County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

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Director

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December 13, 2012

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

From: Philip L. Browning
Director

DREAM HOME CARE GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a review of Dream Home Care Group Home (Dream Home Care) in September 2012. Dream Home Care has three sites located in the Third Supervisorial District and provides services to Los Angeles County DCFS foster children and youth. According to Dream Home Care's program statement, its purpose is to "service court dependent abused, neglected, emotionally disturbed children."

Dream Home Care has three six-bed sites and is licensed to serve a capacity of 18 boys, ages 12 through 18. At the time of review, Dream Home Care served 18 placed DCFS children. The placed children's overall average length of placement was 13 months and their average age was 14.

SUMMARY

During our review, the interviewed children generally reported feeling safe at Dream Home Care; having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity.

Dream Home Care was in full compliance with nine of 10 areas of our Contract compliance review: Licensure/Contract Requirements; Facility and Environment; Education 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; and Personnel Records.

We noted deficiencies in the area of documentation of services delivery. Dream Home Care needed to develop comprehensive initial and updated Needs and Services Plans (NSP). We instructed Dream Home Care supervisory staff to enhance monitoring and provide training in order to eliminate documentation issues.

Attached are the details of our review.

REVIEW OF REPORT

On October 18, 2012, the DCFS OHCMD Monitor, Edward Preer, held an Exit Conference with Dream Home Care staff, which included Cora Manalang, Executive Director; Julee Campbell, Social Worker; Penny Anderson, Social Worker; Rosemarie Bueno, Administrator; William Bias, Administrator; and Allen L. Brown, Ph.D., Human Resources Coordinator. Dream Home Care representatives agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve their compliance with regulatory standards; and to address the noted deficiencies in a Corrective Action Plan (CAP).

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

Dream Home Care provided the attached approved CAP addressing the recommendations noted in this compliance report.

We will assess for implementation of recommendations during our next monitoring review.

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

PLB:RRS:KR
EAH:PBG:ep

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Cora Manalang, Executive Director, Dream Home Care Group Home
Rosalie Gutierrez, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing

DREAM HOME CARE GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2012-2013

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report address findings noted during the September 2012 review.

The purpose of this review was to assess Dream Home Care's compliance with its County contract requirements and State regulations and included a review of the Dream Home Care's program statement, as well as internal administrative policies and procedures. The monitoring review covered the following 10 areas:

- Licensure/Contract Requirements
- Facility and Environment
- Maintenance of Required Documentation and Service Delivery
- Educational and Workforce Readiness
- Health and Medical Needs
- Psychotropic Medication
- Personal Rights and Social Emotional Well-Being
- Personal Needs/Survival and Economic Well-Being
- Discharged Children
- Personnel Records

For the purpose of this review, five placed children were selected for the sample. We interviewed each child and reviewed their case files to assess the care and services they received. Additionally, three discharged children's files were reviewed to assess Dream Home Care's compliance with permanency efforts. At the time of the review, three of the five sampled children were prescribed psychotropic medication. We reviewed their case files to assess for timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring.

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

CONTRACTUAL COMPLIANCE

We found the following area out of compliance.

Maintenance of Required Documentation and Service Delivery

In January 2012, Dream Home Care representatives attended OHCMD's NSP training. Two of five initial NSPs and the 10 updated NSPs reviewed were developed after the OHCMD NSP training.

- All NSPs were developed timely. However, one of five initial NSPs and none of the updated NSPs were comprehensive. Some of the NSPs did not address the children's Permanency and Concurrent Case Plans. The NSPs did not explain why there was no parental involvement with the children; feasibility of the children returning home and the group home's efforts to unite the siblings in their care. The children's and group home's participation in school related activities was not addressed, and the children's educational needs were not identified. In addition, the NSPs did not explain the group home's efforts to provide the children with Life Skills-training. Dream Home Care representatives agreed that all required elements were not included in the NSPs, and they will take corrective action to ensure the development of comprehensive NSPs.

The Monitor reviewed the NSP training template with the Dream Home Care representatives. Dream Home Care will enhance monitoring of the NSPs. Dr. Allen Brown, Human Resources Coordinator has been assigned to review the NSPs with the treatment team monthly to ensure all the required elements are addressed and they will take corrective action to ensure the development of comprehensive NSPs.

Recommendation

Dream Home Care's management shall ensure that:

1. Comprehensive initial NSPs are developed and include all required elements in accordance with the NSP template.

2. Comprehensive updated NSPs are developed and include all required elements in accordance with the NSP template.

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

The OHCMD's last compliance report dated July 25, 2012 identified two recommendations.

Results

Based on our follow-up, Dream Home Care did not fully implement the two previous recommendations for which they were to ensure that:

- They develop comprehensive initial NSPs.
- They develop comprehensive updated NSPs.

Recommendation

Dream Home Care's management shall ensure that:

1. It fully implements the September 24, 2012 outstanding recommendations from the 2011-2012 fiscal year monitoring review, which are noted in this report as Recommendations 1 and 2.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The fiscal review of Dream Home Care has not been posted by the Auditor-Controller.

DREAM HOME CARE GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

Gardenia Site 1
3720 Gardenia Ave.
Long Beach, CA 90807
License # 1970807
Rate Classification Level: 11

Allington Site 2
3521 Allington Ave.
Long Beach, CA 90805
License # 197804914
Rate Classification Level: 11

Gaviota Site 3
3590 Gaviota Ave.
Long Beach, CA 90807
License # 197800400
Rate Classification Level: 11

	Contract Compliance Monitoring Review	**Findings: September 2012**
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)
II	**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	Full Compliance (ALL)
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	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance

	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	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. Group Home Ensured Children Attended School and Facilitated in Meeting Their Educational Goals 3. Current Report Cards Maintained 4. Children's Academic or Attendance Increased 5. Group Home Encouraged Children's Participation in Youth Development Services/ Vocational Programs	Full Compliance (ALL)
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. Group Home's efforts to provide Meals and Snacks? 5. Staff Treat Children with Respect and Dignity 6. Appropriate Rewards and Discipline System	Full Compliance (ALL)

	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 Extra-Curricular, Enrichment and Social Activities (Group Home, School, Community) 13. Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities (Group Home, 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/Photo Album	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	Full Compliance (ALL)
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)

DREAM HOME CARE INC.
A Non Profit Corporation
4150 Locust Avenue, Long Beach, CA 90807
P (562) 595-9021 F (562) 426-4804

November 1, 2012

Mr. Edward Preer
DCFS Children's Service Administrator/Monitor
Out of Home Care Management Division
9320 Telstar Avenue #216
El Monte, CA 91731

Dear Sir,

The following Corrective Action Plan (CAP) is being submitted for your kind consideration and approval in reference to:

RE: GROUP HOME MONITORING REVIEW SUMMARY RESULTS (10-18-12)

III Maintenance of Required documentation and Service Delivery
23/24 The group home treatment team did not develop comprehensive Initial and Updated Needs and Service Plan (NSP) with the participation of the developmentally age-appropriate child (well-being), with the following specific findings:

- ❒ **NSP did not address feasibility of the child returning home, did not explain the GH efforts to unite siblings and why there was no parental involvement.**
- ❒ **NSP did not identify the youth's educational needs and the GH participation in school related activities. The Education Section questions in the NSP were not answered correctly and that the youth's post HS plans were not adequately explained.**
- ❒ **NSP did not adequately address the Permanency Planning under PPLA goals and the Concurrent Case Plan, as well.**
- ❒ **NSP did not explain the Youth's Life Skills Training and the progress.**

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CORRECTIVE ACTION PLAN

A. Initial and Updated NSP shall be made comprehensive with the participation of the developmentally age-appropriate child (Well Being), to meet the placed child's identified needs, by ensuring that the following are appropriately addressed:

- ☐ **NSP will address feasibility of the child returning home and will explain the GH efforts to unite siblings and why there was no parental involvement.**
- ☐ **NSP will identify the youth's educational needs and the GH participation in school related activities. The Education Section questions in the NSP will be answered correctly and that the youth's post HS plans will be adequately explained.**
- ☐ **NSP will adequately address the Permanency Planning under PPLA goals and the Concurrent Case Plan, as well**
- ☐ **NSP will explain the Youth's Life Skills Training and the progress.**

B. NSP training for the group home administrators, social workers, Advocate/HRC and CEO was conducted on October 18, 2012 by Mr. Edward Preer, DCFS Administrator/Monitor from 12:00 pm to 3:00 pm.

C. Administrators and social workers of all sites, together with the GH HRC/client advocate and CEO will review all Initial and Updated NSP Reports as they become due and will ensure that the above CAP is implemented.

I would like to take this opportunity, in behalf of our staff, to extend my sincerest gratitude for your never ending help and support to our entity in an effort to provide our children the best services possible.

Hoping that the above CORRECTIVE ACTION PLAN meets your standard.

Sincerely,

Cora Manaiang
CEO