County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

ANTONIA JIMÉNEZ
Acting Director

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February 28, 2011

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

From: Antonia Jiménez
Acting Director

TURMONT HOME FOR BOYS AND GIRLS PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

In accordance with your Board's April 14, 2009 motion, we are informing your Board of the results of a group home compliance review.

Turmont Home for Boys and Girls (Turmont) has two group home sites. The Carson site is located in the 2nd Supervisorial District and the Lancaster site is located in the 5th Supervisorial District. Turmont provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to the agency's program statement, its stated goal is to "provide 24-hour non-medical care and supervision to residents placed by the Department of Children and Family Services." Both the Carson and Lancaster facilities are licensed to serve a capacity of six children, ages 13 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Turmont in November 2009, at which time it had two six-bed sites and nine placed DCFS children. There were five males and four females. For the purpose of this review, eight placed children were interviewed and nine case files were reviewed. The placed children's average overall length of placement was eight months and the average age was 17. Five staff files were reviewed for compliance with Title 22 regulations and contract requirements.

None of the nine placed children were on prescribed psychotropic medication.

SCOPE OF REVIEW

The purpose of this review was to assess Turmont's compliance with the contract and State regulations. The visit included a review of Turmont's program statement, administrative

internal policies and procedures, all placed children's files, and a random sampling of personnel files. A visit was made to both sites to assess the quality of care and supervision provided to children, and 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.

SUMMARY

Generally, Turmont was providing good quality care to DCFS placed children, and the services were provided as outlined in the agency's program statement. The children interviewed stated that they wanted to continue residing at the placement and that the staff treated them well. The direct care staff stated that they felt supported by the administrative staff and the Group Home administrative staff was attentive to the needs of the children.

At the time of the review, Turmont needed to ensure that all children 16 years and older who were referred to Youth Development Services were monitored so that they participated in the program in a timely manner. Turmont also needed to ensure that all Needs and Services Plans (NSP) were comprehensive and that all required information on the NSP template was completed. Some NSPs did not have all required signatures. Two children's report cards were not obtained. One staff member did not have timely CPR training.

Turmont management was receptive to implementing some systemic changes to improve their compliance with regulations and the Foster Care Agreement.

NOTABLE FINDINGS

The following are the significant findings based on our review:

- Of the 31 initial and updated NSPs reviewed for nine children's case files, 22 updated NSPs were not comprehensive in that not all required elements were completed in accordance with the NSP template.

- Signatures to authorize implementation of the NSPs were also missing.

- Of the nine children reviewed, two did not have report cards.

- Of the seven children reviewed who were eligible for Youth Development Services and/or emancipation or equivalent services, only four had received services at the time of review. Documentation could not be provided to show that staff followed up on the referrals made by the CSW.

- CPR training was not timely for one staff member.

EXIT CONFERENCE

The following are highlights from the exit conference held February 11, 2010.

In attendance:

Victor Bradley, Program Director, Turmont Home for Boys and Girls, and Linda Reusser, Monitor, DCFS OHCMD.

Highlights:

The Program Director was in agreement with our findings and recommendations. He stated that he was able to see the importance of the Group Home staff providing more information to the DCFS Social Worker so that NSPs are comprehensive. He also stated that he would implement procedures to obtain signatures on the NSPs in a timely manner and obtain children's report cards in a timely manner. He agreed to ensure that all children participated in Youth Development Services and/or emancipation or equivalent services and that all staff received timely CPR training.

As agreed, Turmont provided a timely written Corrective Action Plan (CAP) addressing each recommendation noted in this compliance report. The approved CAP is attached.

As noted in the monitoring protocol, a follow-up visit will be conducted to address the provider's approved CAP and assess for full implementation of recommendations.

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

AJ:LP:KR
EAH:BB:lr

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Donald H. Blevins, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Rhonna Carroll, President, Board of Directors, Turmont Home for Boys and Girls
Ora Quaynor, Executive Director, Turmont Home for Boys and Girls
Jean Chen, Regional Manager, Community Care Licensing
Lenora Copeland, Regional Manager, Community Care Licensing

TURMONT HOME FOR BOYS AND GIRLS
CONTRACT COMPLIANCE MONITORING REVIEW - SUMMARY

9741 E. Turmont Street
Carson, CA. 90746
License Number: 191600783, 197600325
Rate Classification Level: 8

	Contract Compliance Monitoring Review	**Findings: November 2009**
I	**Licensure/Contract Requirements** (9 Elements) 1. Timely Notification for Child's Relocation 2. Stabilization to Prevent Removal of Child 3. Transportation 4. SIRs 5. Compliance with Licensed Capacity 6. Disaster Drills Conducted 7. Disaster Drill Logs Maintenance 8. Runaway Procedures 9. Allowance Logs	Full Compliance (ALL)
II	**Facility and Environment** (6 Elements) 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non Perishable Food	Full Compliance (ALL)
III	**Program Services** (8 Elements) 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. Therapeutic Services Received 6. Recommended Assessments/Evaluations Implemented 7. DCFS CSWs Monthly Contacts Documented 8. Comprehensive NSPs	1. Full Compliance 2. Improvement needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement needed

IV	**Educational and Emancipation Services** (4 Elements) 1. Emancipation/Vocational Programs Provided 2. ILP Emancipation Planning 3. Current IEPs Maintained 4. Current Report Cards Maintained	 1. Improvement needed 2. Full Compliance 3. Full Compliance 4. Improvement needed
V	**Recreation and Activities** (3 Elements) 1. Participation in Recreational Activity Planning 2. Participation in Recreational Activities 3. Participation in Extra-Curricular, Enrichment and Social Activities	 Full Compliance (ALL)
VI	**Children's Health-Related Services (including Psychotropic Medications)** (9 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 3. Medication Logs 4. Initial Medical Exams Conducted 5. Initial Medical Exams Timely 6. Follow-up Medical Exams Timely 7. Initial Dental Exams Conducted 8. Initial Dental Exams Timely 9. Follow-Up Dental Exams Timely	 1. Full Compliance 2. N/A 3. N/A 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance
VII	**Personal Rights** (11 Elements) 1. Children Informed of Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Staff Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Children Free to Receive or Reject Voluntary Medical 7. Dental and Psychiatric Care 8. Children Allowed Private Visits, Calls and 9. Correspondence 10. Children Free to Attend Religious Services/Activities 11. Reasonable Chores 12. Children Informed about Psychotropic Medication 13. Children Aware of Right to Refuse Psychotropic Medication	 Full Compliance (ALL)

VIII	**Children's Clothing and Allowance** (8 Elements) 1. $50 Clothing Allowance 2. Adequate Quantity of Clothing Inventory 3. Adequate Quality of Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance 8. Encouragement and Assistance with Life Book	Full Compliance (ALL)
IX	**Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training)** (12 Elements) 1. Education/Experience Requirement 2. Criminal Fingerprint Cards Timely Submitted 3. CACIs Timely Submitted 4. Signed Criminal Background Statement Timely 5. Employee Health Screening Timely 6. Valid Driver's License 7. Signed Copies of GH Policies and Procedures 8. Initial Training Documentation 9. CPR Training Documentation 10. First Aid Training Documentation 11. On-going Training Documentation 12. Emergency Intervention Training Documentation	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Improvement Needed 11. Full Compliance 12. Full Compliance

TURMONT HOME FOR BOYS AND GIRLS PROGRAM
CONTRACT COMPLIANCE MONITORING REVIEW

Turmont Home for Boys
741 East Turmont Street
Carson, CA. 90746
License Number: 191600783
Rate Classification Level: 8

Turmont Home for Girls
1519 E. Thomas Drive
Lancaster, CA. 93535
License Number: 197600325
Rate Classification Level: 8

The following report is based on a "point in time" monitoring visit and addresses the findings noted during the November 2009 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review of nine children's files and five staff files, Turmont Homes for Boys and Girls was in full compliance with six of nine sections of our Contract Compliance review: Licensure/Contract Requirements; Facility and Environment; Recreation and Activities; Children's Health-Related Services, including Psychotropic Medication; Personal Rights; and Children's Clothing and Allowances. The following report details the areas found to be out of compliance.

PROGRAM SERVICES

Of the 31 initial and updated Needs and Services Plans (NSP) reviewed for nine children's case files, 22 updated NSPs were not comprehensive and signatures to authorize implementation of the NSPs were also missing.

Recommendation:

Turmont management shall ensure that:

1. Group Home staff obtain the Children's Social Worker's (CSW) signature prior to implementing the NSP.

2. NSPs are comprehensive in that each NSP includes all information required in the NSP template.

EDUCATIONAL AND EMANCIPATION SERVICES

Based on our review of nine children's case files and interviews with eight children, Turmont fully complied with six of seven elements in the area of Educational and Emancipation Services. It should be noted that the ninth child refused to participate in the interview process. Staff did not provide timely follow-up of Educational and Emancipation Services referrals made to the CSWs so that youth could receive these services in a timely manner. Staff also did not obtain report cards for two children.

The Group Home ensured that all children were attending school and that all children were provided with educational support and resources to meet their educational needs. Current Individualized Education Plans (IEP) were maintained. Of the seven children eligible for Youth Development Services and/or equivalent emancipation services, three had not received services. The provider stated that they had contacted the DCFS CSWs concerning referrals for the services, however they had not received information about when the services would begin. There was no documentation to indicate that Turmont had followed up and contacted the CSWs to determine the status of their request for Youth Development Services.

Recommendation:

Turmont management shall ensure that:

3. All children, 16 and older, are referred to and participate in Youth Development Services.

4. Staff document their efforts to follow up and contact case-carrying CSWs to determine the status of Youth Development Services.

PERSONNEL RECORDS

Based on our review of five staff personnel files, Turmont fully complied with 11 of 12 elements in the area of Personnel Records.

All five staff met the educational/experience requirements, submitted timely criminal fingerprint cards, had Child Abuse Central Index (CACI) clearances, and signed criminal background statements in a timely manner. They also received timely initial health screenings; signed copies of the Group Home policies and procedures; possessed valid driver's licenses; and completed CPR, emergency intervention training and initial training in accordance with Title 22 and Turmont's program statement.

One staff member did not have a current First-Aid card. Turmont management stated that they would ensure that all staff members were provided timely First Aid training.

Recommendation:

Turmont management shall ensure that:

5. All staff members receive timely First Aid training.

PRIOR YEAR FOLLOW UP FROM THE AUDITOR-CONTROLLER'S REPORT

Objective

Determine the status of the recommendations reported in the Auditor-Controller's (A-C) prior monitoring review.

Verification

We verified whether the outstanding recommendations from the A-C's report issued for Turmont Home for Boys on January 20, 2009 and for Turmont Home for Girls on April 8, 2009 were implemented.

Results

The A-C's monitoring report for Turmont Home for Boys contained two outstanding recommendations. Specifically, Turmont was to maintain the facilities in accordance with CDSS Title 22 regulations and maintain NSPs which include goals and adequate documentation that children receive treatment services.

The one recommendation in the Turmont Home for Girls report was for the Group Home to provide sufficient tutoring to meet the children's educational needs and ensure all children are progressing satisfactorily in school.

Turmont fully implemented all recommendations except for maintaining comprehensive NSPs at Turmont Home for Boys which is noted in this report as recommendation number 2.

TURMONT HOME FOR BOYS/GIRLS

A HOME FOR CHILD NURTURE, CARE & DEVELOPMENT
COMMITTED TO AN EXCELLENT HOME ENVIRONMENT

March 9, 2010

County of Los Angeles
Dept. of Children and Family Services
Out of Home Care Management Division
Attn: Barbara Butler
9320 Telstar Avenue
El Monte, Ca. 91731

Dear Ms. Butler:

I am submitting a Corrective Action Plan developed for the deficiencies for the 2009 Monitoring Review conducted by Linda Reusser.

Needs and Services Plans were not comprehensive and complete. In the future, the following will be completed"

- **NSP Comprehensiveness. In the future, we will assure that all spaces provided in the NSP will be responded to. We will extract information from our files such as the dates of the child's telephone conversations, information concerning child's attorney and the child's concurrent case plan goal for the Social Worker so that it can be input into the NSP by the group home's Social Worker. We will work more diligently in obtaining information for the Social Worker such as information concerning Report card's, GPA, Credits earned, academic achievements and extracurricular activities. Information concerning other school related issues such as completion of school/homework and truancies. We will make every effort possible to obtain this information soon after the child is admitted to our facility. We will respond to requested information concerning all ILP/TILP, dates of medical/dental visits and there outcomes and of psychotherapy sessions or other treatment services. This will allow the Social Worker to complete the NSP properly.**

The plan for this is as follows:

Upon the admittance of all residents there will be a check list in place to assure that all information necessary to complete all NSP shall be made available in a timely manner by the placement Social Worker.

We will assure that all client files are reviewed for Medical and Dental information and that this information is available to complete the NSP.

Daily logs will be maintained to assure that all the client's Telephone calls, Visitation with Family members and Social Worker are accurately logged with dates and times to assure that this information is included in the NSP.

NSP/Quarterly will also include medical, educational progress, GPA, Credits earned, academic achievements, Visitation information will include frequency/dates and transportation arrangements. NSP's will also include Name and Telephone number of residents Attorney and dates of DCFS-CSW monthly contact visits.

TURMONT HOME FOR BOYS/GIRLS

A HOME FOR CHILD NURTURE, CARE & DEVELOPMENT
COMMITTED TO AN EXCELLENT HOME ENVIRONMENT

Ora Quaynor, Administrator and Victor Bradley, Program Director will ensure that NSP's will be completed properly and Treatment Services are provided according the Program Statement that was designed for Turmont Home for Boys and that the corrective action remains implemented and is working as intended.

We will continue our attempts to obtain the DCFS CSW's signature on the NSP if he/she does not attend the NSP meeting and will improve our documentation of these efforts.

The plan Turmont has developed for this is as follows:

We will make continuous efforts to assure a signature from the DCFS Placement Social Worker is obtained at the completion of each NSP.

DCFS Placement Social Worker will be contacted immediately upon the completion of the NSP if he/she does not attend the NSP meeting. A copy of the NSP will be forwarded to his/her office via e-mail or postal service. Once the DCFS Placement social worker has reviewed the NSP and it requires no changes, we will request that the signature page be sign and returned.

All attempts via telephone and mail will be accurately logged and included in the clients file.

We will also assure that all staff is trained in First Aid and CPR in a timely manner and that all renewals will be completed before the expiration date of the current certificate.

(a) Enclosed is a valid CPR Card for Teresita Green

(b) Here is a plan so that First Aid and CPR trainings are completed on a timely basis in the future

The plan is as follows:

Turmont will assure that all employees maintain a valid First Aid Card and CPR at all times and renewals will be done in a timely manner before current First Aide Card Expiration date. Turmont has develop a plan in which an employee check list will be maintained and monitored on a weekly basis to assure that all require documentation has been obtained at the time of employment and that documents in need of renewal can be completed in a timely manner. This information will be kept in the employees file for review.

Ora Quaynor, Administrator, Victor Bradley, Program Director and Robbie Bennett, Facility Manager will be in charge of reviewing these documents for timeliness and completeness.

Thank you for allowing Turmont to make these corrections.

Yours truly,

Victor Bradley, Program Director

741 E. TURMONT STREET, CARSON, CA 90746 310.532.5606 / 661.948.2634

County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
425 Shatto Place, Los Angeles, California 90020
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PATRICIA S. PLOEHN, LCSW
Director

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Fifth District

March 23, 2010

Mr. Victor Bradley, Executive Director
Turmont Home for Boys and Girls
741 E. Turmont Street
Carson, CA. 90746

RE: ADDENDUM TO THE CORRECTIVE ACTION PLAN SUBMITTED FOR THE NOVEMBER 2009 MONITORING REVIEW

Dear Mr. Bradley,

We have reviewed your Corrective Action Plan (CAP) dated March 9, 2010. We noticed that the following was not addressed in your CAP: regarding the goals, specify the exact behaviors which need to be deceased or eliminated and specify exactly which anti-social and/or pro-social behaviors need to be deceased/eliminated/enhanced.

This is of paramount importance because specific behaviors need to be listed in order to measure progress. In other words, label each behavior rather than using language such as "anti-social and pro-social behaviors." As you are aware, initially, the group home Social Worker will need to meet with you and the Treatment Team to discuss specifically, which behaviors actually need to be addressed and, from that information, the interventions for modifying the target behaviors are developed. The group home Social Worker will subsequently include this information in the Needs and Services Plans.

As with the CAP you submitted, please include relevant time frames, and the steps that you will utilize to prevent new occurrences in these areas. You must also include the position of the person who will be responsible for ensuring that the CAP will be fully implemented. In the event that the CAP addendum does not adequately address all of the issues, we will require that you submit a second addendum. **We ask that you submit the addendum by Tuesday, March 30, 2010.**

If you have any questions regarding this correspondence or concerning the CAP or, if you need assistance in developing the CAP, please feel free to contact me at 626-569-6815 or your Monitor, Linda Reusser at 626-569-6845.

Yours truly,

Barbara Butler
Children's Services Administrator, II

TURMONT HOME FOR BOYS/GIRLS

A HOME FOR CHILD NURTURE, CARE & DEVELOPMENT
COMMITTED TO AN EXCELLENT HOME ENVIRONMENT

March 30, 2010

County of Los Angeles
Dept. of Children and Family Services
Out of Home Care Management Division
Attn: Barbara Butler
9320 Telstar Avenue
El Monte, Ca. 91731

Dear Ms. Butler:

I am submitting an (Addendum) to the Corrective Action Plan developed for the deficiencies for the 2009 Monitoring Review conducted by Linda Reusser. Areas of Changes will be in highlighted in red.

Needs and Services Plans were not comprehensive and complete. In the future, the following will be completed"

- **NSP Comprehensiveness. In the future, we will assure that all spaces provided in the NSP will be responded to. We will extract information from our files such as the dates of the child's telephone conversations, information concerning child's attorney and the child's concurrent case plan goal for the Social Worker so that it can be input into the NSP by the group home's Social Worker. We will work more diligently in obtaining information for the Social Worker such as information concerning Report card's, GPA, Credits earned, academic achievements and extracurricular activities. Information concerning other school related issues such as completion of school/homework and truancies. We will make every effort possible to obtain this information soon after the child is admitted to our facility. We will respond to requested information concerning all ILP/TILP, dates of medical/dental visits and there outcomes and of psychotherapy sessions or other treatment services. This will allow the Social Worker to complete the NSP properly.**

- **Goals will be specific and list exact behaviors which needs to be decreased or eliminated and specify exactly which anti-social and/or pro-social behaviors need to be decreased, eliminated or enhanced. This is very important because specific behaviors need to be listed in order to measure progress.**

The plan for this is as follows:

Upon the admittance of all residents there will be a check list in place to assure that all information necessary to complete all NSP shall be made available in a timely manner by the placement Social Worker.

We will assure that all client files are reviewed for Medical and Dental information and that this information is available to complete the NSP.

Daily logs will be maintained to assure that all the client's Telephone calls, Visitation with Family members and Social Worker are accurately logged with dates and times to assure that this information is included in the NSP.

NSP/Quarterly will also include medical, educational progress, GPA, Credits earned, academic achievements, Visitation information will include frequency/dates and transportation arrangements. NSP's will also include Name and Telephone number of residents Attorney and dates of DCFS-CSW monthly contact visits.

The group home Social Worker will meet with or communicate with staff and the treatment team to discuss specifically, which behaviors actually needs to be addressed, and from that information, the interventions for modifying the target behaviors are developed. The group home Social Worker will subsequently include this information in the Needs and Service Plan.

All NSP will be reviewed prior to finalization to assure that all areas of the NSP have been completed and that all information is accurately stated.

Ora Quaynor, Administrator and Victor Bradley, Program Director will ensure that NSP's will be completed properly and Treatment Services are provided according the Program Statement that was designed for Turmont Home for Boys and that the corrective action remains implemented and is working as intended.

We will continue our attempts to obtain the DCFS CSW's signature on the NSP if he/she does not attend the NSP meeting and will improve our documentation of these efforts.

The plan Turmont has developed for this is as follows:

We will make continuous efforts to assure a signature from the DCFS Placement Social Worker is obtained at the completion of each NSP.

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(a) Enclosed is a valid CPR Card for Teresita Green

(b) Here is a plan so that First Aid and CPR trainings are completed on a timely basis in the future

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that documents in need of renewal can be completed in a timely manner. This information will be kept in the employees file for review.

Ora Quaynor, Administrator, Victor Bradley, Program Director and Robbie Bennett, Facility Manager will be in charge of reviewing these documents for timeliness and completeness.

Thank you for allowing Turmont to make these corrections.

Yours truly,

Victor Bradley, Program Director