COUNTY OF LOS ANGELES
PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY – DOWNEY, CALIFORNIA 90242

(562) 940-2501

JERRY E. POWERS
Chief Probation Officer

August 17, 2015

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

FROM: Jerry E. Powers
Chief Probation Officer

SUBJECT: **GUIDING LIGHT HOME FOR BOYS INC. GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW**

The Department of Probation, Placement Permanency & Quality Assurance (PPQA), Group Home Monitor (GHM), conducted a review of Guiding Light Home for Boys, Inc., operated by Guiding Light, in January 2015. Guiding Light has two sites located in the Fifth Supervisorial District of Riverside County. They provide services to Los Angeles County Probation foster children and Los Angeles County Department of Children and Family Services (DCFS) foster children. According to Guiding Light Home for Boys Inc.'s program statement, its purpose is to provide a structured group living environment designed to motivate and modify behavioral problems and provide treatment from drug and alcohol, anger management, group therapy, one on one therapy, mentorship programs, extensive emancipation, counseling services, tutoring services and church services, for those who are interested.

Guiding Light Home for Boys Inc. has two six-bed sites and is licensed to serve a capacity of 12 boys, 14-17 years old. At the time of this review, Guiding Light Home For Boys Inc. did not have any Los Angeles County Probation or DCFS children; however, they did have 10 children from Riverside County.

One discharged Los Angeles County Probation child file was reviewed to assess compliance with permanency efforts, and five staff files were also reviewed for compliance with Title 22 Regulations and County Contract Requirements.

SUMMARY

Guiding Light Home for Boys Inc. was in compliance with one (1) of the 10 areas of our Contract Compliance Review, "Discharge Children". Six of the areas were not applicable due to the Group Home not having any Los Angeles County Probation or DCFS children placed for the sample. The following areas did not apply during this monitoring review: "Maintenance of

Required Documentation and Service Delivery", "Education and Workforce Readiness", "Health and Medical Needs", "Psychotropic Medication", "Personal Rights and Social/Emotional Well-Being" and "Personal Needs/Survival and Economic Well-Being".

PPQA/GHM noted deficiencies in the remaining three (3) applicable areas: "Licensure/Contract Requirements", "Facility and Environment" and "Personnel Records". In the area of "Licensure/Contract Requirements", Guiding Light Home for Boys Inc. needed to ensure that their vehicles are kept in good repair and that they are free of substantiated Community Care Licensing complaints. It was noted, in the area of "Facility and Environment" that Guiding Light Home for Boys Inc. needed to make minor repairs to the exterior of the home and children's bedrooms, and ensure that all smoke detectors have batteries. In the area of "Personnel Records", Guiding Light Home for Boys Inc. failed to ensure that all employee records contained verification of their minimum education/experience.

REVIEW OF REPORT

On February 4, 2015, Probation PPQA Monitor RaTasha Smith held an Exit Conference with Guiding Light Home for Boys Inc. Assistant Administrator Stanley Powell. Assistant Administrator Powell agreed with the review findings and recommendations and was receptive to implementing systemic changes to improve their compliance with regulatory standards, as well as address the noted deficiencies in a Corrective Action Plan (CAP).

Guiding Light Home For Boys Inc. Group Home provided the attached approved CAP addressing the recommendations noted in this compliance report. A follow-up visit was conducted and all deficiencies cited in the CAP were in the process of being corrected and systems were put in place to avoid future deficiencies. Assessment for continued implementation of recommendations will be conducted during the next monitoring review.

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

If additional information is needed or any questions or concerns arise, please contact Director Lisa Campbell-Motton, Placement Permanency and Quality Assurance, at (323) 240-2435.

JEP:MEP:REB
LCM:ed

Attachments

c: Sachi A. Hamai, Interim Chief Executive Officer
John Naimo, Auditor-Controller
Phillip L. Browning, Director, Department of Children and Family Services
Public Information Office
Audit Committee
Sybil Brand Commission
Justice Deputies
Latasha Howard, Probation Contracts
Stanley Powell, Guiding Light Assistant Administrator
Community Care Licensing

GUIDING LIGHT HOME FOR BOYS INC. GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

GUIDING LIGHT, SITE 1
26624 SAFFRON CIRCLE
MORENO VALLEY, CA 92555
LICENSE NUMBER: # 336426160
RATE CLASSIFICATION LEVEL: 10

GUIDING LIGHT, SITE 2
25123 MIDDLE BROOK WAY
MORENO VALLEY, CA 92551
LICENSE NUMBER: # 336423734
RATE CLASSIFICATION LEVEL: 10

	Contract Compliance Monitoring Review	**Findings: January 2015**
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	1. Full Compliance 2. Full Compliance 3. Improvement Needed 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Improvement Needed
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	1. Improvement Needed 2. Full Compliance 3. Improvement Needed 4. Full Compliance 5. Full Compliance
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 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	N/A

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	N/A
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	N/A
VI	**Psychotropic Medication** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	N/A
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 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)	N/A

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	N/A
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	1. Full Compliance 2. Full Compliance 3. Improvement Needed 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance

GUIDING LIGHT HOME FOR BOYS INC. GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The purpose of this review was to assess Guiding Light Home for Boys compliance with the County contract and State regulations and include a review of the Guiding Light Home for Boys Inc.'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, one (1) discharged child's file was reviewed to assess Guiding Light Home for Boys Inc.'s compliance with permanency efforts. There were no Los Angeles County Probation or DCFS children available for a sample at the time of this monitoring review.

Five (5) staff files were reviewed for compliance with Title 22 Regulations and County contract requirements, and a site visit was conducted to assess the provision of quality care and supervision.

CONTRACTUAL COMPLIANCE

Of the 10 areas under review, only four (4) were applicable, and the following three (3) areas were out of compliance.

Licensure/Contract Requirements

- During the inspection of the facility vehicles, it was noted that the vehicle located at the Middle Brook site was missing the vehicle's head rests, had a broken right tail light and the inside driver and passenger side door panels need to be repaired or replaced.

- Guiding Light Home for Boys Inc.'s Middle Brook site has a substantiated allegation on November 25, 2014, for lack of supervision for a minor consuming alcohol and being assaultive towards the residents and staff. Guiding Light has satisfied CCL's requirements for this citation, and staff member involved in the incident of lack of supervision was terminated based on the findings of the investigation.

Recommendation

Guiding Light Home for Boys Inc. management shall ensure that:

1. All vehicles are repaired in a timely manner and remain in good repair.

2. All sites strive to be free of substantiated complaints by adhering to all Community Care Licensing Requirements and Standards.

Facility and Environment

An inspection of the interiors and exteriors of Guiding Light Home for Boys Inc. revealed some minor deficiencies that require correction.

- At Guiding Light Home for Boys Inc.–Saffron Site, the Group Home needs to ensure that all smoke detectors contain batteries. During the walk through inspection, it was noted that the smoke detectors located in two of the bedrooms were missing batteries; however, the batteries were replaced prior to the completion of the inspection.

- At Guiding Light Home for Boys Inc.-Middle Brook Site, the Group Home needed to cut the grass in the back yard and repair or replace two sinks in the bedroom bathrooms due to rust.

Recommendation

Guiding Light Home for Boys Inc. management shall ensure that:

1. All of the aforementioned physical deficiencies sited to the exterior of the home are repaired or corrected in a timely manner.
2. All of the aforementioned physical deficiencies sited in the children's bedrooms are repaired or corrected in a timely manner.

Personnel Records

- During the review of the five (5) employee files, one (1) file reviewed was missing verification of their education/experience.

Recommendation

Guiding Light Home for Boys Inc. management shall ensure that:

1. All employees have documentation of their education/experience included in their personnel files.

PRIOR YEAR FOLLOW-UP FROM THE PROBATION PPQA GHM GROUP HOME CONTRACT COMPLIANCE MONITORING REVIEW

PPQA/GHM's last compliance report dated July 11, 2014, identified six recommendations.

Results

Based on the follow-up, Guiding Light Home for Boys fully implemented four (4) of the six (6) previous recommendations for which they were to ensure that:

- Clothing voucher waivers were developed
- Physical deficiencies were repaired; however, the Group Home has new deficiencies in the area of "Facility and Environment"
- Discharged Children's NSP's were comprehensive and detailed if the child was making progress towards their permanency goal
- All personnel had signed criminal background statements and timely health screens

However, the follow-up discovered that Guiding Light Home for Boys Inc. failed to fully implement one (1) of the previous six recommendations, for which they were to ensure that:

- They remain free of any substantiated Community Care Licensing complaints on safety and/or physical plant deficiencies.

The one area "Maintenance of Required Documentation and Service Delivery" was not addressed during this monitoring review due to the Group Home not having any Los Angeles County Probation or DCFS children.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A recent fiscal review of Guiding Light has not been conducted by the Auditor Controller.

Guiding Light Home for Boys, Inc.

25123 Middlebrook Way Moreno Valley, CA 92551
Facility (951) 485-0423 Fax (951) 485-9165
Stanley Powell, Administrator (951) 801-9674

February 27, 2015

Attention: SDPO Pamela Pease
DPO Ratasha Smith
11701 S. Alameda St 2nd floor
Lynwood, CA 90262

Re: Corrective Action Plan (CAP)

I. LICENSURE/CONTRACT REQUIREMENTS

Deficiency Area - #3 – Does the group home maintain vehicle in which the children are transported in good repair? (SAFETY)

Comments regarding deficiencies:
Middlebrook site vehicle is missing head rests, broken tail light, needs to repair/replace drivers and passengers inside door panels.

Guiding Light's Corrective Action Plan:
Repair and necessary replacements were made to the Middlebrook site vehicle.
In order to prevent any future violation in this area Guiding Light home for Boys, Inc. has implemented the following procedures and revisions to "Daily Vehicle Checklist"
The Guiding Light Administrator and assigned designee will be responsible for ensuring the completion of and maintaining Daily Vehicle Checklists **(See Attachment #1: Daily Vehicle Checklist)**
Procedure:

1) The Quality Assurance Coordinator and Administrator shall conduct:
   - Monthly vehicle checks
   - Weekly reviews of completed Daily Vehicle Checklists, to ensure completion of checklist and ensure vehicle is in good repair and being maintained. (See Daily Vehicle Checklist)
2) Child Care Workers are responsible for:
   - Conducting daily vehicle checks, utilizing the updated Daily Vehicle Checklist; (See Daily Vehicle Checklist)
   - Reporting any damage or missing immediately for replacement or repairs; completing maintenance request forms if applicable.
3) Facility Managers are responsible for:
   - Conducting weekly vehicle inspections, reporting findings and completing maintenance request forms if applicable.

The following person(s) are responsible for ensuring the above policy and procedure is fully implemented:

The Guiding Light Administrator/Management as designated by Administrator.

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Deficiency Area- #9- Is the group home free of any substantiated Community Care Licensing complaints on safety and/or physical plant deficiencies since the last review? (SAFETY)

Comments regarding deficiency: Saffron Circle site has a substantiated allegation November 25, 2014, for lack of supervision for a minor consuming alcohol and a minor being assaultive towards residents and staff.

Guiding Light Corrective Action Plan:
The staff person involved was suspended immediately following the incident, pending an internal investigation. Staff member was terminated on 12/02/2014, based on the findings of the investigation.

In order to prevent any future violation in this area and ensure adequate supervision of youth at all times, Guiding Light Home for Boys, Inc. has implemented the following policies and procedures. These procedures were discussed, explained and enforced. Please review following attachments, December 4th Meeting Notes, December 18th Meeting Notes and Memo's distributed on 12/15/2014. In addition, Guiding Light will also be installing surveillance camera's pending proper approval and authorizations. Installment of such surveillance devices has already been discussed with LPA.

The Guiding Light Administrator and assigned designee will be responsible for ensuring full compliance and implementation of Policies and Procedures. **(See Attachment #2: December 4th Meeting Notes, Attachment #3: December 18th Meeting Notes and Attachment #4: 12/15/2014 Memo's)**

Procedure:

1) All Facility Managers and Child Care Workers are responsible for:
    - Interactive Supervision
    - Documentation of activity and whereabouts of staff members in relation to the youth.
    - NOC Child Care Workers are to document and email house updates every 15minutes when youth are awake and 30minutes when they appear asleep. Email is to be sent to designated email address or text to the Administrator in 15 or 30minute intervals if there is not any internet connection.
2) The Administrator shall ensure:
    - Facility Managers and Child Care Workers are interactively supervising.
    - All staff efficiently documenting activities and whereabouts of all staff members in relation to the activity.
    - NOC staff is submitting 15 minute and 30minute house updates to assigned email or texting Administrator in aforementioned intervals if there is not any internet access.
    - Issue disciplinary actions to any staff persons who are not complying with procedure.

II. FACILITY AND ENVIRONMENT

Deficiency Area #10 – Are the exterior and grounds of the group home well maintained? (Front and back yards clean and adequately landscaped; condition of the home exterior driveway, walkways and fences; window screens) (SAFETY)

Comments regarding deficiencies:
Middlebrook site needs to cut the grass in the back yard.

Deficiency Area #12 – Are children's bedrooms well maintained? (Clean/sanitary, neat; comfortable; adequate lighting, window coverings, storage space; beds, mattresses, furniture, and flooring: full component of linens on bed, age appropriate decorations, and appropriate sleeping arrangements) (SAFETY)

Comments regarding deficiencies:
Middlebrook site needs to repair or replace two sinks in the bedrooms due to rust. Saffron Circle site was missing batteries for smoke detectors in two of the bedrooms; however, they were replaced before the walk through inspection was completed.

Guiding Light Corrective Action Plan:
Administrator met with contracted handy man immediately to discuss deficiencies. Both sinks were replaced and landscaping was done; laying brick tiles in backyard in place of grass, providing a larger play area space for youth.

Prevention of violation in this area is being ensured by adding frequent checks of these areas which have been added to the "Facility Review"

The Guiding Light Administrator, Director and assigned designee will be responsible for ensuring repairs and replacements by contracted handy man are being completed in a timely manner. Full compliance and completion of Facility Review will be monitored by Administrator. **(See attachment #5 Facility Review)**

Procedure:

1) The Quality Assurance Coordinator and Administrator shall conduct:
   - Frequent Facility Site Checks
   - Weekly reviews of completed Facility Reviews, to ensure completion of checklist and ensure facilities and grounds are being maintained.
   - Ensure that Maintenance Request are being completed and submitted when anything is in need of repair or replacement.
   - Contracted handy man is completing repairs or replacements in a timely manner. (See Facility Review)

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2) Child Care Workers are responsible for:
   - Reporting any damages or anything requiring immediate attention.
   - Completing maintenance request forms if applicable.

3) Facility Managers are responsible for:
   - Conducting Facility Reviews, reporting findings and completing maintenance request forms if applicable.

The following person(s) are responsible for ensuring the above policy and procedure is fully implemented:

The Guiding Light Administrator/Management as designated by Administrator.

X. PERSONNEL RECORDS

Deficiency Area #61 – Do GH staff who have direct contact with the children meet the educational/experience requirement? (SAFETY)

Comments regarding deficiencies:
A personnel file was missing minimum education/experience.

Guiding Light Corrective Action Plan:
Administrator will ensure that all prospective employees meet the minimum education/experience; set forth by Guiding Light Home for Boys, Inc. Administrator will also ensure that verification of minimum education/experience is obtained by employee immediately and placed in personnel file.

Preventing further occurrence of such incident, GLHB Quality Assurance Coordinator will check personnel files as they are completed ensuring that all require documentation and verifications are received and placed in personnel file, also ensuring that the employee meets the minimum requirement are met. Personnel File will then be checked again by Director to ensure completion of personnel file.

The following person(s) are responsible for ensuring the above procedure is fully implemented: Guiding Light Administrator, Quality Assurance Coordinator, Director and Management as designated by Administrator.

Thank You,

Guiding Light Home for Boys, Inc.
Facility Administrator
Stanley Powell

2-27-2015
Date