County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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December 15, 2012

To: Supervisor Mark Ridley-Thomas, Chairman
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Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

**CASA EDITHA FOUNDATION, INC., d.b.a. AVA LYN'S GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW**

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a review of Casa Editha Foundation, Inc., d.b.a. Ava Lyn's Group Home (Casa Editha) in September 2012. Casa Editha has one site located in the Fifth Supervisorial District and provides services to Los Angeles County DCFS foster children and youth. According to Casa Editha's program statement, its purpose is "to enable these children to increase their independent adaptive skills and decrease their maladaptive behaviors in order to gain skills necessary for successful adult adjustment."

Casa Editha has one six-bed site and is licensed to serve a capacity of six boys, ages seven through 18. At the time of review, Casa Editha served five placed DCFS children, two boys and three girls. The children at Casa Editha ranged from mild to profoundly developmentally delayed. The placed children's overall average length of placement was 36 months, and their average age was 16.

## SUMMARY

During our review, the child interviewed reported feeling safe, being provided with good care and appropriate services, being comfortable in his environment and treated with respect and dignity.

Casa Editha was in full compliance with seven of 10 areas of our Contract compliance review: Licensure/Contract Requirements; Facility and Environment; Education and Workforce Readiness; Psychotropic Medication; Personal Rights and Social/Emotional

Well-Being; Personal Needs/Survival and Economic Well-Being; and Discharged Children.

We noted deficiencies in the areas of assisting of children with maintaining important relationships; ensuring timely dental needs of the children; and ensuring maintenance of timely personnel records. We instructed Casa Editha's supervisory staff to enhance monitoring in order to eliminate documentation issues.

Attached are the details of our review.

## REVIEW OF REPORT

On October 4, 2012, the DCFS OHCMD Monitor, Donald Luther, held an Exit Conference with Casa Editha's staff, Stephen Goodman, Social Worker. Casa Editha's representative agreed with the review findings and recommendations; was receptive to implementing systemic changes to improve their compliance with regulatory standards; and to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this compliance report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

Casa Editha provided the attached approved Corrective Action Plan (CAP) addressing the recommendations noted in this compliance report.

We will assess for 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:dl

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
Edith Avanzado, Executive Director, Casa Editha Foundation, Inc.
Lenora Scott, Regional Manager, Community Care Licensing
Rosalie Gutierrez, Regional Manager, Community Care Licensing

# CASA EDITHA FOUNDATION, INC., d.b.a. AVA LYN'S GROUP HOME
# CONTRACT COMPLIANCE MONITORING REVIEW
# FISCAL YEAR 2012-2013

## SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the September 2012 review. The purpose of this review was to assess Casa Editha Foundation, Inc., d.b.a. Ava Lyn's Group Home's (Casa Editha) compliance with its County contract requirements and State regulations and included a review of the Casa Editha's program statement, as well as internal administrative policies and procedures. The monitoring review covered the following 10 areas:

- Licensure/Contract Requirements
- Facility and Environment
- Maintenance of Required Documentation and Service Delivery
- Educational 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
- Personnel Records

For the purpose of this review, five placed children were selected for the sample. Four of the five children could not verbalize or respond to an interview; however, the Monitor observed each of these children and the staff interacting with the children. We interviewed one child who was verbal and reviewed the five placed children's case files to assess the care and services they received. Additionally, two discharged children's files were reviewed to assess Casa Editha's compliance with permanency efforts. At the time of the review, two placed children were prescribed psychotropic medication. We reviewed their case files to assess for timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring.

We reviewed three staff files for compliance with Title 22 Regulations and County contract requirements, and conducted a site visit to assess the provision of quality of care and supervision.

## CONTRACTUAL COMPLIANCE

We found the following three areas out of compliance.

### Maintenance of Required Documentation and Service Delivery

- Based on our review, we found the non-verbal children were limited in participating in the development of their Needs and Services Plans (NSPs). Casa Editha staff had not made efforts toward developing mentors for children who did not have

visitations or important relationships, as required by the County contract. Two children had not had any visits. However, it was documented that Children's Social Workers (CSWs) had made attempts to contact family and/or others in an attempt to encourage them to visit to no avail. During the review, the Administrator said that the mother has not shown any interest in visiting the child. The father is unknown and there is no aunt or uncle involvement. Further, the mother calls very infrequently, for only a few seconds, says hello to the child and the child hands the phone back to staff. She has not wanted to visit the child. The Administrator reported that it has been years since the child has even seen the mother. Another child's mother is reportedly suspected of living out of the country. The Monitor provided the Casa Editha's Social Worker with the telephone number of the DCFS Mentoring Division for assistance.

**Recommendation**

Casa Editha management shall ensure that:

1. Efforts are made and documented to provide mentors for children who do not have important relationships in their lives.

**<u>Health and Medical Needs</u>**

- One child had not had her initial dental examination and there was no documentation of a prior examination within the last year, prior to placement at Casa Editha. The child does have an upcoming dental appointment in early 2013, at Children's Hospital of Los Angeles.

- Another child had not had her last follow-up annual dental examination in June of 2011. The child's next appointment was scheduled for October 31, 2012, at Children's Hospital of Los Angeles. The Administrator explained to the Monitor that Casa Editha has had difficulties obtaining timely appointments for children with severe and profound developmental and mental health issues. Casa Editha submitted documentation to the OHCMD verifying that the child did complete the follow-up annual examination on October 31, 2012.

  The Monitor provided the Administrator with a list of Public Health Nurses from the Pasadena DCFS Regional office area who could be contacted for resource assistance in obtaining timely dental appointments. The Monitor also suggested the Administrator contact Regional Center for additional resources for dental care. The Administrator stated that he would contact both the DCFS Public Health Nurses and Regional Center to find additional resources for timely appointments.

**Recommendations**

Casa Editha management shall ensure that:

2. All children receive timely initial dental examinations within the first 30 days of placement or within one year of the last annual examination.

3. All children's follow-up examinations are completed in a timely manner.

**Personnel Records**

- One staff member's personnel file did not contain documentation of a completed physical health screening and a test for tuberculosis (TB) in a timely manner. Title 22 Regulations require completion of a physical health screening and a TB test by not more than one year prior to, or seven days after employment; the physical health screening and TB test occurred 44 days after the date of employment.

**Recommendation**

Casa Editha management shall ensure that:

4. All new employees receive timely health screenings/TB clearances, in accordance with Title 22 Regulations.

**PRIOR YEAR FOLLOW-UP FROM DCFS OHCMD'S GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW**

The OHCMD's last compliance report dated June 13, 2010, identified 10 recommendations.

**Results**

Based on our follow-up, Casa Editha fully implemented eight of 10 recommendations. The previous recommendations were that:

- Personnel records are in compliance with Title 22 Regulations.
- Monthly contacts to the CSWs are appropriately documented in the NSPs.
- NSPs show documentation of group home efforts to follow the visitation plans.
- Mentors are developed for each child not having important relationships in their lives.
- Comprehensive updated NSPs are developed for each child.
- Initial dental examinations are conducted within 30 days of placement.
- Children being prescribed psychotropic medication receive monthly evaluations with the prescribing physician.
- Required discharge summaries are completed and that children are discharged in accordance to the permanency plan.
- All placed children make progress toward meeting their NSP goals prior to discharge.
- All staff have current Child Abuse Central Index clearance before working at the group home with children.

Casa Editha did not implement the recommendations regarding developing mentors for children who do not have important relationships in their lives; and completing initial dental examinations in a timely manner.

**Recommendation**

Casa Editha management shall ensure that:

5. All outstanding recommendations from the June 13, 2012 report for the 2011-2012 fiscal year monitoring review, which are noted in this report as Recommendations 1 and 2, are fully implemented.

## MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The Auditor-Controller conducted a fiscal review of Casa Editha Foundation, Inc., for calendar year 2010. The fiscal report dated July 10, 2012 identified $15,331 in unallowable expenditures, and $4885 in unsupported/inadequately supported expenditures.

The OHCMD Monitor contacted the DCFS Fiscal Monitoring Section and was informed that Casa Editha Foundation, Inc., has signed a repayment plan with the Los Angeles County Treasurer and Tax Collector, which will begin on January 15, 2013.

**CASA EDITHA FOUNDATION, INC., d.b.a. AVA LYN'S GROUP HOME**
**CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY**

**1756 North Hill Avenue**
**Pasadena, CA 91104**
**License # 191222785**
**Rate Classification Level: 10**

| | **Contract Compliance Monitoring Review** | **Findings: September 2012** |
|---|---|---|
| I | **Licensure/Contract Requirements** (9 Elements)<br><br>1. Timely Notification for Child's Relocation<br>2. Transportation Needs Met<br>3. Vehicle Maintained In Good Repair<br>4. Timely, Cross-Reported SIRs<br>5. Disaster Drills Conducted & Logs Maintained<br>6. Runaway Procedures<br>7. Comprehensive Monetary and Clothing Allowance Logs Maintained<br>8. Detailed Sign In/Out Logs for Placed Children<br>9. CCL Complaints on Safety/Plant Deficiencies | Full Compliance (ALL) |
| II | **Facility and Environment** (5 Elements)<br><br>1. Exterior Well Maintained<br>2. Common Areas Maintained<br>3. Children's Bedrooms/Interior Maintained<br>4. Sufficient Recreational Equipment/Educational Resources<br>5. Adequate Perishable and Non-Perishable Foods | Full Compliance (ALL) |
| III | **Maintenance of Required Documentation and Service Delivery** (10 Elements)<br><br>1. Child Population Consistent with Capacity and Program Statement<br>2. County Worker's Authorization to Implement NSPs<br>3. NSPs Implemented and Discussed with Staff<br>4. Children Progressing Toward Meeting NSP Case Goals<br>5. Therapeutic Services Received<br>6. Recommended Assessment/Evaluations Implemented<br>7. County Workers Monthly Contacts Documented<br>8. Children Assisted in Maintaining Important Relationships | 1. Full Compliance<br>2. Full Compliance<br>3. Full Compliance<br>4. Full Compliance<br>5. Full Compliance<br>6. Full Compliance<br>7. Full Compliance<br>8. Improvement Needed |

| | | |
|---|---|---|
| | 9. Development of Timely, Comprehensive Initial NSPs with Child's Participation<br>10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation | 9. Full Compliance<br>10. Full Compliance |
| IV | **Educational and Workforce Readiness** (5 Elements)<br>1. Children Enrolled in School Within Three School Days<br>2. GH Ensured Children Attended School and Facilitated in Meeting Their Educational Goals<br>3. Current Report Cards Maintained<br>4. Children's Academic or Attendance Increased<br>5. GH Encouraged Children's Participation in YDS/ Vocational Programs | Full Compliance (ALL) |
| V | **Health and Medical Needs** (4 Elements)<br>1. Initial Medical Exams Conducted Timely<br>2. Follow-Up Medical Exams Conducted Timely<br>3. Initial Dental Exams Conducted Timely<br>4. Follow-Up Dental Exams Conducted Timely | 1. Full Compliance<br>2. Full Compliance<br>3. Improvement Needed<br>4. Improvement Needed |
| VI | **Psychotropic Medication** (2 Elements)<br>1. Current Court Authorization for Administration of Psychotropic Medication<br>2. Current Psychiatric Evaluation Review | Full Compliance (ALL) |
| VII | **Personal Rights and Social/Emotional Well-Being** (13 Elements)<br>1. Children Informed of Group Home's Policies and Procedures<br>2. Children Feel Safe<br>3. Appropriate Staffing and Supervision<br>4. GH's efforts to provide Meals and Snacks<br>5. Staff Treat Children with Respect and Dignity<br>6. Appropriate Rewards and Discipline System<br>7. Children Allowed Private Visits, Calls and Correspondence<br>8. Children Free to Attend or not Attend Religious Services/Activities<br>9. Reasonable Chores | Full Compliance (ALL) |

| | | |
|---|---|---|
| | 10. Children Informed About Their Medication and Right to Refuse Medication<br>11. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care<br>12. Children Given Opportunities to Plan Activities in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)<br>13. Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities (GH, School, Community) | |
| VIII | **Personal Needs/Survival and Economic Well-Being**<br>(7 Elements)<br><br>1. $50 Clothing Allowance<br>2. Adequate Quantity and Quality of Clothing Inventory<br>3. Children's Involved in Selection of Their Clothing<br>4. Provision of Clean Towels and Adequate Ethnic Personal Care Items<br>5. Minimum Monetary Allowances<br>6. Management of Allowance/Earnings<br>7. Encouragement and Assistance with Life Book | Full Compliance (ALL) |
| IX | **Discharged Children** (3 Elements)<br><br>1. Children Discharged According to Permanency Plan<br>2. Children Made Progress Toward NSP Goals<br>3. Attempts to Stabilize Children's Placement | Full Compliance (ALL) |
| X | **Personnel Records**<br>(7 Elements)<br><br>1. DOJ, FBI, and CACIs Submitted Timely<br>2. Signed Criminal Background Statement Timely<br>3. Education/Experience Requirement<br>4. Employee Health Screening/TB Clearances Timely<br>5. Valid Driver's License<br>6. Signed Copies of Group Home Policies and Procedures<br>7. All Required Training | 1. Full Compliance<br>2. Full Compliance<br>3. Full Compliance<br>4. Improvement Needed<br>5. Full Compliance<br>6. Full Compliance<br><br>7. Full Compliance |

***AVA-LYN'S GROUP HOME***
***1756 N. HILL AVE.***
***PASADENA, CA 91104***
**PHONE: (626) 794-3916**
**FAX: (626) 696-3926**

Ms. Patricia Bolanos-Gonzalez, Manager
Children's Service Administrator II
Out of Home Care Management Division
County Of Los Angeles
Department of Children and Family Services
9230 Telestar Ave. Suite 216
El Monte, CA 91731

November 6, 2012

Dear Ms. Bolanos-Gonzalez

Attached please find an amended CAP (Corrective Action Plan) for Ava-Lyn's Group Home in response to the September 2012 monitoring review.

Sincerely,

Luis Araullo
Administrator

Stephen R. Goodman, M.S.W.
Facility Social Worker

III Maintenance Of Required Documentation and Service Delivery

22 – Does the agency assist children in maintaining important relationships? (PERMANENCY)

CAP: The Education & Mentoring Division of DCFS will be contacted to assist the group home in finding suitable mentors for the two group home clients who have no family visits or family contacts.
The division was contacted on 10-23-12 (see attached email). On 10-24-12 Group Home Social worker received a phone call from a representative from the education and mentoring division of DCFS who will assist the home in finding suitable referrals and resources that provide mentors.

Person responsible: Group Home Social Worker.

V- HEALTH AND MEDICAL NEEDS.

32 – Are initial dental exams conducted timely? (WELL- BEING)

Resident referred to was admitted to the group home from her family home on 8-15-12 as an emergency placement. We did not receive any dental or medical information from the CSW until 8-20-12 at which time an appointment was made at Children's Hospital Dental Clinic. The earliest appointment available at that time was on 2-26-13. The Dental Clinic was contacted again by the group home administrator on 10-24-12 and an earlier appointment of 1-4-2013 was scheduled. The dental Provider(s) will be contacted biweekly in order to attempt to arrange earlier appointments that fall within the DCFS guidelines. In addition to these efforts, public health nurses at the Pasadena Region of DCFS will be contacted for assistance in finding suitable dental service providers in addition to Children's Hospital Dental Clinic that are willing and able to treat developmentally disabled children. A list of 5 public health nurses was given to the group home recently by OHMC Administrator. Additionally, The San Gabriel/Pomona Regional Center will be contacted for assistance in

Finding suitable dental clinics. All efforts to arrange earlier appointments will be documented in a log

Person responsible: Group Home Administrator

33- Are required follow-up dental examinations conducted timely? (WELL-BEING)

Resident referred to had a follow-up exam scheduled over one year after her previous exam.

CAP: The dental providers(s) will be contacted biweekly in order to attempt to arrange earlier appointment that fall within the DCFS guidelines. In addition to these efforts, public health nurses at the Pasadena Region of DCFS will be contacted for assistance in finding additional dental service providers in addition to Children's Hospital Dental Clinic that are willing and able to treat developmentally disabled children. A list of 5 public health nurses was given to the group home recently by OHMC Administrator. In addition, The San Gabriel /Pomona Regional Center will be contacted for assistance in finding suitable dental clinics. All efforts to arrange earlier appointments will be documented in a log.

Person Responsible: Group Home Administrator.

X- Personnel Records

62 – Have employees received timely health screenings/TB clearance?

Employee referred to was hired 11/7/1994 but did not have a health screening until 12/21/94.

CAP: All group home staff will have a completed Health Screening and TB test prior to employment at the group home.

Person Responsible: Group Home Administrator.

**Subject:** Mentors for group home residents

**From:** Luis Araullo (avalynhome@yahoo.com)

**To:** hottje@dcfs.lacounty.gov;

**Date:** Tuesday, October 23, 2012 4:56 PM

Dear Ms. Hottenroth

We are requesting assistance from your division to find mentors for two of our group home residents. One is a female age 17 and the other is a male age 18. Both residents are Autistic and developmentally disabled. They have had no contacts with family members for many years.
Mr Donald Luther Of OHMC recommended that we contact you
We would greatly appreciate your advise and assistance.

Thank you,

Steve Goodman, M.S.W.
Social Worker
Ava-Lyn's Group Home
1756 North Hill Ave
Pasadena CA 91104
Phone: (626) 794-3916
Cell: (626) 318-7376