County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
425 Shatto Place, Los Angeles, CA 90020

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May 12, 2011

To: Supervisor Michael D. Antonovich, Mayor
Supervisor Gloria Molina
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Supervisor Don Knabe

From: Jackie Contreras, Ph.D.
Interim Director

**CUNNINGHAM'S GROUP HOME 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.

Cunningham's Group Home is located in the 2nd Supervisorial District and provides services to Los Angeles County Department of Children and Family Services' (DCFS) foster youth. According to the agency's program statement, its goal is to "increase children's independent adaptive skills and decrease their maladaptive behaviors in order to gain the skills necessary for successful adult adjustment." Cunningham's Group Home is licensed to serve a capacity of six males, ages 11 through 17.

The Out-of-Home Care Management Division (OHCMD) conducted a review of Cunningham's Group Home in November 2010, at which time the agency had one six-bed site and five placed DCFS children. For purposes of this review, three children were interviewed; two children were not available for the interview due to visiting relatives for the holidays, however all five children's case files were reviewed. The children's overall average length of placement was eight months and their average age was 16. Seven staff files were reviewed for compliance with Title 22 regulations and contract requirements.

None of the placed children were on psychotropic medication.

**SCOPE OF REVIEW**

The purpose of this review was to assess Cunningham's Group Homes' compliance with the contract and State regulations. The visit included a review of the agency's program statement, administrative internal policies and procedures, three placed

children's case files, and a random sampling of personnel files. A visit was made to the facility to assess the quality of care and supervision provided to children and we conducted interviews with the children to assess the care and services they were receiving.

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

## SUMMARY

Generally, Cunningham's Group Home was providing services as outlined in its program statement. The children interviewed stated that they were satisfied with the services they were receiving. Additionally, the direct care staff stated that they were pleased with the support they receive from the administrative staff.

At the time of our review, we noted some documentation deficiencies. The Group Home needed to develop comprehensive Needs and Services Plans (NSP). In addition, the children's rooms needed to be organized to reflect a home-like environment. Also, children expressed needing assistance in creating and updating their life books.

During the exit conference, Beatrice Cunningham, Executive Director of Cunningham's Group Home, indicated that the agency would make corrections to improve its compliance with regulations and the Foster Care Agreement.

## NOTABLE FINDINGS

The following are the notable findings of our review:

- Children's bedrooms were not well maintained and did not reflect a home-like environment. The children's bedrooms did not have age-appropriate decorations.
- Five NSPs were not comprehensive; some included areas that were inaccurately addressed in the quarterly report area, while other areas were left blank. The dates for the periods reviewed were inaccurate, and some goal areas included information on the child's progress that belonged in the quarterly report area instead. One NSP was confusing and included multiple case plan goals. This was discussed with the Executive Director who stated that she would instruct her staff to review and address the identified deficient areas and include accurate information in the NSPs.
- Staff needed to encourage and assist children in creating and updating their life books/photo albums.

A detailed report of our findings is attached.

## EXIT CONFERENCE

The following are highlights from the exit conference held on November 22, 2010.

**In attendance:**

Beatrice Cunningham, Executive Director of Cunningham's Group Home, and Lilia Gonzalez, Monitor, DCFS OHCMD.

**Highlights:**

The Executive Director was in agreement with our findings and recommendations. She stated that she would instruct her staff to use a model/teach approach to assist children in maintaining their rooms in a neat, organized fashion and include age-appropriate decorations. She also stated that the Group Home keeps photo albums of the children but she would make sure that staff would assist children in creating their personalized life books. The Executive Director also committed to ensuring that the issues with the NSPs are corrected and that all the findings would be addressed in the Corrective Action Plan (CAP) submitted.

Cunningham's Group Home was provided with a draft copy of the report; the Executive Director stated that she agreed with the report and had no further responses to provide. As agreed, Cunningham's Group Home submitted a timely approved written CAP, which addressed each recommendation noted in this compliance report. The 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 the recommendations. If you have any questions, your staff may contact Aldo Marin, Board Relations Manager, at (213) 351-5530.

JC:RS:KR
EAH:DC:lg

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
Beatrice Cunningham, Executive Director, Cunningham's Group Home
Jean Chen, Regional Manager, Community Care Licensing
Leonora Scott, Regional Manager, Community Care Licensing

**CUNNINGHAM'S GROUP HOME**
**CONTRACT COMPLIANCE MONITORING REVIEW-SUMMARY**

**Cunningham's Group Home**
**5939 Chesley Avenue**
**Los Angeles, CA 90043**
**License Number: 191801179**
**Rate Classification Level: 8**

| | **Contract Compliance Monitoring Review** | **Findings: November 2010** |
|---|---|---|
| I | **Licensure/Contract Requirements** (9 Elements)<br><br>1. Timely Notification for Child's Relocation<br>2. Stabilization to Prevent Removal of Child<br>3. Transportation<br>4. SIRs<br>5. Compliance with Licensed Capacity<br>6. Disaster Drills Conducted<br>7. Disaster Drill Logs Maintenance<br>8. Runaway Procedures<br>9. Allowance Logs | Full Compliance (ALL) |
| II | **Facility and Environment** (6 Elements)<br><br>1. Exterior Well Maintained<br>2. Common Areas Maintained<br>3. Children's Bedrooms/Interior Maintained<br>4. Sufficient Recreational Equipment<br>5. Sufficient Educational Resources<br>6. Adequate Perishable and Non Perishable Food | 1. Full Compliance<br>2. Full Compliance<br>3. Needs Improvement<br>4. Full Compliance<br>5. Full Compliance<br>6. Full Compliance |
| III | **Program Services** (8 Elements)<br><br>1. Child Population Consistent with Program Statement<br>2. DCFS CSW Authorization to Implement NSPs<br>3. Children's Participation in the Development of NSPs<br>4. NSPs Implemented and Discussed with Staff<br>5. Therapeutic Services Received<br>6. Recommended Assessments/Evaluations Implemented<br>7. DCFS CSWs Monthly Contacts Documented<br>8. Comprehensive Needs and Services Plans (NSP) | 1. Full Compliance<br>2. Full Compliance<br>3. Full Compliance<br>4. Full Compliance<br>5. Full Compliance<br>6. Full Compliance<br>7. Full Compliance<br>8. Needs Improvement |

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

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

# CUNNINGHAM'S GROUP HOME PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW

**Cunningham's Group Home**
**5939 Chesley Avenue**
**Los Angeles, CA 90043**
**License Number: 191801179**
**Rate Classification Level: 8**

The following report is based on a "point in time" monitoring visit and addresses findings noted during the November 2010 monitoring review.

## CONTRACTUAL COMPLIANCE

Based on our review of five children's files and seven staff files and/or documentation from the provider, Cunningham's Group Home was in full compliance with six of nine sections of our Contract Compliance review: Licensure/Contract Requirements; Educational and Emancipation Services; Recreation and Activities; Children's Health-Related Services, Including Psychotropic Medication; Personal Rights and Personnel Records (including Staff Qualifications, Staffing Ratios, Criminal Clearances and Training). The following report details the results of our review:

## FACILITY AND ENVIRONMENT

Based on our review of Cunningham's Group Home, review of five children's case files and/or documentation from the provider, Cunningham's Group Home was in full compliance with five of the six elements reviewed in the area of the Facility and Environment.

During the visit, we noted that the Group Home exteriors were well maintained and that the Group Home had sufficient age appropriate recreational equipment. The Group Home also had an appropriate quantity and quality of reading materials, educational resources and supplies including computers that were readily available to children. We also noticed an adequate amount of perishable and non-perishable foods.

However, we noticed that the children's bedrooms generally had empty walls and lacked child-appropriate decorations reflective of a home-like environment.

**Recommendation:**

Cunningham's Group Home management shall ensure that:

1. Children's bedrooms are well maintained.

## PROGRAM SERVICES

Based on our review of five children's case files and/or documentation from the provider, Cunningham's Group Home fully complied with seven of eight elements reviewed in the area of Program Services.

We noted that placed children met the Group Home's population criteria as outlined in its program statement.

We noted that the Group Home had documentation indicating that the CSWs' authorization to implement Needs and Services Plans (NSP) were obtained and that children participated in the development of the NSPs. There was also documentation indicating that the NSPs were implemented and discussed with the Group Home staff and that the CSWs were contacted on a monthly basis.

However, we noted that the NSPs were not comprehensive; some areas needed additional information or included inaccurate information. Of the 10 NSPs reviewed, five were not comprehensive. Of the five initial NSPs reviewed, two included inaccurate timeframes for the periods of review. Initial NSPs included boxes that were inappropriately checked and information pertaining to updated NSPs, and in one case, included multiple permanency goals. Of the five updated NSPs reviewed, three were not comprehensive, confusing and/or missing information such as a child's refusal of medication. Some NSPs had inaccurate permanency case plan goals and included information pertaining to the quarterly report area in the identified goal area. In addition, some goals were not appropriate and needed to be more specific, realistic, and measurable. This was discussed with Executive Director who stated that she would instruct her staff to review and address the identified deficient areas and include accurate information in the NSPs.

**Recommendation:**

Cunningham's Group Home management shall ensure that:

2. comprehensive NSPs are developed.

## CHILDREN'S CLOTHING AND ALLOWANCE

Based on our review of five children's files and/or documentation from the provider, Cunningham's Group Home fully complied with seven of eight elements reviewed in the area of Children's Clothing and Allowance.

Children expressed that they received appropriate clothing allowances and that they were involved in the selection of their clothes. Children also expressed that they were always provided with minimum monetary weekly allowances and were free to manage their own allowances and/or earnings as noted in the Foster Youth Bill of Rights.

However, we noted that while the Group Home made efforts to have photo albums for the children, three children stated that they did not have their own personal life book/photo album.

**Recommendation:**

Cunningham's Group Home management shall ensure that:

3. Staff encourages and assists children in creating and updating life books/photo albums.

## PRIOR YEAR FOLLOW-UP FROM COMPLIANCE REPORT

### Objective

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

### Verification

We verified whether the outstanding recommendations from the last compliance report dated December 29, 2009 were implemented.

### Results

The prior monitoring report contained two outstanding recommendations. Cunningham's Group Home was to ensure that eligible children are enrolled in the Youth Development Program and ensure that children who participate in a Special Education Program have a current Individualized Educational Plan (IEP) in their file. The recommendations were fully implemented.

**Recommendation:**

None

*Cunningham s Group Home*
*Po Box 1638*
*Inglewood Ca 90302*
*310-6739185*

March 8, 2011

Request for Cap based on the Compliance Review Final Exit Summary
Based on the November 22, 2010 Review

FACLITY AND ENVIROMENT
Element #12
Findings: Children bedroom lacked child appropriate decorations reflective of a home-like environment.

**Recommendation**

1 Ensure that children's bedrooms are well maintained

**Corrective Action**

1 Cunningham's staff will work with the children on a daily basis encouraging them and assisting them in maintaining their rooms .Staff will model how a neat room should look. The resident will be given a what to do list as a guide to assist them in maintaining a clean and neat room. Children will be allowed to make suggestion and shop for appropriate decoration under the supervision of staff . This will take place within 30days of placement, .and every 6 months depending on the need.
Beatrice Cunningham will be responsible for seeing that this plan is carried out.
Effective March 1, 2011.

**PROGRAM SERVICES**

**Recommendatiom**

Ensure that Needs and services Plans are comprehensive and include accurate information

1. Cunningham's Group Home's treatment team which includes the facility Adm. facility Social Worker ,Therapist, childcare worker in collaboration with the DCFS CSW. We will work together to ensure that the needs and Services plans updates are comprehensive. 2 We will develop a comprehensive individualized Needs and Services Plan that is accurate, addresses goals and all required info that contains both long-term and short term goals that while treating the identified needs of the placed child is outcome based.
specific, measurable , attainable, and has a specific time frame for each deliverable (2)including the content required in Title 22 Division 6, Chapter 5, Section 84068.2(b-c) and 84068.3(a).. Including the plans for health and
Education, visitation, types of Services necessary including treatment strengths of the placed child and his/her family and cultural competency . ( Incorporate the content of the 709 (4) determine and communicate the role of each person having contact with the placed child to enact the Needs and Services Plan(5)determine the placed child progress or the lack of progress, including and independent living skills and adjust the Needs and Services Plan accordingly and (6discuss and formulate the behavior management Group Home Contract statement of Work, part B section 2.0 section 2.4.2.

Beatrice Cunningham is responsible for seeing that these plans are carried out. Effective March 1, 2011.

## IV. CLOTHING AND ALLOWANCE
### ELEMENT 57

**Finding :** Three children expressed that they did not have life book.

**Recommendation**

3 Ensure that staff encourages and assists children in creating and updating a life book/photo album.

**Corrective Action**

Cunningham will ensure that each child began a life book/photo album within the 30 days .placement. Within in the 30 days the child will be taken to have photos made. Cunningham will keep a disposal camera at the facility so staff can capture special moments. of the child in order to update his album This will be on going.
Beatrice Cunningham is responsible for seeing that these plans are carried out. Effective March 1, 2011