COUNTY OF LOS ANGELES
PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY – DOWNEY, CALIFORNIA 90242
(562) 940-2501

CALVIN C. REMINGTON
Interim Chief Probation Officer

May 27, 2016

TO: Supervisor Hilda L. Solis, Chair
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: Calvin C. Remington
Interim Chief Probation Officer

SUBJECT: **HUMANISTIC FOUNDATION, INC. dba NEW CONCEPT GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW**

The Department of Probation, Placement Permanency & Quality Assurance (PPQA), Group Home Monitor (GHM), conducted a review of New Concept Group Home, operated by Humanistic Foundation, Inc., in January 2016. New Concept Group Home has one (1) site, located in the Second Supervisorial District of Los Angeles County. They provide services to both Los Angeles County Probation and the Department of Children and Family Services (DCFS) foster children. According to New Concept Group Home's program statement, its purpose is to treat boys who exhibit behavior, social and emotional difficulties.

New Concept Group Home is an 8-bed site and is licensed to serve a capacity of eight (8) boys, 12-17 years of age. At the time of review, New Concept Group Home served five (5) Los Angeles County Probation and three (3) DCFS children. Based on the sample size, the placed children's overall average length of placement was four (4) months, and their average age was 16 years.

Five (5) children were randomly selected for the interview sample that included four (4) Probation and one (1) DCFS children. There was one (1) Probation child in the sample who was prescribed psychotropic medication, and that case was reviewed for timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring. Additionally, two (2) Probation and one (1) DCFS discharged children's files were reviewed to assess compliance with permanency efforts, and four (4) staff files were also reviewed for compliance with Title 22 Regulations and County Contract Requirements.

SUMMARY

During the PPQA/GHM review, the interviewed children generally reported feeling safe at New Concept Group Home, and that they were provided with good care and appropriate services, were comfortable in their environment and treated with respect and dignity. New Concept Group Home was in compliance with six (6) of the 10 areas of the Contract Compliance Review: Licensure/Contract Requirements; Health and Medical Needs; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Records.

PPQA/GHM noted deficiencies in four (4) out of the 10 areas, and although there were no egregious findings or child safety issues in any of the areas, the same deficiencies from the last review period were found in two (2) of the same areas. It was noted in the area of "Maintenance of Required Documentation and Service Delivery" that New Concept Group Home needed to ensure that the children are progressing towards meeting their Needs and Services Plan (NSP) case goals, need to develop comprehensive Initial and Updated NSPs and need to provide accurate documentation under Case Plan Goal and Concurrent Plan Goal. It was also noted in the area of "Educational and Workforce Readiness" that New Concept Group Home needed to ensure that the children's academics or attendance increases.

In the area of "Facility and Environment", deficiencies were found in the common areas and the children's bedrooms, in that, New Concept needed to repair loose electrical outlet covers and ensure smoke detectors are in proper working condition in two (2) of the bedrooms. Deficiencies were also noted in the area of "Discharged Children", in that, New Concept Group Home needed to ensure that the discharged child made progress toward NSP goals.

REVIEW OF REPORT

On February 11, 2016, Probation PPQA Monitor Leng Lim held an Exit Conference with New Concept Group Home Administrator Sueretta Small. Administrator Small agreed with the review findings and recommendations and was receptive to implementing systemic changes to improve their compliance with regulatory standards, as well as address the noted deficiencies in a Corrective Action Plan (CAP).

New Concept Group Home provided the attached approved CAP addressing the recommendations noted in this compliance report. A follow-up visit was conducted and all deficiencies cited in the CAP were corrected or systems were put in place to avoid future deficiencies; however, due to the same repeated deficiencies, a quarterly follow up will be conducted for NSPs and Academic and Attendance progress to ensure the agency's adherence to their CAP in these areas. Assessment for continued implementation of recommendations will be conducted during the next monitoring review.

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

If additional information is needed or any questions or concerns arise, please contact Director Lisa Campbell-Motton, Placement Permanency and Quality Assurance, at (323) 240-2435.

CCR:REB
LCM:ae

Attachments

c: Sachi A. Hamai, Chief Executive Officer
Lori Glasgow, Executive Officer, Board of Supervisors
John Naimo, Auditor-Controller
Phillip L. Browning, Director, Department of Children and Family Services
Public Information Office
Audit Committee
Sybil Brand Commission
Latasha Howard, Probation Contracts
Sueretta Small, New Concept Group Home Assistant Executive Director
Community Care Licensing

NEW CONCEPT GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

LICENSE NUMBER: 191800491
RATE CLASSIFICATION LEVEL: 12

	Contract Compliance Monitoring Review	Findings: January 2016
I	**Licensure/Contract Requirements** (9 Elements)	
	1. Timely Notification for Child's Relocation 2. Transportation Needs Met 3. Vehicle Maintained In Good Repair 4. Timely, Cross-Reported SIRs 5. Disaster Drills Conducted & Logs Maintained 6. Runaway Procedures 7. Comprehensive Monetary and Clothing Allowance Logs Maintained 8. Detailed Sign In/Out Logs for Placed Children 9. CCL Complaints on Safety/Plant Deficiencies	Full Compliance (ALL)
	Facility and Environment (5 Elements)	
	1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms 4. Sufficient Recreational Equipment/Educational Resources 5. Adequate Perishable and Non-Perishable Foods	1. Full Compliance 2. Improvement Needed 3. Improvement Needed 4. Full Compliance 5. Full Compliance
III	**Maintenance of Required Documentation and Service Delivery** (10 Elements)	
	1. Child Population Consistent with Capacity and Program Statement 2. County Worker's Authorization to Implement NSPs 3. NSPs Implemented and Discussed with Staff 4. Children Progressing Toward Meeting NSP Case Goals 5. Therapeutic Services Received 6. Recommended Assessment/Evaluations Implemented 7. County Workers Monthly Contacts Documented 8. Children Assisted in Maintaining Important Relationships 9. Development of Timely, Comprehensive Initial NSPs with Child's Participation 10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Improvement Needed 10. Improvement Needed

IV	**Educational and Workforce Readiness** (5 Elements) 1. Children Enrolled in School Within Three School Days 2. GH Ensured Children Attended School and Facilitated in Meeting Their Educational Goals 3. Current Report Cards Maintained 4. Children's Academic or Attendance Increased 5. GH Encouraged Children's Participation in YDS/ Vocational Programs	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance
V	**Health and Medical Needs** (4 Elements) 1. Initial Medical Exams Conducted Timely 2. Follow-Up Medical Exams Conducted Timely 3. Initial Dental Exams Conducted Timely 4. Follow-Up Dental Exams Conducted 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** (13 Elements) 1. Children Informed of Group Home's Policies and Procedures 2. Children Feel Safe 3. Appropriate Staffing and Supervision 4. GH's efforts to provide Meals and Snacks 5. Staff Treat Children with Respect and Dignity 6. Appropriate Rewards and Discipline System 7. Children Allowed Private Visits, Calls and Correspondence 8. Children Free to Attend or not Attend Religious Services/Activities 9. Reasonable Chores 10. Children Informed About Their Medication and Right to Refuse Medication 11. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care 12. Children Given Opportunities to Plan Activities in	Full Compliance (ALL)

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

HUMANISTIC FOUNDATION (NEW CONCEPT) GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2015-2016

SCOPE OF REVIEW

The purpose of this review was to assess New Concept Group Home compliance with the County contract and State regulations and include a review of New Concept'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 (5) placed children were selected for the sample, four (4) Probation foster children and one (1) DCFS foster child. Placement Permanency & Quality Assurance (PPQA), Group Home Monitor (GHM) interviewed each child and reviewed their case files to assess the care and services they received. At the time of this review, one (1) Probation foster child was prescribed psychotropic medication. The case file was reviewed to assess for timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring. Additionally, three (3) discharged children's files, two (2) Probation and one (1) DCFS, were reviewed to assess New Concept Group Home's compliance with permanency efforts

Four (4) staff files were reviewed for compliance with Title 22 Regulations and County contract requirements, and a site visit was conducted to assess the provision of quality care and supervision.

CONTRACTUAL COMPLIANCE

The following four (4) areas were out of compliance.

Facility and Environment

An inspection of the exterior and interior of New Concept Group Home revealed

some cosmetic deficiencies in the Common Area and the Children's Bedrooms that require correction.

- In the Hallway Bathroom, the vanity mirror was not safely secured against the wall, due to two (2) broken mirror fasteners.

- In the Children's Master Bedroom, there was a loose electrical outlet cover that was not secured against the wall, and the smoke detector was inoperable due to a low battery. In Children's Bedroom #2, there was also a loose electrical outlet cover that was not secured against the wall and the smoke detector was inoperable due to being disconnected.

Recommendation

New Concept management shall ensure that:

1. All of the aforementioned physical plant deficiencies cited in the common areas are corrected and repaired in accordance with CCL, Title 22 Regulations, which states that all Group Home sites are to be "clean, safe, sanitary and in good repair at all times."

2. All of the aforementioned physical plant deficiencies cited in the children's bedrooms are corrected and repaired in accordance with CCL, Title 22 Regulations, which states that all Group Home sites are to be "clean, safe, sanitary and in good repair at all times."

Maintenance of Required Documentation and Service Delivery

Five (5) children's files were reviewed for Needs and Services Plans (NSPs). Five (5) Initial NSPs were reviewed; however, only three (3) children have Updated NSP reports. The other two (2) children were placed for less than three (3) months and did not have an Updated NSP, at the time of this monitoring review period. The following deficiencies were found:

- Of the three (3) children's Updated NSPs reviewed, two (2) revealed that the children have not progressed towards meeting their case goals, due to an increase in substance abuse usage, physical aggression towards peers and defiant behaviors toward staff. Therefore, New Concept Group Home was not in compliance with the element, "Children Progressing Towards Meeting NSP Case Goals?"

- All five (5) Initial NSPs reviewed lacked the required "SMART" goals. The children's goals were not child specific, measurable, and attainable. The Initial NSP files were also incomplete, lacking the necessary information

required, in accordance with the NSP template. Therefore, New Concept Group Home was not in compliance with the element, "Development of Timely, Comprehensive Initial NSPs with Child's Participation."

For the first Initial NSP reviewed, the year provided on the "Date of admission" was incorrectly listed as "12/01/16", and should be 12/01/15. The "Reason for Placement" section was written vaguely and did not address the main reasons why the child was being placed. The "yes" and "no" boxes on the "Psychotropic Medication" section were both simultaneously checked off; however, the child is not on psychotropic medication. The "Strengths of the child" subsection of the Education Section provided only generic information, not child specific and does not identify the child's actual educational strengths.

In the second Initial NSP reviewed, the "Reason for Placement" section was also vague and did not address the main reasons why the child was being placed. The "Strengths of the child" subsection of the Education Section was generic and did not identify the child's actual educational strengths. The child reported to the Probation Monitor during the interview process that he has a history of truancy, this was not addressed on the "Identified educational needs" subsection of the Education Section. The "Reason for Goal" subsection on the Outcome Goal #2 – Permanency Planning was incomplete. Lastly, the child's history of truancy was not addressed as an issue in the child's educational goals.

In the third Initial NSP reviewed, New Concept failed to address in the comment section that the child's initial medical and dental exams were not completed within the required time frame due to the child voluntary rejecting his initial medical and dental exams. The "Academic achievements and extra-curricular activities" subsection of the Education Section and the "If applicable, please list any special costs associated with the services to the youth and how your agency will accommodate this cost" subsection of the NSP Visitation section were incomplete. Lastly, the "Reason for Goal" section on the Outcome Goal #2 – Permanency Planning was incomplete.

In the fourth Initial NSP reviewed, the child's case plan was for Family Reunification (FR) with the "parents", but New Concept Group Home failed to specify whether FR will be with the child's mother or father, as they are not together. New Concept Group Home also failed to address in the comment section that the child's initial medical and dental exams were not completed within the required time frame, due to the child voluntarily rejecting his initial medical and dental exams. The "Strengths of the child" subsection of the Education Section provided generic information and did

not identify the child's actual educational strengths. The "Reason for Goal" section on Outcome Goal #2 – Permanency Planning was incomplete. Lastly, there was no Independent Living Program (ILP) goal listed as an "Outcome Goals" for the child, as he is over the age of 17.5 years old.

In the fifth Initial NSP reviewed, the child's case plan is for FR with the "parents"; however, New Concept Group Home failed to provide information that the child's mother lives in Mexico and the father's whereabouts are unknown, making FR not feasible. The child's Concurrent Case-Plan Goal should be Legal Guardianship or Adoption and not "PPLA/Transition", as the child expressed interest in living with the maternal uncle.

- All three (3) Updated NSP files reviewed lacked the required "SMART" goals and the children's goals were not child specific, measurable, and attainable. The Updated NSPs were also incomplete, lacking the necessary information required in accordance with the NSP template. Therefore, New Concept Group Home was not in compliance with the element, "Development of Timely, Comprehensive Updated NSPs with Child's Participation."

  For the first Updated NSP reviewed, the child's progress on "Adjustment to Placement" section reflects that the child's behavior has "drastically declined" and "significantly changed for the worst", but New Concept Group Home failed to provide any specifics. The "Are school records complete?" section was checked off "no"; however, there was no information provided on plans to obtain the child's records. The "Describe child's visitation with his/her parent(s)/family of origin/guardian over the past three months" and "Have efforts been made to unite siblings who are placed under your care?" subsections in the Visitation/Involvement/Contact with Family of Origin/Guardian section were incomplete. The "Address the GH/FFA Contact with the CSW/DPO over the past three months (Includes dates)" section was inaccurately completed. New Concept Group Home provided dates when the Probation caseworker visited the child, instead of addressing when the Group Home contacted the Probation caseworker. New Concept Group Home also failed to list any Life Skills Training that the child received by the Life Skills Coach on the Life Skills Training section. The "Start Date" and "Modified Date" listed for Outcome Goals #1 to #5, all have one date listed as "11/26/15", which is an indication that the date was cut and pasted from the previous NSP and not updated. Lastly, there was no Independent Living Program (ILP) goal listed as an "Outcome Goal" for the child, as he is over the age of 17.5 years old.

In the second Updated NSP reviewed, the child's Case Plan Goal (Permanency) should be PPLA/Transition and not FR, as both parent's parental rights were terminated and the child will be 18 years old in March 2016. The "Strengths of the child" subsection of the Education Section was generic and did not identify the child's actual educational strengths. The "Describe child's visitation with his/her parent(s)/family of origin/guardian over the past three months" subsection in the Visitation/Involvement/Contact with Family of Origin/Guardian section was inaccurately completed and New Concept Group Home failed to "describe" the child's visitation with his parents as required. Lastly, the "Address the GH/FFA Contact with the CSW/DPO over the past three months (Includes date)" section was incomplete.

In the third Updated NSP reviewed, the "Adjustment to Placement" section on the first Updated Quarterly NSP was incomplete. The Case Plan Goal (Permanency) on the 1st, 2nd, and 3rd Updated Quarterly NSPs should be FR for the first 12 months and not Legal Guardianship, as there is no indication that the parents are deceased or had their parental rights terminated. The "Report progress of child's educational goals over the past three months" section on the first Updated Quarterly NSP indicated that the child had "behavior problems" and was "expelled" from school, but New Concept failed to provide specific details of those accounts. The "Report progress of child's educational goals over the past three months" section on the second Updated Quarterly NSP was never updated and contained the same information from the first Quarterly NSP. The child attended his new school from 8/18/15 to 9/19/15, and his progress was not reported on the "Educational Progress" section on his second Updated Quarterly NSP. The "Describe child's visitation with his/her parent(s)/family of origin/guardian over the past three months" subsection in the Visitation/Involvement/Contact with Family of Origin/Guardian sections on the first, second and third Updated Quarterly NSPs was incomplete. The "Describe involvement of child with other individuals who are important to the child over the past three months" section on the second and third Updated Quarterly NSPs contained the same information from the 1st Updated Quarterly NSP. The "Address the GH/FFA Contact with the CSW/DPO over the past three months (Includes dates)" section on the first, second and third Updated Quarterly NSPs was also incomplete.

New Concept management shall provide a comprehensive review to address why the current 3-tier Quality Assurance Plan provided to Probation from the previous monitoring CAP was ineffective and has continued to have the same deficiencies noted in the 2015-2016, monitoring report. New Concept management shall implement a detail Quality Assurance Plan to ensure that all

sections, areas, or boxes in the Initial NSPs are comprehensive and complete moving forward. New Concept management and Clinician(s) ensure that all NSPs meet the SMART Goals guidelines.

Recommendation

New Concept management shall ensure that:

1. All children placed receive every opportunity to progress towards meeting their Case Plan Goals. New Concept Group Home shall modify or make necessary changes to the child's Case Plan Goals to make them more achievable or attainable when the child is not progressing towards meeting the goals. New Concept Group Home shall make every necessary effort to increase one-to-one counseling and therapeutic services, and immediately hold group discussions to resolve conflicts involving peers or staff.

2. The aforementioned NSP deficiencies are corrected, so that each child has a comprehensive Initial NSP, in accordance with CCL, Title 22 Regulations, and the Master County Contract.

3. The aforementioned NSP deficiencies are corrected, so that each child has a comprehensive Updated NSP, in accordance with CCL, Title 22 Regulations, and the Master County Contract.

Education and Workforce Readiness

Of the three (3) Updated Quarterly NSPs reviewed, two (2) children's Updated NSPs indicated that the children's academics or attendance has not increased. The first Updated NSP reviewed reported that the child continued to have repeated tardiness and an increase in negative behavior at school by being defiant towards his teachers. The second Updated NSP reviewed reported that the child was expelled from the first school he enrolled in and suspended from the second school for threatening his teachers, and then transferred to another school. Therefore, New Concept Group Home was not in compliance with the element, "Children Progressing Towards Meeting NSP Case Goals?"

Recommendation

New Concept management shall ensure that:

1. All efforts are made by the Group Home to assist the children in making academic and attendance progress. The Group Home shall identify the child's education strengths and weaknesses, and set an educational goal

that is child specific to ensure that the outcome goals are attainable or achievable in accordance with the SMART Goals guidelines.

Discharged Children

Of the three (3) Discharged Children's file reviewed, one (1) child did not made progress toward meeting their NSP goals. The child's file revealed that he continued to struggle with taking responsibility for his negative behavior by focusing more on conflict with his peers and substance abuse usage. The child's on-going behavior resulted in the court terminating his placement. Therefore, New Concept Group Home was not in compliance with the element, "Children Made Progress Toward NSP Goals?"

Recommendation

New Concept management shall ensure that:

1. All discharged children placed are provided the opportunity to progress towards meeting their Case Plan Goals. New Concept shall make every necessary effort to ensure that the child is progressing toward meeting their Case Plan Goals by increasing one-on-one counseling and therapeutic services, and immediately holding group discussions to resolve any conflicts involving peers or staff.

PRIOR YEAR FOLLOW-UP FROM THE PROBATION PPQA GHM GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

The Los Angeles County Probation Department completed a compliance report for New Concept for the fiscal year 2014-2015. The last compliance report dated August 17, 2015, identified ten (10) recommendations.

Results

Based on the follow-up, New Concept fully implemented seven (7) of the ten (10) previous recommendations for which they were to ensure that:

- The front passenger door lock, cracked left rear taillight, damaged left rear hubcap, and missing First-Aid kit were replaced or repaired on the Blue transportation van.

- The missing First-Aid kit, low thread wear on both rear tires and a nail embedded in the front right tire were replaced or repaired on the White transportation van.

- The weekly Personal Allowance and monthly Clothing Allowance have separate logs. The separate logs are comprehensive and reflects the accurate accounting for the amount received, withdrawn, and current balance.

- The existing electrical reciprocal outlet was replaced with a GFCI outlet in the Hallway Bathroom.

- The damaged air conditioning register vent was replaced in Bedroom #2.

- The Group Home maintain a two-day food supply for perishable food in accordance with Title 22 Regulations.

- The withholding of children's weekly personal allowances were not used as a form of discipline.

However, the follow-up discovered that New Concept failed to fully implement three (3) of the previous ten (10) recommendations for which they were to ensure that:

- The children were progressing towards meeting their NSP case goals.

- The Initial and Updated NSP reports are comprehensive, child specific, and meets the SMART goals requirement.

- The children's Academics or Attendances Increased.

The failure to implement permanent changes in two (2) of the same areas as last year's review has been addressed in the current CAP and will require monthly quality assurance checks to ensure compliance.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A current fiscal review of Humanistic Foundation, Inc. d.b.a. New Concept Group Home by the Auditor Controller was not scheduled for the 2015-2016, Fiscal Year.

NC

Humanistic Foundation, Inc

DBA New Concept

Short Term Residential Treatment Center
Ages 11-17

April 7, 2016

Los Angeles County Probation Department
Placement Permanency & Quality Assurance
Group Home Monitoring and Investigations Unit
Lynwood Regional Justice Center
11701 South Alameda Street, 2nd Floor
Lynwood, CA 90262

Attn: Leng Lim, Deputy Probation Officer II

RE: New Concept Deficiency Report for 2015-2016 Monitoring Review

Los Angeles County Probation, Monitoring Department conducted a review of New Concept Group Home on January 13, 2016. This monitoring was completed by DPO Leng Lim.

The New Concept Deficiency Report for 2015-2016 Monitoring Review has been reviewed and after meeting with DPO Lim and the MFT for clarification on some issues, then other meetings with other responsible parties, the deficiencies in this review have been corrected.

The Corrective Action Plan addresses the four areas of concern which included Facility & Environment, Maintenance of Required Documentation and Service Delivery, Educational and Workforce Readiness and Discharged Children. The Corrective Action Plan addresses the area of non-compliance in detail, the cause of the con-compliance, the Corrective Action Plan and the Quality Assurance plan on maintaining compliance.

It is important to New Concept to always provide a high level of quality service to our minors at all times. We strive to offer a safe environment to enhance the wellbeing of the minors, age appropriate activities, and educational plans to ensure a positive future. We are very sincere, passionate and vested in the lives of the minors entrusted to New Concept Group Home.

Documents: Quality Assurance Inspection Worksheet, Resident Weekly Report, and Behavior Contract

We will make every attempt to adhere to the recommendations listed in the deficiency report.

Sincerely,

Sueretta Small

Sueretta Small, Administrator
(323) 290-2540 Office
(818) 439-7444 Cell

The following deficiencies were noted and reported by the Probation Monitor during the 2015 – 2016 monitoring review:

Facility and Environment:

The probation monitor reported two broken mirror fasteners in the upstairs Hallway Bathroom; a loose electrical outlet cover and smoke detector with low battery in the Master Bedroom; another loose electrical outlet cover and smoke detector not connected in Bedroom #2.

Cause of Deficiency:

The broken mirror fasteners, loose electrical outlet covers and inoperable smoke detectors were overlooked by the maintenance worker during his weekly interior and exterior inspection of the house.

Corrective Action Plan:

The broken mirror fasteners were replaced with new ones on January 13, 2016. The loose electrical outlet covers were tightened and securely fastened to the wall on January 13, 2016. The smoke detectors were deemed inoperable and replaced with new ones on January 13, 2016.

Quality Assurance (QA) Plan to maintain compliance:

To prevent the same or similar deficiencies from future reoccurrences, a revised "QA Inspection Worksheet" has been implemented to include all noted deficiencies reported by the probation monitor. The revised form will cover all areas of the interior and exterior of the house that needed to be inspected to ensure that nothing will be left out. The maintenance worker will continue to conduct weekly thorough inspections of the entire house and complete a "QA Inspection Worksheet" by checking off the items needed to be inspected. In addition, all employees have been trained by the Facility Coordinator to conduct daily inspections of the house. The maintenance worker will immediately make any repairs or replacement discovered during the inspection to ensure that the children are safe. To ensure that the maintenance worker and employees are in compliance, the Facility Coordinator is responsible for reviewing the "QA Inspection Worksheet" for accuracy and completeness in addition with weekly follow-up inspections of the house. The Facility Coordinator will be responsible for the QA in this area. According to our handbook the first order of disciplinary actions is a verbal warning, which will be documented.

Maintenance of Required Documentation and Service Delivery:

The Probation Monitor reported that two of the three Children Were Not Progressing Toward Meeting Their NSP Case Goals.

Cause of Deficiency:

New Concept has accepted children with history of behavior, social and emotional difficulties. New Concept failed to document on the NSP report all efforts made by staff to ensure that the child is progressing towards meeting their NSP goals.

Corrective Action Plan:

When the treatment team observes through daily/weekly documentation that the child is not meeting their case plan goals and their behaviors have not stabilized, New Concept will increase therapeutic services and adjust the case plan goal.

Quality Assurance (QA) Plan to maintain compliance:

To ensure that the children are progressing towards meeting their NSP case goals moving forward, the treatment will review the child's daily/weekly reports on a weekly basis. During this review it will be determined if therapeutic services need to be increased and if the case plan goal should be modified. If the negative behavior continues after making all necessary efforts to improve them, in an attempt to continue the child's placement with New Concept, the Assistant Administrator and the Facility Coordinator will meet with the child. They will discuss the child's behavior and challenges. At this time all three parties will review and sign a Resident Behavior Contract. If the child does not comply with the signed contract agreement, the Administrator will meet with the therapist to discuss continued placement or discharge for the child. The Assistant Administrator will be responsible for the QA in this area. According to our handbook the first order of disciplinary actions is a verbal warning, which will be documented.

The Probation Monitor also reported deficiencies in the Development of Timely, Comprehensive Initial and Updated NSPs with Child's Participation. The Probation Monitor noted the Initial and Updated NSP files were lacking information required as part of the NSP template and that the children's goals were specific, measurable, and attainable as a requirement under the SMART Goals guidelines noted in the deficiency report.

Cause of Deficiency:

The Administrator take full responsibility for the ineffectiveness of the 3-tier Quality Assurance Plan that was submitted as our Corrective Action Plan (CAP) to the Probation Department in addressing the previous year's monitoring deficiencies. As the Administrator, I have overestimated my availability as the third-tier person to review the NSP reports due to fulfilling my administrative duties and this has caused a breakdown in the process, making it ineffective. My duties and other responsibilities as an administrator have prevented me from reviewing the NSP and Quarterly reports; therefore, the NSP reports were not reviewed prior to it being distributed.

Corrective Action Plan:

On January 27, 2016, the Administrator and the therapist met with the Probation Monitor to address the noted deficiencies. The Probation Monitor consulted with the therapist and the Administrator that all elements in the Initial and Updated NSP reports needed to be completed and that the children's goals did not meet the SMART Goals guidelines as required by the Probation Department and DCFS. Effective immediately, the therapist will complete all elements required on the Initial and Updated NSP reports. The therapist will also ensure that the children's goals meet the SMART Goals guidelines and are specific, measurable, and attainable. The therapist is qualified on SMART Goals and has taught SMART Goals in the past.

Effective immediately, the Administrator will no longer review NSP reports. New Concept has employed a Licensed Clinician who is qualified to review and approve the NSP reports written by the therapist. On February 5, 2016, the therapist met with the Licensed Clinician to discuss the NSP requirements required by the Probation Department.

Quality Assurance (QA) Plan to maintain compliance:

To ensure that all elements of the NSP template are completed and the children's goals are SMART Goals moving forward, New Concept will continue utilizing the 3-tier Quality Assurance plan with the Licensed Clinician completing the final NSP review process to ensure compliance. The Licensed Clinician will be held accountable by the Administrator for any NSP reports reviewed that does not have all the required elements completed and children's goals that do not meet the SMART Goals guidelines. The QA person identified in this area is the Licensed Clinician. According to our handbook the first order of disciplinary actions is a verbal warning, which will be documented.

Educational and Workforce Readiness:

The Probation Monitor reported that two Updated Quarterly NSPs reviewed indicated that the children's academics or attendance have not increased. The first file reviewed reported that the child continued to have repeated

tardiness and increased in negative behavior at school. The second file reviewed reported that the child was expelled from the first school and suspended from the second school for threatening his teachers, and then transferred to another school.

Cause of Deficiency:

New Concept has accepted children with long history of academic issues such as habitual truancy, tardiness, and defiant behaviors toward school staffs and officials. New Concept believes that based on the past academic successes with former placed children, children will progressively make adjustment to achieve academic success with time. Academic success will not be obtained in one or two quarterly reporting.

Corrective Action Plan:

New Concept has taken all necessary efforts to improve the children's academic performance and increase the attendances to ensure that they are academically successful. Effective immediately, New Concept will implement additional efforts to ensure that the children's academic and attendance increases by including the following:

1. Encouraging children to attend school daily.
2. Requesting a daily or weekly report from the school for attendance and academic performance.
3. Having the LAUSD Liaison meet with the youth to discuss any issues related to school.
4. Request that the school implement the 30 day observation required to determine if the school will schedule an IEP meeting
5. When truancy is a problem a staff will be scheduled to shadow the child in classes.
6. Staff and administrator will encourage the use of a New Concept tutor or school tutor.

New Concept will also make all necessary adjustments to the child's educational case plan when the child is not progressing towards meeting their academic goal.

Quality Assurance (QA) Plan to maintain compliance:

To ensure that children increase their academics and attendance moving forward, New Concept Facility Coordinator, and the Assistant Administrator will review each child's "Resident Weekly Report" each week to determine the child's academic progress. By utilizing this method, New Concept

Administrator and the therapist can intervene early and make any necessary adjustment to assist the child accordingly. To ensure compliance, the Facility Coordinator will report to the Administrator and the therapist regarding the child's progress each Friday of the week. The Assistant Administrator is identified as the person responsible for the QA in this area. According to our handbook the first order of disciplinary actions is a verbal warning which will be documented.

Discharged Children:

The Probation Monitor reported that one discharged child has not made progress toward meeting his NSP goals.

Cause of Deficiency:

New Concept has accepted children with history of behavior, social, and emotional difficulties. In this case, New Concept has exhausted every effort to ensure that the child was making progress towards meeting his NSP goals; however, the child continued to struggle with taking responsibility for his negative behavior by focusing more on conflict with his peers and substance abuse usage. The child's on-going behavior resulted in the court terminating his program.

Corrective Action Plan:

In a situation involving conflict between children, when involved parties are calm, the Facility Coordinator and another staff will discuss the accountability and what to do if faced with the same situation or a similar situation.

In a situation involving a child and a staff the Administrator and the Facility Coordinator will meet with the involved parties to discuss the situation, how it could have been prevented, and what to do if faced with the same situation or a similar situation. New Concept will increase counseling and one to one therapeutic services when determined necessary.

When there are behavioral incidents and the minors are not progressing towards meeting their Case Plan Goals, the Facility Coordinator and the Clinicians will discuss the minor's situation and agree on a different approach and or modification of the Case Plan Goal.

Quality Assurance (QA) Plan to maintain compliance:

To ensure that the children are progressing towards meeting their NSP case goals moving forward, the treatment will review the child's daily/weekly reports on a weekly basis. During this review it will be determined if therapeutic services need to be increased and if the case plan goal should be modified.

If the child continues to have behavior issues, in an effort to continue the child's placement with New Concept the Assistant Administrator and the Facility Coordinator will meet with the child to discuss their behavior and or academic challenges. At this time all three parties will review and sign a Resident Behavior Contract. If the child does not comply with the signed contract agreement, the Administrator will meet with the therapist to discuss continued placement or discharge for the child. The QA person in this area will be the Assistant Administrator. According to our handbook the first order of disciplinary actions is a verbal warning, which will be documented.