County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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April 22, 2014

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

From: Philip L. Browning
Director

LIFECIRCLES UNLIMITED, INC., d.b.a. LIFECIRCLES 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 Lifecircles Unlimited, Inc., d.b.a. Lifecircles Group Home (the Group Home) in November 2013. The Group Home has one site located in the Third Supervisorial District and provides services to County of Los Angeles DCFS foster children and youth. According to the Group Home's program statement, its purpose is "to provide a stable, constant, nurturing and normal environment that is responsive to the individual resident's needs, to minimize the risk factors that may impede the resident's on-going development, to encourage the bonding process and to strengthen parent/child attachment. Finally, our purpose is to support the parents' efforts to reunite with their child by providing parent education, advocacy, and support."

The Group Home has one 6-bed site and is licensed to serve a capacity of six boys, ages 12 through 17. At the time of review, the Group Home served four placed DCFS children. The placed children's overall average length of placement was 7 months and their average age was 14.

SUMMARY

During OHCMD's review, the interviewed children reported: feeling safe at the Group Home; having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity.

The Group Home was in full compliance with 6 of 10 areas of our Contract compliance review: Maintenance of Required Documentation and Service Delivery; Health and Medical Needs; Personal Rights and Social/Emotional Well Being; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records.

OHCMD noted deficiencies in the areas of Licensure/Contracts Requirements, related to the vehicle used to transport the children requiring repairs, submission of Special Incident Reports via ITrack were not always timely and Community Care Licensing (CCL) cited the Group Home for deficiencies and findings noted during CCL investigations; Facility and Environment, related to two exterior window screens that were missing and the carpet in bedrooms and common areas was separating from the floor, poorly maintained upper kitchen cabinet doors, several missing window blind slats and a dirty living room ceiling; Education and Workforce Readiness, related to two children's case files that did not contain any report cards or progress reports; and Psychotropic Medication, related to two newly placed children, who were prescribed psychotropic medication, did not have current Psychotropic Medication Authorizations in their case files.

Attached are the details of our review.

REVIEW OF REPORT

On February 3, 2014 the DCFS OHCMD Monitor, Donald Luther, held an Exit Conference with Group Home representatives: Mamie Nelson, Administrator and Loretta Cogan, Social Worker, of Lifecircles Unlimited, Inc., d.b.a. Lifecircles Group Home. The Group Home representatives: were in agreement with the review findings and recommendations; were receptive to implementing systemic changes to improve 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 and CCL.

The Group Home provided the attached approved CAP addressing the recommendations noted in this compliance report. OHCMD will verify that these recommendations have been implemented and provide technical assistance during our next visit to the Group Home in June 2014. An addendum to the report will be submitted 30 days after the completion of the review to address CAP implementation.

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

PLB:EM:KR
RDS:PBG:dl

Attachments

c: William T Fujioka, Chief Executive Officer
John Naimo, Acting Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Dewayne Winrow, PhD, Executive Director, Lifecircles Unlimited, Inc.
Lenora Scott, Regional Manager, Community Care Licensing
Angelica Lopez, Acting Regional Manager, Community Care Licensing

LIFECIRCLES UNLIMITED, INC., d.b.a. LIFECIRCLES GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

12681 Louvre Street
Pacoima, CA 91331
License # 198207474
Rate Classification Level: 12

	Contract Compliance Monitoring Review	Findings: November 2013
I	**Licensure/Contract Requirements** (9 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Provided Children's Transportation Needs	2. Full Compliance
	3. Vehicle Maintained In Good Repair	3. Improvement Needed
	4. Timely, Cross-Reported SIRs	4. Improvement Needed
	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	1. Improvement Needed
	2. Common Areas Well Maintained	2. Improvement Needed
	3. Children's Bedrooms Well Maintained	3. Improvement Needed
	4. Sufficient Recreational Equipment/Educational Resources	4. Full Compliance
	5. Adequate Perishable and Non-Perishable Foods	5. Full Compliance
III	**Maintenance of Required Documentation and Service Delivery** (10 Elements)	
	1. Child Population Consistent with Capacity and Program Statement	Full Compliance (ALL)
	2. County Children's Social 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 Children's Social Worker's 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	
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/Progress Reports Maintained 4. Children's Academic or Attendance Increased 5. GH Encouraged Children's Participation in YDS or Equivalent Services and Vocational Programs	1. Full Compliance 2. Full Compliance 3. Improvement Needed 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. Full Compliance
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 Nutritious 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. Children's Chores Reasonable 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 (GH, School, Community)	Full Compliance (ALL)

	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 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)

LIFECIRCLES UNLIMITED, INC., d.b.a. LIFECIRCLES GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2013-2014

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the November 2013 review. The purpose of this review was to assess Lifecircles Unlimited, Inc., d.b.a. Lifecircles Group Home's (the Group Home) compliance with its County contract and State regulations and included a review of the Group Home'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, and
- Personnel Records.

For the purpose of this review, four Department of Children and Family Services (DCFS) placed children were selected for the sample. The Out-of-Home Care Management Division (OHCMD) interviewed four children and reviewed their case files to assess the care and services they received. Additionally, three discharged children's files were reviewed to assess the Group Home's compliance with permanency efforts. At the time of the review, two placed child were prescribed psychotropic medication. OHCMD reviewed the children's case files to assess for timeliness of the Psychotropic Medication Authorization and to confirm the required documentation of psychiatric monitoring.

OHCMD reviewed three staff files for compliance with Title 22 Regulations and County contract requirements and conducted a site visit to assess the provision of quality of care and supervision.

CONTRACTUAL COMPLIANCE

OHCMD found the following four areas out of compliance.

Licensure/Contract Requirements

- The passenger van used to transport placed children was in need of repairs. The rear door would not open and the rear lock was missing. In addition, the side push-out window latches were not attached. The OHCMD Monitor verified the repairs were completed at the Exit Conference on February 3, 2014.

- Submissions of Special Incident Reports (SIRs) were not timely reported through the ITrack system after being submitted via fax, when the Group Home computer was inoperable. Upon notice from OHCMD of the discrepancy, the Group Home submitted the SIRs.

- CCL cited the Group Home on November 20, 2013 as a result of a Violation of Personal Rights related to an argument and a physical altercation that occurred between two staff members and a handyman while placed children were present.

The Group Home submitted a Plan of Correction (POC), which included the termination of one staff member and the handyman involved in the altercation. CCL cleared the citation on December 23, 2013.

- On November 20, 2013 CCL also cited the Group Home for a Building and Grounds Violation based on observations and interviews with the children. It was determined that the facility had a roach/insect infestation.

The Group Home had already addressed the issue and was contracting with a professional pest control company for bi-monthly service or more often, if needed. CCL cleared the citation on December 23, 2013.

- CCL cited the Group Home on November 20, 2013 for a Building and Grounds Violation when it was determined that the toilet in the children's bathroom "clogs up" on a regular basis, presenting a potential health and sanitation issue. A POC was required and submitted to CCL, which included a professional plumber inspecting the piping and toilet. CCL cleared the deficiency on December 23, 2013.

OHCMD ensured that the placed children had access to the restroom connected to the staff office by instructing the Group Home to place the key in an accessible area for everyone's use. In addition, the new handyman is now available 24 hours a day, if circumstances warrant emergency plumbing needs.

On October 2, 2013 OHCMD placed the Group Home on "Hold" status as a result of the staff altercation incident, and supervision concerns. The Group Home satisfied conditions of the "Hold," which were sufficiently addressed through staff changes, staff retraining, and procedural changes. The "Hold" was subsequently lifted on October 24, 2013.

Recommendations

The Group Home's management shall ensure that:

1. The vehicles are well maintained.

2. SIRs are timely via ITrack and appropriately submitted.

3. The Group Home is free of CCL citations/complaints.

Facility and Environment

- Two screens were missing from windows in the living room. During a follow-up visit on December 13, 2013, the OHCMD Monitor verified that the screens had been replaced.

- The living room carpet was separating from the floor.

At the Exit Conference on February 3, 2014, the Administrator advised the OHCMD Monitor that the carpet in the living room and office areas would be replaced by floor tiles and would be installed by March 6, 2014. The Group Home provided OHCMD photographic documentation that the tile flooring had been installed. OHCMD conducted a follow-up visit on March 13, 2014 and verified the repairs were completed.

- The upper kitchen cabinet shutter doors were damaged; they had broken slats, were loosely hung, and had loose and missing knobs and peeling paint.

At the Exit Conference the OHCMD Monitor observed that new cabinet doors had been purchased and the Administrator advised that the installation is scheduled to begin on February 5, 2014. The Group Home provided OHCMD photographic documentation that the new cabinet doors had been installed. OHCMD conducted a follow-up visit on March 13, 2014 and verified the repairs were completed.

- The living room ceiling was dirty and several vertical blind slats were missing.

During a follow-up visit on December 13, 2013, the OHCMD Monitor observed the ceiling had been cleaned and the missing blind slats had been replaced.

- The carpet in two of the bedrooms was separating from the floor.

At the Exit Conference, the Administrator advised the OHCMD Monitor that the carpet in the bedrooms would be replaced by floor tiles and would be installed by March 6, 2014. Area rugs would be purchased and placed at the side of each bed for the comfort of the children. The Group Home provided OHCMD photographic documentation the tile flooring has been installed. OHCMD conducted a follow-up visit on March 13, 2014 and verified that the repairs were completed.

Recommendations

The Group Home's management shall ensure that:

4. The exterior and grounds of the Group Home are well maintained.

5. The common quarters are well maintained.

6. The children's bedrooms are well maintained.

Education and Workforce Readiness

- Two children did not have documentation of current or past school report cards or progress reports in their case files as the Group Home indicated that they were not provided by the Children's Social Workers at time of placement.

The Group Home subsequently provided OHCMD with copies of the children's most recent school report cards.

Recommendation

The Group Home's management shall ensure that:

7. Copies of current school report cards/progress reports are obtained and maintained in the children's case files.

Psychotropic Medication

- Two children prescribed psychotropic medication did not have current Psychotropic Medication Authorizations for the medications they were being administered. One child had recently been placed from the home of his parent and the other child had been recently placed from a crisis center and the Group Home was not provided with their Psychotropic Medication Authorizations.

At the Exit Conference, the Group Home provided the OHCMD Monitor with documentation of current Psychotropic Medication Authorizations for the two children.

Recommendation

The Group Home's management shall ensure that:

8. All children being prescribed psychotropic medication have a current Psychotropic Medication Authorizations in their case file.

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

The OHCMD's last compliance report, dated October 10, 2013, identified eight recommendations.

Results

Based on our follow-up, the Group Home fully implemented 3 of 8 recommendations for which they were to ensure that:

- A carbon monoxide detector is always installed and functioning in the Group Home,
- All recreational equipment is maintained in good repair, and

- All updated Needs and Services Plans (NSP) are comprehensive and contain all elements in accordance with the NSP template.

The Group Home did not fully implement five recommendations for which they were to ensure that:

- The Group Home's vehicle is properly maintained and timely serviced,
- All SIRs are timely submitted and properly cross-reported, in compliance with the County contract and SIR reporting guidelines,
- The Group Home is free of CCL citations/complaints,
- The exterior of the Group Home site is maintained in good condition, and
- Full compliance of outstanding recommendations from OHCMD's prior monitoring report.

Recommendation

The Group Home's management shall ensure that:

9. The outstanding recommendations from the October 10, 2013 report from the prior fiscal year monitoring review, which are noted in this report as Recommendations 1, 2, 3, 4, and 9, are fully implemented.

At the Exit Conference, the Group Home representatives expressed their desire to maintain the vehicle in proper condition and will have staff examine the interior and exterior and repairs will be made immediately as needed. The SIRs will be timely submitted and all faxed submissions will be electronically sent as conditions permit. Further, the Administrator will continue to strive to ensure the Group Home remains in compliance with all Title 22 Regulations, which include being free of CCL citations/complaints. The Administrator has also developed a protocol for conducting daily facility reviews to document conditions and issues that require administration's attention to schedule repairs. OHCMD will verify that these recommendations have been implemented and provide technical assistance during our next visit to the Group Home in June 2014.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The Auditor-Controller conducted a fiscal review of the Group Home for the period July 1, 2009 through June 30, 2010. The fiscal report, dated July 12, 2011, identified $406 in unallowable expenditures and $969 in unsupported/inadequately supported expenditures for a total of $1,375, which needed to be repaid. The DCFS Fiscal Monitoring and Special Payments Section informed OHCMD on February 12, 2013, that this amount has been paid in full.

Lifecircles Unlimited Inc.
Lifecircles Group Home

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Lifecircles

We make a way when ther's no way
That's the circle of life.

Patricia Bolanos-Gonzalez, CSA II
Donald Luther, Children Service Administrator
Out of Home Management Division
Department of Children and Family Services
9320 Telstar Avenue, Suite 216
El Monte, Ca 91731
From: Mamie Nelson
Director LifeCircles Group Home

03/05/2014

Dear Ms. Bolanos-Gonzalez

This is the Corrective Action Plan for Lifecircles Group Home 2013-2014 Monitoring review Compliance Report:

3.) Does the Group Home maintain vehicle in which the children are transported in good repair?

A.) The Group Home has made all needed repairs cited by the monitor. The back door has been repaired and will now open and close and lock automatically. The sliding glass door window latches are connected and in good working order. OHCMD was sent photographic of the repairs. Monitor has inspected and approved the van condition. The Group Home maintenance person will ensure that any and all repairs that are needed or scheduled are reported to the Program Director who will ensure that repairs are completed and the proper documentation and information is maintained in the Vehicle Log. The Group Home has developed a log that will contain records and receipts of the vehicle service, due dates and mileage along with schedule the maintenance log.

4.) Are all Special Incident Reports (SIRs) appropriately documented and cross- reported timely?

A.) Staff was trained on 1/06/2014 on "Special Incident Reporting and Cross Reporting". The Program Director and the Program Coordinator will insure that all SIRs are reported and cross reported to the appropriate agency within twenty four hours of the incident, electronically or manually.

9.) Is the Group Home free of any substantiated Community Care Licensing Complaints on safety or physical plant deficiencies?

A.) A written plan has been submitted and approved by CCL. Staff has been attending training classes on Group Home conduct and supervision. Shift supervisor has been trained on conduct expected from all staff. A handyman has been hired and is available 24 hours. To take care of issues such as plumbing needs and other emergencies. A cleaning and pest control company has been contracted by the group home. The Program Director is responsible for documentation of all contractors.

10.) Are the exterior and grounds of the Group Home well maintained?

A.)Screens are on all windows, lawns are cut once a week by the maintenance person along with making sure all area front and back are kept clean. The Program Coordinator will be responsible for the maintenance person and the up keep of the grounds.

11.) Are common quarters well maintained?

A.) The living room carpet is being replaced with tile and will be completed on 03/15/2014. The work invoice will be submitted with this plan and the receipt showing that the job is completed will be submitted upon completion of the job. The kitchen cabinets were replaced on 02/20/14 and the ceiling has been cleaned and painted. The maintenance person will be responsible for maintaining all common quarters supervised by the Program Director.

12.) Are the children's bedrooms well maintained?

A.) The carpet in the children's room are being replaced with tile and will be completed on 03/15/2014. The work invoice will be submitted with this plan and the receipt showing that the job was completed will be submitted upon completion of the job. The maintenance person will be responsible for maintaining children's bedrooms supervised by the Program Director.

27.) Are current copies of the children's report cards or progress reports maintained?

A.) All clients' progress reports or report cards are in the client files. The Social Worker will be responsible for maintaining all progress reports in the files.

34.) Are there current court-approved authorizations for the administration of psychotropic medication or did the GH document efforts to obtain?

A.) All clients currently on psychotropic have PMAs, Program Social Worker is responsible for all PMAs and is also responsible for documentation of efforts to obtain PMAs. All new cases are being screened for PMAs prior to admittance in the program. The Program Director is responsible for the Social Worker.

Mamie Nelson, Director

Lifecircles Group Home