AGENDA ITEM _____

# County of Los Angeles
## DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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

PHILIP L. BROWNING
Director



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July 21, 2015

To: Supervisor Michael D. Antonovich, Mayor
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Don Knabe

Cynthia McCoy Villa for

From: Philip L. Browning
Director

**PENNY LANE CENTERS GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW**

The Department of Children and Family Services (DCFS) Contract Administration Division (CAD) conducted a review of Penny Lane Group Home (the Group Home) in March 2014. The Group Home has nine sites located in the Third Supervisorial District and two sites located in the Fifth Supervisorial District. All sites provide services to DCFS foster children and Probation youth. According to the Group Home's program statement, its stated purpose is "to provide each child with an individualized treatment or needs and services plan that will address and successfully treat a child's presenting problems and ensure the child's safety, permanency and well-being."

The Group Home maintains ten, 6-bed sites and one, 45-bed site. The Group Home is licensed to serve a capacity of 105 males and females ages 12 through 18. At the time of review, the Group Home supervised 43 DCFS placed children and 52 Probation foster youth. The placed children's overall average length of placement was 4 months and their average age was 16.

## SUMMARY

During CAD's review, the interviewed children generally 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 9 of 10 areas of our review: Licensure/Contract Requirements; 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.

CAD noted one deficiency in the area of: Facility and Environment, related to two boxes of expired food at one location.

Attached are the details of our review.

## REVIEW OF REPORT

On May 12, 2014, Theodore Howard, DCFS CAD, held an Exit Conference with Group Home representative Wendy Carpenter, Assistant Executive Director. The Group Home representative agreed with the review finding and recommendation, was 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 Community Care Licensing.

The Group Home provided the attached approved contract compliance CAP addressing the recommendation noted in this report.

CAD conducted a follow-up visit to the Group Home on June 12, 2014 and verified that the CAP had been implemented.

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

PLB:EM
LTI:th

Attachments

c: Sachi A. Hamai, Interim Chief Executive Officer
John Naimo, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Wendy Carpenter, Assistant Executive Director, Penny Lane Centers
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Lenora Scott, Regional Manager, Community Care Licensing Division

# PENNY LANE CENTERS GROUP HOME
# CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

**Main Facility**
**15302 Rayen Street**
**North Hills, CA 91343**
**License # 191202002**
**Rate Classification Level: 12**

**Satellite 1 Group Home**
**9723 Burnet Avenue**
**North Hills, CA 91343**
**License # 191202003**
**Rate Classification: 12**

**Satellite 2 Group Home**
**16656 Nordhoff Street**
**North Hills, CA 91343**
**License # 19122188**
**Rate Classification: 12**

**Satellite 3 Group Home**
**13804 Osborne Street**
**Arleta, CA 91331**
**License # 191290246**
**Rate Classification: 12**

**Satellite 4 Group Home**
**8616 Valjean Street**
**North Hills, CA 91343**
**License # 197605935**
**Rate Classification: 12**

**Satellite 5 Group Home**
**8806 Haskell Avenue**
**North Hills, CA 91343**
**License # 191221975**
**Rate Classification: 12**

**Satellite 6 Group Home**
**11641 Balboa Blvd.**
**Granada Hills, CA 91344**
**License# 191220837**
**Rate Classification: 12**

**Satellite 7 Group Home**
**9630 Wilbur Avenue**
**Northridge, CA 91324**
**License # 191220863**
**Rate Classification: 12**

**Satellite 8 Group Home**
**9845 Hayvenhurst Avenue**
**North Hills, CA 91343**
**License # 191221387**
**Rate Classification: 12**

**Satellite 9 Group Home**
**6329 Clybourne Avenue**
**North Hollywood, CA 91606**
**License # 198207800**
**Rate Classification: 12**

**Satellite 10 Group Home**
**1610 No. Valley**
**Burbank, CA 91505**
**License # 198207799**
**Rate Classification: 12**

| | Contract Compliance Monitoring Review | Findings: March 2014 |
|---|---|---|
| I | **Licensure/Contract Requirements** (9 Elements)<br><br>1. Timely Notification for Child's Relocation<br>2. Provided Children's Transportation Needs Met<br>3. Vehicle Maintained In Good Repair<br>4. Timely, Cross-Reported SIRs<br>5. Disaster Drills Conducted & Logs Maintained<br>6. Runaway Procedures<br>7. Comprehensive Monetary and Clothing Allowance Logs Maintained<br>8. Detailed Sign In/Out Logs for Placed Children<br>9. CCL Complaints on Safety/Plant Deficiencies | Full Compliance (All) |
| II | **Facility and Environment** (5 Elements)<br><br>1. Exterior Well Maintained<br>2. Common Areas Well Maintained<br>3. Children's Bedrooms Well Maintained<br>4. Sufficient Recreational Equipment/Educational Resources<br>5. Adequate Perishable and Non-Perishable Foods | 1. Full Compliance<br>2. Full Compliance<br>3. Full Compliance<br>4. Full Compliance<br><br>5. Improvement Needed |
| III | **Maintenance of Required Documentation and Service Delivery** (10 Elements)<br><br>1. Child Population Consistent with Capacity and Program Statement<br>2. County Children's Social Worker's Authorization to Implement NSPs<br>3. NSPs Implemented and Discussed with Staff<br>4. Children Progressing Toward Meeting NSP Case Goals<br>5. Therapeutic Services Received<br>6. Recommended Assessment/Evaluations Implemented<br>7. County Children's Social Workers Monthly Contacts Documented<br>8. Children Assisted in Maintaining Important Relationships<br>9. Development of Timely, Comprehensive Initial NSPs with Child's Participation<br>10. Development of Timely, Comprehensive, Updated NSPs with Child's Participation | Full Compliance (All) |

| | | |
|---|---|---|
| IV | **Educational and Workforce Readiness** (5 Elements)<br><br>1. Children Enrolled in School Within Three School Days<br>2. GH Ensured Children Attended School and Facilitated in Meeting Their Educational Goals<br>3. Current Report Cards/Progress Reports Maintained<br>4. Children's Academic or Attendance Increased<br>5. GH Encouraged Children's Participation in YDS/ Vocational Programs | Full Compliance (All) |
| V | **Health and Medical Needs** (4 Elements)<br><br>1. Initial Medical Exams Conducted Timely<br>2. Follow-Up Medical Exams Conducted Timely<br>3. Initial Dental Exams Conducted Timely<br>4. Follow-Up Dental Exams Conducted Timely | Full Compliance (All) |
| VI | **Psychotropic Medication** (2 Elements)<br><br>1. Current Court Authorization for Administration of Psychotropic Medication<br>2. Current Psychiatric Evaluation Review | Full Compliance (All) |
| VII | **Personal Rights and Social/Emotional Well-Being** (13 Elements)<br><br>1. Children Informed of Group Home's Policies and Procedures<br>2. Children Feel Safe<br>3. Appropriate Staffing and Supervision<br>4. GH's Efforts to provide Nutritious Meals and Snacks<br>5. Staff Treat Children with Respect and Dignity<br>6. Appropriate Rewards and Discipline System<br>7. Children Allowed Private Visits, Calls and Correspondence<br>8. Children Free to Attend or Not Attend Religious Services/Activities<br>9. Children's Chores Reasonable<br>10. Children Informed About Their Medication and Right to Refuse Medication<br>11. Children Free to Receive or Reject Voluntary Medical, Dental and Psychiatric Care<br>12. Children Given Opportunities to Plan Activities in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)<br>13. Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities (GH, School, Community) | Full Compliance (All) |

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|---|---|---|
| VIII | **Personal Needs/Survival and Economic Well-Being** (7 Elements)<br><br>1. $50 Clothing Allowance<br>2. Adequate Quantity and Quality of Clothing Inventory<br>3. Children Involved in Selection of Their Clothing<br>4. Provision of Clean Towels and Adequate Ethnic Personal Care Items<br>5. Minimum Monetary Allowances<br>6. Management of Allowance/Earnings<br>7. Encouragement and Assistance with Life Book/Photo Album | Full Compliance (All) |
| IX | **Discharged Children** (3 Elements)<br><br>1. Children Discharged According to Permanency Plan<br>2. Children Made Progress Toward NSP Goals<br>3. Attempts to Stabilize Children's Placement | Full Compliance (All) |
| X | **Personnel Records** (7 Elements)<br><br>1. DOJ, FBI, and CACIs Submitted Timely<br>2. Signed Criminal Background Statement Timely<br>3. Education/Experience Requirement<br>4. Employee Health Screening/TB Clearances Timely<br>5. Valid Driver's License<br>6. Signed Copies of Group Home Policies and Procedures<br>7. All Required Training | Full Compliance (All) |

**PENNY LANE CENTERS 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 the finding noted during the March 2014 review. The purpose of this review was to assess Penny Lane Centers 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, seven Department of Children and Family Services (DCFS) placed children and Probation foster youth were selected for the sample. They consisted of three DCFS placed children, three Probation foster youth and one dually supervised child. The Contract Administration Division (CAD) 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 the Group Home's compliance with permanency efforts. At the time of the review, five of the seven reviewed children were prescribed psychotropic medication. Their case files were reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

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

## CONTRACTUAL COMPLIANCE

CAD found the following area out of compliance:

### Facility and Environment

- Adequate perishable and non-perishable foods were not maintained.

CAD found two boxes of expired grits in the pantry of one of the Group Home sites. The Group Home immediately discarded the expired food. The agency instituted a secondary system of logging the expiration dates for all food on the weekly inventory calculation sheet to be reviewed by the Registered Dietitian with the Facility Program Director conducting random weekly checks. On

June 12, 2014, CAD conducted a follow-up visit to ensure the Group Home's implementation of its food review protocol and verified that there was no expired food.

**Recommendation:**

The Group Home's management shall ensure that:

1. Adequate perishable and non-perishable foods are maintained.

## PRIOR YEAR FOLLOW-UP FROM DCFS OUT-OF-HOME CARE MANAGEMENT DIVISION'S (OCHMD'S) GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

The OHCMD's last compliance report, dated September 12, 2013, identified two recommendations.

**Results:**

Based on this year's review, the Group Home fully implemented two recommendations as follows:

- The Group Home is in compliance with Title 22 regulations and County contract requirements.
- Comprehensive updated NSPs are developed and include all required elements in accordance with the NSP template.

The Group Home representative expressed the desire to remain in compliance with Title 22 regulations and Contract requirements. On June 12, 2014, CAD conducted a follow-up visit to ensure the Group Home had implemented its secondary system to verify if expired food is discarded and no expired food was noted. The OHCMD will provide on-going technical assistance prior to the next review.

## MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of the Group Home has not been posted by the Auditor-Controller.

Penny Lane

May 13, 2014

Ted Howard, CSA I
Department of Children and Family Services
Contract Administration Division
3530 Wilshire Blvd. 4th Floor #079
Los Angeles, CA 90010
Office: (213) 351-0203
Fax: (213) 637-0035

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Dear Mr. Howard CSA I,

***The following is Penny Lane's Plan of Correction (POC) following an announced monitoring visit from the Contract Compliance Unit on March 18, 2014. The visit was conducted by Theodore Howard CSA I, and the CAP is due on June 11, 2014.***

**Needs Improvement**: *Facility and Environment: Does the group home maintain adequate nutritious perishable and non-perishable foods and adhere to product's "used by" or" freeze by", "best by", "sell by," or expiration dates? (DCFS reviewers found 2 boxes of grits in pantry that were past the listed expiration date 02/22/14).*

**POC:** To ensure adequate nutritious perishable and non-perishable foods and adhere to product's "used by" or" freeze by", "best by", "sell by," or expiration dates, the Foods Service Department has instituted a secondary system to ensure that no expired foods remain in stock. Effective April 1, 2014, expiration dates for all foods will be recorded on the weekly inventory calculation sheet. This will be reviewed by the Registered Dietitian to further guard against any expired product to be overlooked. Furthermore, the Main Facility Program Director will weekly do random checks to ensure compliance.

As always, we appreciate your feedback and take this an opportunity to better our residential program.

Sincerely,

Laterra Champion MSW

Laterra Champion MSW
Penny Lane Center's
Residential Quality Improvement/
Social Worker Director