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Director

**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

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

August 23, 2012

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

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From: Philip L. Browning
Director

Philip L. Browning
Brenda Mads

**TEENS HAPPY HOME GROUP HOME CONTRACT COMPLIANCE MONITORING
REVIEW**

The Out-of-Home Care Management Division (OHCMD) conducted a review of Teens Happy Home in November 2011, at which time they had one six-bed site and six Department of Children and Family Services (DCFS) placed children.

Teens Happy Home is located in the Second Supervisorial District and provides services to DCFS foster youth. According to Teens Happy Home's program statement, its stated goal is "to provide a positive environment for those males, ages 12 to 17, with emotional and adjustment problems and for those who because of family problems are unable to cope in the traditional family setting." Teens Happy Home is licensed to serve a capacity of six males, ages 12 through 17.

For the purpose of this review, the case files of four currently placed DCFS children were reviewed and the four children were interviewed. The placed children's average length of placement was four months and the average age was 17. Four discharged children's files were reviewed to determine if they were meeting their Needs and Services Plan (NSP) goals and discharged according to their permanency plan. Three staff files were reviewed for compliance with Title 22 Regulations and the County contract requirements.

None of the placed children were prescribed psychotropic medication.

"To Enrich Lives Through Effective and Caring Service"

SCOPE OF REVIEW

The purpose of this review was to assess Teens Happy Home's compliance with the County contract and State regulations. The visit included a review of Teens Happy Home's program statement, administrative internal policies and procedures, four current children's case files, four discharged 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 children. 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

During our review, the children interviewed reported feeling safe, having been provided with good care and appropriate services, being comfortable in their environment and treated with respect and dignity. The Group Home (GH) was clean and well-maintained.

A few deficiencies were noted during the monitoring review. The GH needed to ensure children were progressing toward meeting their NSP case goals, were attending school and were progressing in academic performance and/or attendance. Additionally, Teens Happy Home was to ensure staff members met the education/experience requirements, received a timely initial health screening and certification in Teens Happy Home's Emergency Intervention Plan.

Teens Happy Home's management was receptive to implementing systemic changes to improve compliance with State regulations and the County contract. They agreed to address noted deficiencies in a Corrective Action Plan (CAP).

NOTABLE FINDINGS

The following are the notable findings of our review:

- Two children did not progress toward meeting their NSP case goals. The Administrator acknowledged the lack of progress for these two children. She stated that the GH therapist/social worker and staff members will discuss and monitor the children's NSP goals on a weekly basis. The Administrator will discuss the case plan goals during monthly resident meetings.
- Two children did not attend school as required. The Administrator stated that Teens Happy Home ensures the children arrive at school and staff remains in good communication with school personnel. However, once children are on campus, they cannot ensure the children attend class. Furthermore, the Administrator stated that

when children are initially enrolled in school, they advise school personnel to contact the GH should the child not attend class. She also stated that children receive appropriate consequences for not attending school, such as restriction from television, computer games, and community outings. Teens Happy Home management stated that they will continue to work toward children attending school on a regular basis.

- One child's academic performance and/or attendance did not increase. The Administrator acknowledged the child was not making progress in academic performance and/or attendance in spite of the child attending tutoring twice a week. The Monitor discussed that the tutoring program may not be effective for the child and the intervention(s) may need to be altered to meet the child's individual needs.
- One staff member did not meet the education/experience requirements in accordance with the Teens Happy Home program statement's job description. The Executive Director did not agree with this finding, as she claimed she had been informed by DCFS that the unqualified staff member could work in the GH as long as there was a qualified staff member present at all times. Subsequent to this finding, the staff member is no longer employed with Teens Happy Home.
- One staff member did not receive a timely initial health screening in accordance with Title 22 Regulations. The Administrator stated that she would ensure newly-hired staff members receive a timely health screening by reviewing their documents prior to employment.
- One reviewed staff member did not receive the Emergency Intervention Plan certification in a timely manner. The Administrator stated that in the future, she will directly follow up with the Professional Assault Crisis Training (Pro-ACT) instructor to ensure staff members receive the Emergency Intervention Plan certification in a timely manner.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held April 12, 2012.

In attendance:

Olga Ruiz, Administrator, and Kristine Kropke-Gay, Monitor, OHCMD.

Highlights:

The Administrator was in agreement with most of the findings and recommendations and stated Teen's Happy Home will make the necessary corrections to mitigate the deficiencies.

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

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:kkg

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
- Maurice Mitchell, President, Board of Directors, Teens Happy Home
- Beautina Robinson, CEO, Teens Happy Home
- Jean Chen, Regional Manager, Community Care Licensing
- Lenora Scott, Regional Manager, Community Care Licensing

**TEENS HAPPY HOME GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW-SUMMARY**

**9651 S. Hobart Boulevard
Los Angeles, CA 90047
License Number: 198203038
Rate Classification: 7**

	Contract Compliance Monitoring Review	Findings: November 2011
I	<p><u>Licensure/Contract Requirements</u> (9 Elements)</p> <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. Transportation 3. SIRs 4. Compliance with Licensed Capacity 5. Disaster Drills Conducted & Logs Maintained 6. Runaway Procedures 7. Allowance Logs 8. CCL Citations/OHCMD Investigations Reports on Safety/Plant Deficiencies 9. Detailed Sign In/Out Logs for Placed Children 	Full Compliance (ALL)
II	<p><u>Facility and Environment</u> (6 Elements)</p> <ol style="list-style-type: none"> 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedroom/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non-Perishable Food 	Full Compliance (ALL)
III	<p><u>Maintenance of Required Documentation and Service Delivery</u> (13 Elements)</p> <ol style="list-style-type: none"> 1. Child Population Consistent with Program Statement 2. DCFS CSW Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff 5. Children Progressing Toward Meeting NSP Case Goals 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Needs Improvement

	<ol style="list-style-type: none"> 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 Initial/Updated NSPs 	<ol style="list-style-type: none"> 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance
IV	<p><u>Educational and Workforce Readiness</u> (8 Elements)</p> <ol style="list-style-type: none"> 1. Children Enrolled in School Timely 2. Children Attending School 3. GH Facilitates in Meeting Child's 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. GH Encourages Children's Participation in YDS 	<ol style="list-style-type: none"> 1. Full Compliance 2. Needs Improvement 3. Full Compliance 4. Needs Improvement 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance
V	<p><u>Health and Medical Needs</u> (6 Elements)</p> <ol style="list-style-type: none"> 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	<p><u>Psychotropic Medication</u> (2 Elements)</p> <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation/Review 	Not Applicable (ALL)
VII	<p><u>Personal Rights And Social/Emotional Well-Being</u> (15 Elements)</p> <ol style="list-style-type: none"> 1. Children Informed of Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 	Full Compliance (ALL)

	<ol style="list-style-type: none"> 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's Given Opportunities to Participate in Extra Curricular, Enrichment and Social Activities 	
VIII	<p><u>Personal Needs/Survival and Economic Well-Being</u> (8 Elements)</p> <ol style="list-style-type: none"> 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 Allowance 7. Management of Allowance/Earnings 8. Encouragement and Assistance with Life Book/Photo Album 	Full Compliance (ALL)
IX	<p><u>Discharge Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 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	<p><u>Personnel Records (including Staff Qualification, Staffing Ratios, Criminal Clearances and Training</u> (14 Elements)</p> <ol style="list-style-type: none"> 1. DOJ Submitted Timely 2. FBI Submitted Timely 3. CACIs Timely Submitted 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance

4.	Signed Criminal Background Statement Timely	4.	Full Compliance
5.	Education/Experience Requirement	5.	Needs Improvement
6.	Employee Health Screening Timely	6.	Needs Improvement
7.	Valid Driver's License	7.	Full Compliance
8.	Signed Copies of GH Policies and Procedures	8.	Full Compliance
9.	Initial Training Documentation	9.	Full Compliance
10.	One-hour Child Abuse and Reporting Training	10.	Full Compliance
11.	CPR Training Documentation	11.	Full Compliance
12.	First Aid Training Documentation	12.	Full Compliance
13.	On-going Training Documentation	13.	Full Compliance
14.	Emergency Intervention Training Documentation	14.	Needs Improvement

**TEENS HAPPY HOME GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW**

**9651 S. Hobart Boulevard
Los Angeles, CA 90047
License Number: 198203038
Rate Classification Level: 7**

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, Teens Happy Home was in full compliance with six of 10 sections of our Contract Compliance review: Licensure/Contract Requirements; Facility and Environment; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Discharged Children. Psychotropic Medication was not applicable, as there were no children prescribed psychotropic medication at the time of our review. 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, Teens Happy Home fully complied with 12 of 13 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery.

We found that two children were not progressing toward meeting their NSP case goals. The Administrator acknowledged the lack of progress by the two children. She stated that the Group Home therapist/social worker, along with the group home staff members, will discuss and monitor the residents' NSP goals on a weekly basis and the Administrator will discuss the case plan goals during monthly resident meetings.

Recommendation:

Teens Happy Home's management shall ensure:

1. Children are progressing toward meeting NSP case goals.

EDUCATION AND WORKFORCE READINESS

Based on our review of four children's files and/or documentation from the provider, Teens Happy Home fully complied with six of eight elements reviewed in the area of Education and Workforce Readiness.

We noted that two children did not attend school as required. The Administrator stated that the group home ensures the children arrive at school and staff remain in good communication with school personnel. However, once children are on campus, they cannot ensure the children attend class. Furthermore, the Administrator stated that when children are initially enrolled in school, they advise school personnel to contact the group home should the child not attend class. She also stated that children receive consequences for not attending school, such as restriction from television, computer games, and community outings, and will continue to work toward children attending school on a regular basis.

Also, one child's academic performance and/or attendance did not increase. The Administrator acknowledged the child not making progress in academic performance and/or attendance in spite of the child attending tutoring twice a week. The Monitor discussed that the tutoring program may not be effective for the child, and that the intervention(s) may need to be altered to meet the child's individual needs.

Recommendations:

Teens Happy Home's management shall ensure:

2. Children attend school as required.
3. Children show an increase in academic performance and/or attendance.

PERSONNEL RECORDS

Based on our review of three personnel files, Teens Happy Home fully complied with 11 of 14 elements reviewed in the area of Personnel Records.

One staff member did not meet the education/experience requirements in accordance with the Teens Happy Home program statement's job description. The Executive Director did not agree with this finding, as she claimed she was told by DCFS that the unqualified staff member could work in the group home as long as there was a qualified staff member present at all times. Subsequent to this finding, the staff member is no longer employed with Teens Happy Home. Additionally, one staff member did not receive a timely initial health screening in accordance with Title 22 Regulation 84065 (3) (B). The Administrator stated that she would ensure newly-hired staff members receive a timely health screening by reviewing their documents prior to employment. Furthermore, one staff member did not receive the Emergency Intervention Plan certification in a timely manner. The Administrator stated that in the future, she will directly follow up with the PRO-Act instructor to ensure staff members receive the Emergency Intervention Plan certification in a timely manner.

Recommendations:

Teens Happy Home's management shall ensure:

4. Staff members meet the education/experience requirements.
5. Staff members receive timely health screenings.
6. Staff members receive timely certification in accordance with the Teens Happy Home's Emergency Intervention Plan.

FOLLOW-UP FROM OHCMD'S PRIOR MONITORING REVIEW

Objective

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

Verification

We verified whether the outstanding recommendations from our prior review were implemented. The last report was issued June 1, 2012.

Results

The OHCMD's prior monitoring report contained four outstanding recommendations. Specifically, Teens Happy Home was to ensure the group home site was maintained and in good repair in accordance with Title 22 Regulations, DCFS CSWs authorization was obtained to implement NSPs, NSPs were comprehensive, and staff members treat the children with respect and dignity. Teens Happy Home fully implemented these recommendations.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of Teens Happy Home was posted by the A-C on December 10, 2003. The A-C identified \$26,244 in unsupported/inadequately supported and ineligible expenditures. In addition, the A-C noted that the Agency had substantial amounts of liabilities owed to the California Department of Social Services and Internal Revenue Service that could jeopardize their financial viability.

The DCFS Fiscal Monitoring Section has informed the OHCMD that Teens Happy Homes has paid off the unsupported/inadequately supported and ineligible expenditures, and that there is currently no outstanding balance due.

Teens Happy Home Group Home
9651 S. Hobart Ave.
Los Angeles, CA 90047

Out of Home Care Management Division
9320 Telstar Avenue, Suite 216
El Monte, CA 91731

ATTN: Kristine Kropke-Gay, OHC Monitor

RE: MONITORING REVIEW CORRECTIVE ACTION PLAN (CAP)

May 10, 2012

Teens Happy Home Group Home is submitting a Corrective Action Plan as requested from the monitoring unit during the Field Exit Summary dated 4/12/12.

I. Maintenance of Required Documentation and Service Delivery:

a. Teens Happy Home staff will continue to work with residents to ensure that they progress toward meeting the Needs and Services Plans case goals:

1. [REDACTED] therapist/Social Worker along with Group Home Staff will discuss and monitor resident NSP goals on a weekly basis during group sessions. Administrator will be responsible for implementing the CAP and discussing case plan goals during monthly resident meetings.
2. Staff will continue to work with Solutions Foundation Drug and Rehabilitation Program staff to curtail the negative behavior of residents. Anger Management classes have also been implemented into the overall curriculum to assist the residents in meeting case plan goals. Administrator and Social Worker/therapist will check on continuous progress.

II. Education and Workforce Readiness:

a. Teens Happy Home staff will continue to work with residents to ensure that efforts are made to improve the overall attendance/academic performance at school:

1. Residents are tutored by a L.A.U.S.D. representative twice a week on Tuesdays and Thursdays at the facility. Although attendance is mandatory, some of the residents do not want to participate in

the sessions and this information is documented and placed in their respective files.

- 2. Residents attend Solutions Foundation, an off-site Drug Rehabilitation Program for an additional two days a week on Mondays and Wednesdays that oversee completion of homework assignments and overall educational progress for those that do not want to participate in L.A.U.S.D. tutoring services.
- 3. Staff will now be responsible for enrolling residents in school as well as obtaining attendance records/progress report cards and work with the residents' teachers and counselors to monitor educational progress. Administrator will supervise accordingly.

iii. Personnel Records:

a. Teens Happy Home will ensure that GH staff who have direct contact with children meet the educational/experience requirements and timely health-screenings:

- 1. Due to the circumstances at hand, [REDACTED] has been terminated from Teens Happy Home GH. Administrator will ensure that all newly hired GH staff meet the minimum work related requirements per our Program Statement.
- 2. Administrator will check health-screenings more accurately for proper dates prior to physically assigning GH staff to work at the facility.
- 3. Pro-Act training will remain in effect for all GH staff within 90 days of employment per Teens Happy Home Program Statement. Administrator will now ensure that Pro-Act facilitator is immediately contacted upon a newly hired employee to obtain completion certificate.

If further documentation is needed, please feel free to let me know. Thank you in advance for your attention to the matter at hand.

Respectfully,



Olga L. Ruiz
GH Administrator