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DEPARTMENT OF CHILDREN AND FAMILY SERVICES
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March 11, 2013

To: Supervisor Mark Ridley-Thomas, Chairman
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From: Philip L. Browning
Director

THE DREAM CATCHER FOUNDATION, INC. 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 the Dream Catcher Foundation, Inc. Group Home (Dream Catcher) in October 2012. Dream Catcher is located in the Second Supervisorial District and provides services to DCFS foster youth. According to Dream Catcher's program statement, its purpose is "to achieve a successful outcome for each youth's treatment plan and designated case goal." It further states, "The larger overall goal is twofold. First, to help youth develop skills and self-esteem; this will enable the youth to become self-sufficient and productive persons in society. And, second, to help develop and promote a viable social support system for youth outside the foster care system."

Dream Catcher has three six-bed sites and is licensed to serve a capacity of 18 girls, ages eight through 17. At the time of the review, Dream Catcher served 18 placed DCFS children. The placed children's overall average length of placement was seven months, and their average age was 16.

SUMMARY

During our review, the interviewed children reported feeling safe at Dream Catcher; having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity. Additionally, one child stated, "Staff seems to really care."

Dream Catcher was in full compliance with six of 10 areas of our Contract compliance review: Facility and Environment; Medical Needs; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records.

We noted a deficiency in the area of Licensure/Contract requirements, as Dream Catcher had received a citation by Community Care Licensing (CCL). There were also deficiencies noted in

the area of Maintenance of Required Documentation and Service Delivery as the agency did not develop timely, comprehensive initial NSPs with Child's participation nor did the agency develop timely updated NSPs with the child's participation. Specifically, Dream Catcher needed to develop comprehensive Needs and Services Plans (NSPs) and document its effort to enroll placed children in school within three school days of placement. Deficiencies were also noted in the area of Psychotropic Medication as the agency did not have currently court authorization for the administration of psychotropic medication or current psychiatric evaluation reviews. We instructed Dream Catcher supervisory staff to enhance monitoring in order to ensure compliance with regulations and to eliminate documentation and service delivery issues.

Attached are the details of our review.

REVIEW OF REPORT

On November 28, 2012, the DCFS OHCMD Monitor, Sonya Noil, held an Exit Conference with Dream Catcher staff, Pam Norris, Executive Director; Theresa McPherson, Administrator; Latoya Lewis, Educational Liaison; Edith Sanchez, Intake Social Worker; and Earlene Johnson, Child Care Worker (CCW) Supervisor. Dream Catcher representatives were in agreement with the review findings and recommendations. They 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 report has been sent to the Auditor-Controller (A-C) and CCL.

Dream Catcher provided the attached approved CAP addressing the recommendations noted in this report.

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

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

PLB:EM:KR
EAH:PBG:sn

Attachment

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
Jamie Jeeson, Chairperson, Board of Directors, Dream Catcher Foundation, Inc.
Pam Norris, Executive Director, Dream Catcher Foundation Inc.
Lenora Scott, Regional Manager, Community Care Licensing
Rosalie Gutierrez, Regional Manager, Community Care Licensing

THE DREAM CATCHER FOUNDATION, INC. GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit and addresses findings noted during the October 2012 monitoring review. The purpose of this review was to assess Dream Catcher's compliance with its County contract requirements and State regulations and included a review of Dream Catcher'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, six 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 Catcher's compliance with permanency efforts. At the time of the review, three children were prescribed psychotropic medication. We reviewed their case files to assess timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm the required documentation of psychiatric monitoring.

We reviewed three 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 four areas out of compliance.

Licensure/Contract Requirements

Community Care Licensing (CCL) had cited Dream Catcher as a result of a substantiated safety and physical plant deficiency, on July 6, 2012; a child had bruised her shoulder when she tripped over a rubber floormat/runner that was outside her bedroom door. CCL concluded the investigation by stating, "Licensee shall protect clients from hazards including the use of non-slip rugs." Dream Catcher was instructed by CCL to secure the runner. The Agency removed the plastic runner and replaced it with a carpeted mat.

Recommendation

Dream Catcher's management shall ensure that:

1. The group home is free from safety and/or physical plant deficiencies.

Maintenance of Required Documentation and Service Delivery

- Six initial NSPs were reviewed; one was not comprehensive, as the CSW contacts were not documented in the initial NSPs, and identified case plan goals were vague. The children's progress on identified case plan goals was not clear.

- Nine updated NSPs were reviewed; seven were not comprehensive, as the CSW contacts were not documented in the updated NSPs, and identified case plan goals were vague. The children's progress on identified case plan goals was not clear.

  The Administrator reported that in the future, staff will ensure that the children's progress toward meeting their NSP goals is clearly documented in their NSPs. It is noted that Dream Catcher representative attended the OHCMD NSP training for providers in January 2012.

Recommendations

Dream Catcher's management shall ensure that:

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

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

Education and Workforce Readiness

- A child was not enrolled in school within three days of placement. The child was placed on January 18, 2012 and was not enrolled until January 24, 2012. The agency reported they had begun the enrollment process by contacting the last school of enrollment for transcripts and medical history, but they had not documented their efforts. The agency will ensure that all efforts to enroll children in school are documented in each child's file.

Recommendation

Dream Catcher's management shall ensure that:

4. Children are enrolled in school within three days of placement, and all efforts to enroll children in school are documented.

Psychotropic Medication

- One child did not have a court-approved authorization for the administration of psychotropic medication. The agency had taken the child to the doctor for her annual physical. During the exam, the child shared with the doctor that she was having difficulty sleeping. The physician prescribed the child a psychotropic medication, but he had not submitted a Psychotropic Medication Authorization (PMA), as required. The agency has since submitted a PMA, and it has been approved by the Court.

- The above mentioned child did not have a psychiatric evaluation for psychotropic medication prescribed. The child has since been evaluated by a psychiatrist and is being evaluated monthly for medication management.

Recommendations

Dream Catcher's management shall ensure that:

5. All children have a court-approved PMA on file.

6. All children on psychiatric medication have a current psychiatric evaluation/review.

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

The OHCMD's last compliance report, dated June 27, 2012, identified four recommendations.

Results

Based on our follow-up, Dream Catcher fully implemented two of four of the previous recommendations for which they were to ensure that:

- Consequences were fair.
- Employee health screenings were timely.

Dream Catcher did not implement two prior recommendations. Specifically:

- Dream Catcher was to ensure the development of comprehensive initial NSPs
- Dream Catcher was to ensure the development of updated NSPs.

Dream Catcher's management shall ensure that:

7. It fully Implements the two outstanding recommendations from the June 27, 2012 monitoring report, which are noted in this report as Recommendations 2 and 3.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The A-C has not conducted a fiscal review for Dream Catcher.

THE DREAM CATCHER FOUNDATION, INC. GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

1782 W. 42nd Street
Los Angeles, CA 90062
License # 198205787
Rate Classification Level: 10

3601 2nd Avenue
Los Angeles, CA 90018
License # 198205789
Rate Classification Level: 10

1537 W. 49th Street
Los Angeles, CA 90062
License # 198205798
Rate Classification Level: 10

	Contract Compliance Monitoring Review	**Findings: October 2012**
I	**Licensure/Contract Requirements** (9 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Transportation Needs Met	2. Full Compliance
	3. Vehicle Maintained In Good Repair	3. Full Compliance
	4. Timely, Cross-Reported SIRs	4. Full Compliance
	5. Disaster Drills Conducted & Logs Maintained	5. Full Compliance
	6. Runaway Procedures	6. Full Compliance
	7. Comprehensive Monetary and Clothing Allowance Logs Maintained	7. Full Compliance
	8. Detailed Sign In/Out Logs for Placed Children	8. Full Compliance
	9. CCL Complaints on Safety/Plant Deficiencies	9. Improvement Needed
II	**Facility and Environment** (5 Elements)	
	1. Exterior Well Maintained	Full Compliance (ALL)
	2. Common Areas Maintained	
	3. Children's Bedrooms	
	4. Sufficient Recreational Equipment/Educational Resources	
	5. Adequate Perishable and Non-Perishable Foods	
III	**Maintenance of Required Documentation and Service Delivery** (10 Elements)	
	1. Child Population Consistent with Capacity and Program Statement	1. Full Compliance
	2. County Worker's Authorization to Implement NSPs	2. Full Compliance
	3. NSPs Implemented and Discussed with Staff	3. Full Compliance
	4. Children Progressing Toward Meeting NSP Case Goals	4. Full Compliance
	5. Therapeutic Services Received	5. Full Compliance
	6. Recommended Assessment/Evaluations	6. Full Compliance

	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	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. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Full Compliance 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	1. Improvement Needed 2. Improvement Needed
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	Full Compliance (ALL)

	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 (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	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)

December 28, 2012

To: Out of Home Management Division
9320 Telstar Ave, Suite 206
El Monte, California 91731

Attention: Sonya Noil, Group Home Monitor

From: The Dream Catcher Foundation, Inc (DCFI)
2814 W. Martin Luther King Blvd.
Los Angeles, California, 90008

Regarding: Corrective Action Plan (CAP) - Group Home Compliances Review Results

Date of Audit: November 28, 2012

Dream Catcher had one deficiency in 2012 from Community Care Licensing. A minor tripped on a carpet runner while horse playing. Minor ignored staff's request to stop and slipped and fell. DCFIs Plan of Correction (POC) was to remove the rug. In the future DCFI will use non-slip runners in high traffic areas.

III MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY:

1) **Finding(s)** #23. DCFI Treatment Team did not develop comprehensive initial Needs and Services Plan (NSP) for one (1) out of six (6) clients surveyed.

Correction Action Plan

DCFI will ensure that the initial NSPs are comprehensive. The client's goals will be clear, realistic and measurable under each category (competency). DCFI will utilize S.M.A.R.T guidelines when writing client goals. NSP's will be reviewed by Social Worker Supervisor, Nekisha Kee, MSW, and facility social worker before implementation.

Person(s) Responsible for implementation of the CAP

DCFI Social Work Team, Nekisha Kee, MSW, Raphael Johnson, PH.D, LCSW, Mary Boyd, LCSW, and Administrator, Theresa McPherson, MFT, will ensure implementation of the CAP.

Time Frame of Implementation

The CAP has been implemented.

2) **Finding(s):** #24. The Treatment Team did not develop comprehensive update (quarterly) Needs and Services Plans (NSP) for four (4) out of six (6) clients surveyed.

Correction Action Plan

Refer to the above Correction Action Plan (finding #23)

Person(s) Responsible for implementation of the CAP

Refer to the above Correction Action Plan (finding #23)

Time Frame of Implementation

Refer to the above Correction Action Plan (finding #23)

IV EDUCATION AND WORKFORCE READINESS

Finding(s): #25. One (1) client was not enrolled in school within three (3) school days after placement and documentation was not clear as to the reason.

First day of placement DCFI Education Liaison, Latoya Lewis, requested school records from previous school be faxed to her. School records were received at the close of the second (2) school day. On the third day client could not be enrolled due to dependency court hearing.

Correction Action Plan

When there are circumstances where a client cannot be enrolled within three (3) school days after placement Education Liaison will document circumstances and attempts daily until client is enrolled.

Person Responsible for Implementation of the CAP

Education Liaison, Latoya Lewis, and Agency Administrator, Theresa McPherson.

Time Frame of Implementation

The CAP has been implemented

VI PSYCHOTROPIC MEDICATION:

1) Finding(s): #34. There was one client that was prescribed a psychotropic medication on an emergency bases. The prescribing physician did not follow through and fax the JV-220(A) to DCFS D-Rate unit for approval.

Correction Action Plan

DCFI Social Worker, Edith Sanchez, who manages all psychotropic medication, P.M.A.S, will follow up with DCFS D-Rate unit to ensure that physician / psychiatrist has faxed over the JV-220(A) for approval before administering emergency psychotropic medication to client.

Person(s) Responsible for Implementation of the CAP

Social Worker, Edith Sanchez and Administrator, Theresa McPherson, and Child Care Worker Supervisor, Earlene Johnson, will ensure the implementation of the CAP.

Time Frame of Implementation

CAP has been implemented.

2) Finding(s): #35. As noted on Monitoring Review Field Exit Summary there was a current psychotropic evaluation/ review, 561 (c) filled out by physician for same client in #34 who the JV-220(A) was not faxed to psychotropic desk by the prescribing physician (see monitors notes)

Correction Action Plan

N/A

Person(s) Responsible for Implementation of the CAP

N/A

Time Frame of Implementation

N/A

Respectfully submitted,

Theresa McPherson, MFT
Administrator