gardenia Site
3720 Gardenia Avenue
Long Beach, CA 90807
License Number: 197803967
Rate Classification Level: 11

Allington Site
3521 Allington Avenue
Long Beach, CA 90805
License Number: 197804914
Rate Classification Level: 11

Gaviota Site 3
3590 Gaviota Avenue
Long Beach, CA 90807
License Number: 197800400
Rate Classification Level: 11

	Contract Compliance Monitoring Review	**Findings: October 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	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed 9. Full Compliance
II	**Facility and Environment** (6 Elements) 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non Perishable Food	Full Compliance (ALL)
III	**Maintenance of Required Documentation and Service Delivery** (13 Elements) 1. Child Population Consistent with Program Statement	1. Full Compliance

	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 Assessments/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	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. Improvement Needed
IV	**<u>Education and Workforce Readiness</u>** (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	**<u>Health And Medical Needs</u>** (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	**<u>Psychotropic Medication</u>** (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)

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License Number: 197800400
Rate Classification Level: 11

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

CONTRACTUAL COMPLIANCE

Based on our review, Dream Home Care was in full compliance with eight of 10 sections of our contract compliance review: 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:

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of five children's files and/or documentation from the provider, Dream Home Care fully complied with eight of nine elements reviewed in the area of Licensure/Contract Requirements.

CCL cited Dream Home Care on three occasions during a 12-month period due to lack of supervision. Dream Home Care was cited on February 10, 2011, April 6, 2011, and October 4, 2011, as children had engaged in inappropriate sexual conversations and inappropriate sexual behavior with each other on each of these occasions. Ms. Cora Manalang, CEO/Administrator, reported a CAP was submitted to CCL that provided staff with training addressing sex education, inappropriate sexual behaviors and sensitive issues of rights and sexuality.

The OHCMD held a meeting with Dream Home Care administration on April 17, 2012, to further address these concerns. Dream Home Care demonstrated being proactive, as prior to our request for the meeting, an administrator was hired for each site to ensure better supervision of children and staff. A consultant was also hired to review policies and procedures and assist them in improving their program.

Recommendation:

Dream Home Care management shall ensure:

1. The staff provides proper supervision of the children at all times.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of five children's files and/or documentation from the provider, Dream Home Care fully complied with 11 of 13 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery.

The review revealed that initial and updated NSPs were not comprehensive, and they did not explain why children were not making progress toward achieving their goals. We found that some of the projected completion dates for the goals were beyond 90 days, and some goals were not specific or correctly identified.

Recommendations:

Dream Home Care's management shall ensure:

2. The treatment team develops comprehensive initial NSPs that meet all the required elements in accordance with the NSP template.

3. The treatment team develops comprehensive updated NSPs that meet all the required elements in accordance with the NSP template.

FOLLOW-UP FROM THE 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 review were implemented. The last report was issued October 12, 2010.

Results

The OHCMD's prior monitoring report contained two outstanding recommendations. Specifically, Dream Home Care was to ensure the initial and updated NSPs were comprehensive and addressed all the required elements in accordance with the NSP template. During our June 2011 follow-up visit to Dream Home Care, it was determined

that Dream Home Care had implemented the outstanding recommendations from our prior report. However, our October 2011 review revealed that initial and updated NSPs were not comprehensive or did not meet all the required elements in accordance with the NSP template.

Recommendations:

Dream Home Care's management shall ensure:

4. Full implementation and maintenance of the outstanding recommendations from the October 2011 monitoring report, which are noted in this report as Recommendations 2 and 3.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of Dream Home Care has not been posted by the A-C.

A NON-PROFIT CORPORATION
4150 Locust Avenue
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February 12, 2012

To: Mr. Edward Preer
DCFS Children's Service Administrator/Monitor
Out of Home Care Management Division
9320 Telstar Avenue #216
El Monte, Ca 91731

RE: GROUP HOME MONITORING REVIEW SUMMARY RESULTS (December 5, 2011)

III. Maintenance of Required Documentation and Service Delivery
22/28 The group home treatment team did not develop comprehensive Initial and Updated Needs and Service Plan with the children, with the following specific findings:

- The projected date of the goal completion was beyond 90 days.
- The NSP Updated goals did not change from the initial goals.
- The NSP Behavioral goal was listed as a Permanency goal.
- Some NSP goals were not identified.

CORRECTIVE ACTION PLAN:

A. The NSP shall be made comprehensive to meet the placed child's identified needs by ensuring that the following specific findings are appropriately addressed:

1. The projected date of any goal completion must not be beyond 90 days.
2. The NSP updated goals will reflect the changes from the initial NSP initial goals.
3. NSP Behavioral goal will not be listed as a Permanency goal. Permanency goals will be appropriately addressed.
4. NSP goals needs to be identified .

B. Training of the group home administrators and social workers was conducted by DCFS Out of Home Care Mgmt. Division in connection to

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NSP and Quarterly Reporting . Administrator and social worker of Dream Home Care Inc were in attendance and had trained the other DHC staff in this regard.

C. Administrators of each site , Rosemarie Bueno and Barbara Okonkwo , together with the group home social workers, Julee Campbell and Kirsten Deck , will review all NSP/Quarterly Reports as they become due and ensure that the above CAP is implemented.

The above measures are being submitted for your approval. Hoping that the above Corrective Action Plans meet your standards. Thank you very much for your visit.

Sincerely,

Cora Manalang
CEO/Administrator
Dream Home Care Inc.