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July 27, 2016

To: Supervisor Hilda L. Solis, Chair
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Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

LUVLEE'S RESIDENTIAL CARE, INC. DBA NEW DAWN GROUP HOME QUALITY ASSURANCE REVIEW

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a Quality Assurance Review (QAR) of Luvlee's Residential Care, Inc. dba New Dawn Group Home (the Group Home) in December 2015. The Group Home is a Rate Classification Level 11 and has two sites, one located in the First Supervisorial District and the other located in San Bernardino County. The Group Home provides services to the County of Los Angeles DCFS placed children and Probation youth. According to the Group Home's Program Statement, its stated purpose is, "stabilizing the child within the group home setting and to establish trust and security of knowing that they are cared for unconditionally."

The QAR looked at the status of the placed children's safety, permanency and well-being during the most recent 30 days and the Group Home's practices and services over the most recent 90 days. The Group Home scored at or above the minimum acceptable score in 8 of 9 focus areas: Permanency, Placement Stability, Visitation, Engagement, Service Needs, Assessment & Linkages, Teamwork, and Tracking & Adjustment. The OHCMD noted an opportunity for improved performance in the focus area of Safety.

In January 2016, the OHCMD Quality Assurance Reviewer discussed the results of the QAR with the Group Home and provided the Group Home with technical support to address methods for improvement in the area of Safety. The Group Home provided the attached approved Quality Improvement Plan (QIP) addressing the recommendations noted in this report.

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

PLB:KR
KDR:rds

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Calvin C. Remington, Interim Probation Chief
Sean Hardge, Director, Luvlee's Residential Care, Inc. Group Home
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Lenora Scott, Regional Manager, Community Care Licensing Division

LUVLEE'S RESIDENTIAL CARE, INC. DBA NEW DAWN GROUP HOME
QUALITY ASSURANCE REVIEW (QAR)
FISCAL YEAR 2015-2016

SCOPE OF REVIEW

The Out-of-Home Care Management Division (OHCMD) conducted a Quality Assurance Review (QAR) of Luvlee's Residential Care, Inc. dba New Dawn Group Home (the Group Home) in December 2015. The purpose of the QAR is to assess the Group Home's service delivery and to ensure that the Group Home is providing children with quality care and services in a safe environment, which includes physical care, social and emotional support, education and workforce readiness and other services to protect and enhance their growth and development.

The QAR is an in-depth case review and interview process designed to assess how children and their families are benefiting from services received and how well the services are working. The QAR utilizes a six-point rating scale as a *yardstick* for measuring the situation observed in specific focus areas. The QAR assessed the following focus areas:

Status Indicators:

- Safety
- Permanency
- Placement Stability
- Visitation

Practice Indicators:

- Engagement
- Service Needs
- Assessment & Linkages
- Teamwork
- Tracking & Adjustment

For Status Indicators, the QAR focuses on the focus child's functioning during the most recent 30-day period and for Practice Indicators, the QAR focuses on the Group Home's service delivery during the most recent 90-day period.

For the purpose of this QAR, interviews were conducted with three focus children, three Department of Children and Family Services (DCFS) Children's Social Workers (CSWs) and three Group Home staff members.

At the time of the QAR, the Group Home served 12 DCFS placed children. There was no Probation placed youth. The focus children's average number of placements was four, their overall average length of placement was 10 months and their average age was 17. The focus children were randomly selected. One of the focus children was included as part of the sample for the Contract Administration Division's (CAD's) 2015-2016 Contract Compliance Review.

QAR SCORING

The Group Home received a score for each focus area based on information gathered from on-site visits, agency file reviews, DCFS court reports and updated case plans, and interviews with the Group Home staff, DCFS CSWs, service providers and the focus children. The minimum acceptable score is 6 in the area of Safety and 5 in all remaining areas.

Focus Area	Minimum Acceptable Score	Group Home QAR Score	Group Home QAR Rating
Safety - The degree to which the Group Home staff ensures that the focus children are free of abuse, neglect and exploitation by others in his/her placement and other settings.	6	4 - Fair Safety Status	The focus children have a minimally safe living arrangement with the present caregivers. Protective strategies are at least minimally adequate in reducing risks of harm. The focus children are at least minimally free from danger in other settings.
Permanency - The degree to which the focus children are living with caregivers, who are likely to remain in this role until the focus children reach adulthood, or the focus children are in the process of returning home or transitioning to a permanent home and the focus children, the Group Home staff, caregivers, DCFS CSWs and if applicable, Department of Probation Officers (DPOs) support the plan.	5	5 - Good Status	The focus children have substantial permanence. The focus children live in a family setting that the focus children, Group Home staff and team members have confidence will endure lifelong.

Focus Area	Minimum Acceptable Score	Group Home QAR Score	Group Home QAR Rating
Placement Stability - The degree to which the Group Home staff ensures that the focus children's daily living, learning and work arrangements are stable and free from risk of disruptions. Known risks are being managed to achieve stability and reduce the probability of future disruptions.	5	5 - Good Stability	The focus children have substantial stability in placement and school settings with only planned changes and no more than one disruption in either setting over the past 30 days.
Visitation - The degree to which the Group Home staff support maintaining important connections with significant family members/Non-Related Extended Family Members (NREFMs) through appropriate visitation and other means.	5	5 - Substantially Acceptable Maintenance of Visitation and Connections	Generally effective family connections are being sought for all significant family members/NREFMs through appropriate visits and other connecting strategies. All appropriate family members/NREFMs have regular visits.
Engagement - The degree to which the Group Home staff working with the focus children and their family members/NREFMs and other team members for the purpose of building a genuine, trusting and collaborative working relationship with the ability to concentrate on the focus children's strengths and needs.	5	5 - Good Engagement Efforts	To a strong degree, a rapport has been developed, such that the Group Home staff, DCFS CSWs, DPOs (if applicable) and the focus children feel heard and respected. Reports indicate that good, consistent efforts are being used.

Focus Area	Minimum Acceptable Score	Group Home QAR Score	Group Home QAR Rating
Service Needs - The degree to which the Group Home staff involved with the focus children work toward ensuring the focus children's needs are met and identified services are being implemented and supported and are specifically tailored to meet the focus children's unique needs.	5	5 - Good Supports and Services	A good and substantial array of supports and services substantially matches intervention strategies identified in the focus children's case plans. The services are generally helping the focus children make progress toward planned outcomes.
Assessment & Linkages - The degree to which the Group Home staff involved with the focus children and their family members/NREFMs understand the focus children's strengths, needs, preferences and underlying needs and services provided are regularly assessed to ensure progress is being made toward case plan goals.	5	5 - Good Assessment and Understanding	The focus children's functioning and support systems are generally understood. Information necessary to understand the focus children's strengths, needs and preferences is frequently updated.
Teamwork - The degree to which the "right people" for the focus children and their family members/NREFMs, have formed a working team that meets, talks and/or makes plans together.	5	5 - Good Teamwork	The team contains most of the important supporters and decision-makers in the focus children's lives, including informal supports. The team has formed a good, dependable working system that meets, talks and/or plans together.

Focus Area	Minimum Acceptable Score	Group Home QAR Score	Group Home QAR Rating
Tracking & Adjustment - The degree to which the Group Home staff involved with the focus children and their family members/NREFMs are carefully tracking the progress that the focus children are making, changing family circumstances, attainment of goals and planned outcomes.	5	5 - Good Tracking and Adjustment Process	Intervention strategies, supports and services being provided to the focus children are generally responsive to changing conditions. Frequent monitoring, tracking and communication of the focus children's status is occurring.

OHCMD conducted the last QAR of the Group Home in May 2015 and noted an opportunity for improvement in the focus area of Teamwork. In December 2015, the Quality Assurance Reviewer met with the Group Home to discuss the results of the QAR and to provide the Group Home with technical support to address methods for improvement in this area. Based on the information below, it appears that the Group Home showed improvement in the area of Teamwork. However, the OHCMD noted an opportunity for improved performance in the area of Safety on their 2015-2016 QAR.

STATUS INDICATORS
(Measured over last 30 days)

Status Indicators	Safety	Permanency	Placement Stability	Visitation
2014-2015 Scores	6	5	6	5
2015-2016 Scores	4	5	5	5

In the area of Safety, the OHCMD found that the Group Home scored below the minimum acceptable score, due to child safety concerns related to supervision of the placed children. The concerns involved children bringing contraband into the Group Home and aggressive behavior by the placed children towards staff and other placed children at the Group Home. Incidents reported by the Group Home involved the placed children returning to the Group Home from off-grounds visits smelling of marijuana. Additionally, a placed child was found smoking marijuana in a Group Home bedroom. The Group Home has implemented a plan to conduct more thorough searches for contraband and illegal substances. One focus child had engaged in incidents of aggressive behavior. In one incident, the focus child was verbally abusive, threatened to harm staff and tried to take the Group Home keys from staff in efforts to lock staff out of the Group Home. Law enforcement was called and responded to assist in de-escalating the situation. In another incident, the focus child was involved in a physical altercation with a placed child at the Group Home. The focus child was punched in the face

and sustained a black eye; he refused medical treatment. No arrests were made in any of the incidents. The OHCMD Quality Assurance Reviewer met with the Group Home to discuss child safety and the importance of maintaining a safe home environment, as well as develop strategies to ensure safety for the placed children that would be successful for the Group Home.

In the areas of Permanency, Placement Stability and Visitation, the OHCMD found that the Group Home is providing a good quality of services to the focus children. The permanency goals established by the DCFS CSWs are supported by the Group Home. The permanency plan for all three focus children is Planned Permanent Living Arrangement. The Group Home is assisting the focus children in reaching their permanency goals. The Group Home staff is teaching the focus children independent living skills, such as shopping and meal preparation, as well as discussing future options with the focus children, including transitional housing, educational and career goals. One focus child has a part-time job. He shared that he would like to transition out of care to a transitional housing. The Group Home staff shared that they receive training to assist them in identifying the needs and strengths of the placed children and how to be supportive of the placed children. The focus children have established positive relationships with key adult supporters such as the Group Home staff and Group Home Social Workers. The Group Home staff supports the maintenance of family connections and adheres to the court-ordered visitation plans for the focus children, providing transportation and monitoring visits, when necessary. One focus child has regular visits with his mother and siblings. The Group Home encourages the visits between this focus child and his family members. The focus child said he looks forward to the visits and enjoys when he goes on outings with his family members. The second focus child has weekly visits with his stepfather and has occasional visits with his mother and brother. The third focus child does not want to visit his adoptive mother and does not wish to reunify with her. He has a mentor with whom he visits twice per month.

PRACTICE INDICATORS
(Measured over last 90 days)

Practice Indicators	Engagement	Service Needs	Assessment & Linkages	Teamwork	Tracking & Adjustment
2014-2015 Scores	5	5	6	4	5
2015-2016 Scores	5	5	5	5	5

In the areas of Engagement, Service Needs, Assessment & Linkages, and Tracking & Adjustment, the Group Home Social Workers make good efforts to engage the focus children and key people in decisions that are being made for them. The focus children reported that they have a good connection with the Group Home staff and their DCFS CSWs. The DCFS CSWs reported that they are in regular contact with the Group Home Social Workers who keep them informed of the focus children's progress, via telephone calls, e-mails, and during their visits to the focus children. The Group Home continues to provide a good array of

services to the focus children. Interventions strategies identified in the case plan and Needs and Services Plans (NSPs) match the services provided. The Group Home continues to assess the focus children's needs and provides appropriate interventions for them to function effectively in their daily settings. The focus children are offered tutoring, Independent Living Skills training in cooking, budgeting, job training and using public transportation. The focus children also participate in individual and group therapy at the Group Home. One focus child is a client of the Regional Center. The Group Home ensures the focus child attends individual therapy sessions provided by the Regional Center. The focus child's DCFS CSW shared that the focus child is making progress, and his behavior has improved. Another focus child receives tutoring at the Group Home, as well as independent living services. This focus child was also referred to the Department of Mental Health for evaluation and services. The Group Home staff communicates their monitoring and tracking of the focus children's status with each other, as well as with the DCFS CSWs. The Group Home tracks the focus children's progress through weekly individual and group meetings. The focus children's status, concerns and progress in treatment and toward achieving NSP goals are discussed. The Group Home treatment team makes modifications to services or treatment goals for the focus children, when necessary and appropriate. The Group Home's efforts to assess the needs of the placed children through monitoring of behaviors and progress was demonstrated in the situation of the focus child who was displaying increased aggression. The Group Home staff reported their concerns to the focus child's psychiatrist who adjusted the focus child's psychotropic medication, and supervision of the focus child was increased. The focus child's behavior has since stabilized.

In the area of Teamwork, the OHCMD found that the Group Home had implemented the 2014-2015 QIP. In the prior QAR, the focus children reported they had not participated in team meetings. The Group Home was not having team meetings that included the Group Home staff, the focus children or key parties in the children's lives. Now, the Group Home conducts treatment team meetings on a quarterly basis to discuss the focus children's behavior, their daily routines, chores, peer and adult relationships, quality of family visits, progress toward achieving their treatment plan goals and status of their discharge plans. The DCFS CSWs reported meeting monthly with the focus children, the Group Home Social Worker and the Group Home facility manager to address the focus children's concerns and treatment plan goals. The focus children interviewed reported they are included in team meetings to assess their needs and necessary services to assist them in making progress at the Group Home.

NEXT STEPS TO SUSTAIN SUCCESS AND OVERCOME CURRENT CHALLENGES

In April 2016, the OHCMD provided the Group Home with technical support related to the CAD's 2015-2016 Contract Compliance Review findings in the areas of Personal Needs/Survival and Economic Well-Being, Discharged Children, and Personnel Files. Technical support was provided on how the Group Home can ensure compliance with Title 22 Regulations, that children get enough food to eat and children with special dietary needs are provided with appropriate accommodations, compliance with the children's permanency plans, children are discharged in accordance with their permanency plan or to a lower level of

care, and that Group Home staff meet educational and/or experience requirements in accordance with the Group Home's Program Statement and Title 22 Regulations.

In April 2016, the Quality Assurance Reviewer met with the Group Home to discuss the results of the QAR, and to provide the Group Home with technical support addressing methods on improving in the area of Safety. The Group Home submitted the attached QIP. The OHCMD Quality Assurance staff will continue to provide ongoing technical support, training and consultation to assist the Group Home in implementing their QIP.

Luvlee's Residential Care, Inc.
New Dawn
Established 1988
P.O. Box 2232 - Phone (909) 594-2762 Fax: (909) 594-2922

April 8, 2016

Patricia Bolanos-Gonzalez – CSA II
Out-of-Home Care Management Division
9320 Telstar Ave., Room 216
El Monte, CA 91731

RE: QUALITY IMPROVEMENT PLAN

Dear Patricia Bolanos,

Luvlee's Residential Care, Inc. DBA: New Dawn is submitting the following Quality Improvement Plan (QIP) for your review, based on the Review conducted December 2015. It is our goal to ensure that New Dawn is providing quality services to the youth in our care. The following individuals will ensure that New Dawn implements and makes the suggested changes: Executive Director, Executive Assistant and Facility Manager. Our improvement plan will begin effectively April 28, 2016, after our Safety and Supervision Staff Meeting.

I. **ISSUE:** Safety

II. **PURPOSE:** To ensure that the focus children are free of abuse, neglect, and exploitation by others in his/her placement and other settings.

III. **FINDINGS:** The focus child reviewed had repeatedly violated policies regarding drugs, AWOL, and physical confrontations.

IV. **PROCEDURES:**

In order to address each of the resident's safety concerns:

1. **Supervision of placed children**
   - Trainings will be conducted quarterly in order to reinforce proper monitoring and supervision to ensure the residents safety in the facilities at all times. The trainings will entail the importance of proper supervision, such as, watching, listening, and knowing the resident's whereabouts at all times; knowing the population we serve and anticipating their needs to reduce disruptive behaviors, and provide redirection when needed to ensure the residents safety is priority. As result, all staff are required to log the whereabouts and activities of each youth in the communication log at a minimum of every 30 minutes.

2. **Residents bringing contraband into the Group Home**
   - Staff will conduct random room searches, search residents upon entry into the facility, in accordance to their needs and service plans, and conduct searches daily to ensure contraband is not brought into the facility. In addition, staff will receive a training on how to properly conduct a room search.

3. **Assaultive behavior by a resident toward another resident and/or Staff.**
   - All staff is Pro-Act (Professional Assault Crisis Training) certified and can only follow Pro-Act procedures to address assaultive behaviors. Pro-Act is a technique design to help provide hands-off facilities with the necessary understanding on how to avoid or reduce the need for restraint. Pro-ACT

focuses on maintaining the safety and dignity of the client, while keeping the staff and those around staff safe. The training will provide staff with the necessary frameworks to help foster professional judgment, critical thinking, assessment, problem solving, and teamwork. De-escalation and pro-active techniques will be added in order to ensure incidents do not get out of control: these techniques include:

1. Utilize verbal De-escalation: an intervention for use with people who are at risk for aggression.
    - Using calm language, along with other communication techniques (listening, speaking, and hearing) to diffuse, re-direct, or de-escalate a conflict situation
2. Observe and Interrupt
3. Recognizing Warning Signals:
    - Behavior changes
4. Listen
5. Acknowledgement
    - Relay back to the youth acknowledging their feelings are understandable
6. Allow Silence
    - Give youth time to reflect
7. Develop a Plan
    - Prevention

Luvlee's Residential Care, Inc. conducts a Pro-Act training once a year in the month of August (the next training will be held this year in August) to all staff as a group, thereafter; individual or small group trainings are given to new staff member(s) hired after the August training.

Luvlee's will examine our intake procedure to ensure children are appropriate for the agency and the population we serve; the Executive Director and In-House Social Workers interviews prospected residents. In addition, Team Treatment Meetings will be conducted as soon as possible to establish a plan of action for residents exhibiting disruptive behavior. Group home staff involved in the Team Treatment Meeting: In-House Social Worker, County Social Worker, Administrator, Resident, and other staff as needed. Also, all residents will receive training to help reduce repeat occurrences in relation to drugs, AWOL, and physical confrontation violations. The trainings will include:

1. Effective communication skills; this training will entail:
    - clarify what communication is and what makes it effective
    - demonstrate the importance of being a good listener and to learn the skills needed to listen well.
    - learn what body language is (nonverbal communication) and how to use it
    - identify positive and negative ways of communicating
    - practice expressing thoughts and feelings through "I statements".
    - learn the difference between assertive, aggressive and passive behavior
2. How to deal with anger and frustration; this training will entail:
    - explore the relationship between anger and violence
    - ways to handle anger
    - identify causes of violence, the link between anger and violence, and the motivation to manage anger nonviolently
    - learn how to identify and avoid triggers
    - learn positive coping techniques
    - learn how to express anger appropriately
3. Alcohol & Drug Abuse; training will entail:
    - what is alcohol/drug dependency?
    - how alcohol/drug affect health (mind & body)

- how alcohol/drug relationships
- crimes and alcohol/drug abuse
- prevention & treatment

Along with the therapy the residents are receiving within the group home, the team will devise a plan for each individual youth that will help to stabilize the resident while in our care. The Facility Manager will be responsible to ensure that continuous supervision and safety procedures are being met, by monitoring the staff's supervision skills and will redirect when needed and the Administrator will conduct routine visits at each facility monitoring day to day tasks.

Sincerely,

Sean Hardge,
Executive Director