



## COUNTY OF LOS ANGELES PROBATION DEPARTMENT

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**TERRI L. McDONALD**  
Chief Probation Officer

April 11, 2017

**TO:** Supervisor Mark Ridley-Thomas, Chairman  
Supervisor Hilda L. Solis  
Supervisor Sheila Kuehl  
Supervisor Janice Hahn  
Supervisor Kathryn Barger

**FROM:** Terri L. McDonald  
Chief Probation Officer

**SUBJECT: FUTURE STARS YOUTH SERVICES (FUTURE STARS) GROUP HOME  
CONTRACT COMPLIANCE MONITORING REVIEW**

The Department of Probation, Placement Permanency & Quality Assurance (PPQA), Group Home Monitoring (GHM), conducted a review of Future Stars Youth Services Group Home, operated by Future Stars, in September 2016. Future Stars has one site, 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 Future Stars program statement, its purpose is to provide services to girls who are victims of physical abuse, drug and alcohol abuse and are in need of a specialized anger management program.

At the time of review, Future Stars did not have any Los Angeles County Probation or DCFS children; however, they did have five (5) children from other counties, one (1) from Riverside County and four (4) from San Bernardino County. Future Stars is a six (6) bed site and is licensed to serve a capacity of six (6) girls, 13-18 years old.

One (1) Los Angeles County DCFS discharged child's file was reviewed to assess compliance with permanency efforts, and five (5) staff files were also reviewed for compliance with Title 22 Regulation and County Contract Requirements.

### SUMMARY

Future Stars was in compliance with one (1) of the four (4) applicable areas of the Contract Compliance Review: "Discharge Children," with six (6) areas that were not applicable due to the Group Home not having any children to sample for interviews; therefore, the following areas did not apply during this monitoring compliance 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 three (3) of the four (4) applicable areas; with six (6) out of 76 specific deficient elements within the areas. There were no egregious findings or child safety issues in any of the applicable areas reviewed. In the area of "Licensure/Contract Requirements", Future Stars needs to ensure that they remain free of substantiated Community Care Licensing (CCL) complaints. In the area of "Facility and Environment", Future Stars needed to ensure that all children's bedroom windows contain screens and that the graffiti is removed from a dresser. In addition, Future Stars needed to make repairs/corrections in the common areas of the Group Home and to educational resources (computer). In the area of Personnel Files, Future Stars failed to ensure files contained correct paperwork as proof of staff meeting the minimum education and/or experience/requirements, in accordance with Title 22 Regulations.

### REVIEW OF REPORT

On October 31, 2016, Probation PPQA Monitor Ratasha Smith held an Exit Conference with Future Stars Administrator, Sara Wright. Administrator Wright 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).

Future Stars provided the attached approved CAP addressing the recommendations noted in this compliance report and explained how they will ensure that the repeated deficiencies of the same nature will be avoided. A follow-up visit was conducted on December 8, 2016, and all deficiencies cited in the CAP were corrected or systems were put in place to avoid future deficiencies; however, an additional check will be required to ensure that permanent changes were made. 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.

Each Supervisor  
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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.

TLM:FC  
LCM:tj

**Attachments**

- c: Sachi A. Hamai, Chief Executive Officer
- John Naimo, Auditor-Controller
- Brandon T. Nichols, Interim Director, Department of Children and Family Services
- Terri L. McDonald, Chief, Department of Probation
- Public Information Office
- Audit Committee
- Sybil Brand Commission
- Community Care Licensing
- Latasha Howard, Probation Contracts
- Sarah Wright, Future Stars Administrator

**FUTURE STARS YOUTH SERVICES GROUP HOME  
CONTRACT COMPLIANCE REVIEW SUMMARY**

**Rate Classification Level 11  
License Number: 366408739**

	<b>Contract Compliance Review</b>	<b>Findings: September 2016</b>
<b>I</b>	<p><b><u>Licensure/Contract Requirements</u> (8 Elements)</b></p> <ol style="list-style-type: none"> <li>1. The Group Home was free of any substantiated Community Care Licensing Division (CCLD) citations on child abuse/safety and/or physical deficiencies since the last review.</li> <li>2. Vehicles used to transport children are maintained in good repair.</li> <li>3. Disaster drills are conducted at least every six months and documented.</li> <li>4. The runaway policy is documented and properly maintained.</li> <li>5. Detailed sign-in/out logs are maintained.</li> <li>6. Weekly allowance logs are accurately maintained.</li> <li>7. Monthly clothing allowance logs are accurately maintained.</li> <li>8. Special Incident Reports (SIRs) documented in the Needs and Services Plans (NSPs) and case files and are properly reported via the ITrack system.</li> </ol>	<ol style="list-style-type: none"> <li>1. Improvement Needed</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Full Compliance</li> <li>6. N/A</li> <li>7. N/A</li> <li>8. N/A</li> </ol>
<b>II</b>	<p><b><u>Facility and Environment</u> (5 Elements)</b></p> <ol style="list-style-type: none"> <li>1. The exterior and the grounds of the Group Home are well maintained.</li> <li>2. Common quarters are well maintained.</li> <li>3. Children's bedrooms are well maintained.</li> <li>4. The Group Home maintains appropriate recreational equipment and educational resources (e.g. computer) in good repair and makes them readily available to children.</li> <li>5. The Group Home maintains adequate nutritious perishable and non-perishable food.</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Improvement Needed</li> <li>3. Improvement Needed</li> <li>4. Improvement Needed</li> <li>5. Full Compliance</li> </ol>

FUTURE STARS YOUTH SERVICES GROUP HOME CONTRACT COMPLIANCE  
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III	<p><b><u>Maintenance of Required Documentation and Service Delivery</u></b> (3 Elements)</p> <ol style="list-style-type: none"> <li>1. The Initial NSP was completed accurately and on time.</li> <li>2. The Updated NSPs were completed accurately and on time.</li> <li>3. The Group Home provided children with counseling and other services (based on current NSPs).</li> </ol>	Not Applicable
IV	<p><b><u>Education and Workforce Readiness</u></b> (3 Elements)</p> <ol style="list-style-type: none"> <li>1. Children are enrolled in school within three school days.</li> <li>2. The Group Home ensured the children attend school as required.</li> <li>3. The Group Home ensures the children's report cards or progress reports, and if applicable, current copies of Individualized Education Programs (IEPs) are maintained in their files.</li> </ol>	Not Applicable
V	<p><b><u>Health and Medical Needs</u></b> (4 Elements)</p> <ol style="list-style-type: none"> <li>1. Initial medical exams are conducted timely.</li> <li>2. Initial dental exams are conducted timely.</li> <li>3. Required follow-up medical examinations are conducted timely.</li> <li>4. Required follow-up dental examinations are conducted timely.</li> </ol>	Not Applicable
VI	<p><b><u>Psychotropic Medication</u></b> (2 Elements)</p> <ol style="list-style-type: none"> <li>1. Current Court-Approved Authorizations are on file. (Including accurate dosage)</li> <li>2. Psychiatric Evaluation/Review (561c) is current.</li> </ol>	Not Applicable
VII	<p><b><u>Personal Rights and Social/Emotional Well-Being</u></b> (18 Elements)</p> <ol style="list-style-type: none"> <li>1. Children are informed of the Group Home's rules and consequences.</li> <li>2. Children report the consequences for not following the rules are fair.</li> </ol>	Not Applicable

	<ol style="list-style-type: none"> <li>3. Children are informed of the Foster Youth Bill of Rights.</li> <li>4. Children participate in the development of their NSPs.</li> <li>5. Children are supervised by staff.</li> <li>6. Children are treated with respect.</li> <li>7. Children feel safe in the Group Home.</li> <li>8. Children have an adult they can talk with privately.</li> <li>9. Children are allowed to have private telephone calls and to send and receive unopened mail.</li> <li>10. Children have privacy during the visits with family or close friends.</li> <li>11. Children are offered the opportunity to participate in a mentorship program.</li> <li>12. Children are allowed to attend or not attend religious services of their choice.</li> <li>13. Children are given the opportunity to participate in planning recreational activities with the staff.</li> <li>14. Children are given the opportunity to participate in recreational activities at the Group Home.</li> <li>15. Children are given the opportunity to participate in extracurricular or community activities.</li> <li>16. Children's chores are reasonable.</li> <li>17. Children are informed about their rights to medical and dental treatment (right to refuse).</li> <li>18. Children are informed about their right to refuse psychotropic medication.</li> </ol>	
<p><b>VIII</b></p>	<p><b><u>Personal Needs/Survival and Economic Well-Being</u></b> (16 Elements)</p> <ol style="list-style-type: none"> <li>1. Children are provided with medical care when needed.</li> <li>2. Children are provided with dental care when needed.</li> <li>3. Children are provided with transportation.</li> <li>4. Children are encouraged and supported by staff in keeping a Life Book.</li> <li>5. Children are assisted by adults in completing schoolwork when help is needed.</li> <li>6. Children are provided with youth development or daily living skills services.</li> <li>7. Children are provided with their own personal hygiene items.</li> </ol>	<p>Not Applicable</p>

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	<ol style="list-style-type: none"> <li>8. Children get enough food to eat.</li> <li>9. Children with special diet needs are provided with accommodations by the staff.</li> <li>10. Children receive at least the basic weekly allowance.</li> <li>11. Children are free to spend their allowance, as long as they are appropriate purchases.</li> <li>12. Children receive at least the basic clothing allowance.</li> <li>13. Children are able to choose the clothes they buy, as long as they are appropriate.</li> <li>14. Children have enough clothes to wear.</li> <li>15. Children are supervised while in the pool area.</li> <li>16. Children report the home is free of unsecured dangerous items.</li> </ol>	
IX	<p><b><u>Discharged Children</u></b> (3 Elements)</p> <ol style="list-style-type: none"> <li>1. The Group Home placed the child in accordance with their Program Statement and population criteria.</li> <li>2. The Group Home discharged the child in accordance with the NSP permanency plan, or to a lower level of care.</li> <li>3. The Group Home attempted to stabilize the child's placement prior to requesting a removal.</li> </ol>	Full Compliance (All)
X	<p><b><u>Personnel Records</u></b> (14 Elements)</p> <ol style="list-style-type: none"> <li>1. Staff signed a criminal record statement (LIC 508) prior to or on hire date.</li> <li>2. Staff received criminal clearance from CCLD prior to hire date.</li> <li>3. Staff received medical clearance within one year prior to hire date or within seven days after hire date.</li> <li>4. Staff received tuberculosis (TB) clearance within one year prior to hire date or within seven days after hire date.</li> <li>5. Staff met educational and/or experience requirements in accordance with the agency's Program Statement and Title 22 Regulations.</li> <li>6. Staff signed the agency's policies, including confidentiality agreement and mandated reporter acknowledgment.</li> </ol>	<ol style="list-style-type: none"> <li>1. Full Compliance</li> <li>2. Full Compliance</li> <li>3. Full Compliance</li> <li>4. Full Compliance</li> <li>5. Improvement Needed</li> <li>6. Full Compliance</li> </ol>

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7.	Staff had current California driver's license on file.	7.	Full Compliance
8.	Staff had current Cardiopulmonary Resuscitation (CPR) certification on file.	8.	Full Compliance
9.	Staff had current First Aid certification on file.	9.	Full Compliance
10.	Staff received initial emergency intervention training [e.g. Professional Assault Crisis Training (Pro--ACT)].	10.	Full Compliance
11.	Staff received initial 24 hour training (eight hours prior to supervision and 16 hours within 90 days of hire).	11.	Full Compliance
12.	Staff has current emergency intervention training on file (e.g. Pro-ACT).	12.	Full Compliance
13.	Staff received 20 hours of on-going training.	13.	Full Compliance
14.	If site has a pool or other body of water, there is at least one staff with current water safety certification on file.	14.	Full Compliance



**FUTURE STARS YOUTH SERVICES GROUP HOME  
CONTRACT COMPLIANCE MONITORING REVIEW  
FISCAL YEAR 2016-2017**

**SCOPE OF REVIEW**

The following report is based on a “point in time” review. The purpose of this review was to assess Future Stars’ compliance with the County contract and State regulations and include a review of the Future Stars Youth Services 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

At the time of this review, Future Stars had no Los Angeles County Probation or DCFS placed children; therefore, case files could not be assessed for the care and services received or for timeliness of Psychotropic Medication Authorizations (PMAs) or confirmation of required documentation of psychiatric monitoring. One (1) Los Angeles County DCFS child’s discharged file was reviewed to assess Future Stars Youth Service’s compliance with permanency efforts.

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**

The following three (3) areas were out of compliance.

**Licensure/Contract Requirements**

Future Stars Youth Services had two (2) substantiated allegations as reported by Community Care Licensing (CCL). One substantiated allegation from April 2016, for a personal rights violation for the Group Home staff yelling at the children. The second substantiated allegation is from August 2016, for another personal rights violation for a Group Home staff threatening a child. For the April 2016 allegation, the CCL investigation was concluded on June 28, 2016. Since the

allegation was substantiated, the Group Home received a Type "A" citation (issued for the most serious substantiated allegations) for a personal rights violation and was required to submit a Plan of Correction (POC) to CCL by July 11, 2016. As part of their POC, the Group Home Administrator provided refresher training on personal rights and provided CCL with the staff sign in sheet. CCL was satisfied with this POC and closed this case.

For the August 2016 allegation, the CCL investigation was concluded on October 18, 2016. Since the allegation was substantiated, the Group Home received a Type "A" citation for a personal rights violation and was required to submit a POC to CCL. As part of their POC, the Group Home was required to provide refresher training to the involved staff and proof of the staff's retraining via a staff sign-in sheet by October 28, 2016. All Group Home staff attended this training; however, the staff who was the subject of the investigation failed to attend the training, and instead submitted her letter of resignation, which was effective November 4, 2016. CCL was satisfied with this POC and closed this case.

### **Recommendation**

Future Star's management shall ensure that:

1. They strive to be free of all substantiated allegations by adhering to all Community Care Licensing Requirements and Standards.

### **Facility and Environment**

An inspection of the interiors and exteriors of Future Stars revealed some deficiencies that require correction in the common areas, children's bedrooms and to educational resources.

1. The fire extinguisher located in the common area was missing the certification tag.
2. The drywall in the hallway near the bedroom was damaged and needed to be repaired.
3. All three (3) bedroom windows were missing window screens.
4. There was graffiti on the dresser in bedroom #2 that needed to be removed.
5. The computer for the children was not working due to a computer virus.

### **Recommendation**

Future Star's management shall ensure that:

1. Common quarters are well maintained.
2. Children's bedrooms are well maintained.
3. The Group Home maintains appropriate recreational equipment and educational resources (e.g. computer) in good repair and makes them readily available to children.

### **Personnel Files**

During the review of five (5) personnel files, one (1) file contained inaccurate paperwork, which made it appear that the staff did not meet the minimum educational requirement. The face sheet that describes the employee's position was mislabeled. The employee's current position is "cook/arts counselor", which does not include the supervision of children.

### **Recommendation**

Future Stars management shall ensure that:

1. Staff met educational and/or experience requirements in accordance with the agency's Program Statement and Title 22 Regulations.

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

PPQA/GHM's last compliance report dated May 27, 2016, identified two (2) recommendations.

### **Results**

Based on the follow-up, Future Stars fully implemented one of the two previous recommendations for which they were to ensure that:

- All children had a mattress that was in good condition.

However, since the Group Home did not have any placed Los Angeles County foster children, there were no case files to review to determine full implementation of recommendations made under "Maintenance of Required Documentation and Service Delivery".

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

A current fiscal review of Future Stars Youth Services Group Home by the Auditor Controller was not scheduled for the 2016-2017, Fiscal Year.

# Future Stars, inc.

November 15, 2016

## Monitoring Review CAP

### I. LICENSURE/CONTRACT REQUIREMENTS:

#### A. Non-compliance:

The Group Home was free of any substantiated Community Care Licensing Division (CCLD) complaints on child abuse/safety and / or physical deficiencies since the last review.

#### Cause of non-compliance:

The agency received a substantiated complaint in April 2016 for personal rights.

#### Corrective action:

1. The staff involved in the allegation was taken off her regular shift from, April 28 – May 2, 2016 and did not return until May 3, 2016. Our agency therapist provided a 2- hour re-training to all employees on personal rights on May 2, 2016.

2. Future Stars received a second substantiated allegation in August 2016 for threatening a child. This allegation was also a personal rights violation. The staff involved did attend the first refresher training. The second complaint involved a different employee. The employee was immediately taken off her regular shift and was informed that she would not be able to return to work until her training was complete on November 4, 2016. The staff failed to attend the mandatory training and submitted her letter of resignation, which was effective November 4; 2016. The agency completed a re-training for all employees that was held on communication between adults and teens on November 4, 2016, 2 hours in duration. Program therapist, facilitated both training sessions.

#### Quality Assurance to maintain compliance:

The agency has a grievance procedure for all youth, as follows:

1. The youth is allowed to meet with any employee, that they feel comfortable with to document their problem on the grievance form and to discuss there issues.

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# Future Stars, inc.

2. If the youth does not feel there issue has been resolved, then it is suggested that they speak with their advocate and therapist.

3. At this point if there issue is not resolved at that time they will meet with the Director of the program.

4. However, at this time if the issue can not be resolved within the agency, the youth can reach out to their Social Worker / Probation Officer.

5. Contacting (CCL) Community Care Licensing.

Director will communicate with each youth on a bi- weekly basis or as needed to discuss any concerns.

## II. FACILITY AND ENVIRONMENT

### A. Non-compliance:

The exterior and the grounds of the Group Home are well maintained. Common quarters are well maintained. Children's bedroom is well maintained. The Group Home maintains adequate recreational equipment and educational resources in good repair and makes them readily available to children.

### Cause of non-compliance:

1. Window screens were taken off the windows. The populations of youth that Reside at the facility at this time continue to remove the window screens for no Apparent reason other than to continue to prank the facility.

2. The computer had developed several viruses due to residents downloading Different sites. The computer was being repaired during the time of review.

3. The fire extinguisher did not have the latest certification tag, it had been Torn off by a youth.

4. The drywall in the hallway was damaged due to a youth kicking a hole in the Wall.

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## Corrective actions:

1. All window screens were placed back on the windows the same day of the monitoring review.
2. Future Stars was aware that the computer had a virus during the monitoring review and the computer has been repaired and it is free from any viruses at this time.
3. The certification tag on the fire extinguisher was taken off by a youth. Once it was brought to the Group Home's attention the Facility Manager immediately informed the maintenance dept. it was taken to Fidelity fire and the certification tag was replaced.
4. The Group Home staff had prior knowledge of the damaged wall; the maintenance had been submitted and to be completed on the day of the review.

## Quality Assurance to maintain compliance:

All repairs are repaired in a 24 -hour timeframe by maintenance department on a continuous basis. Facility manager will continue to ensure on a daily basis, that there is a routine check of the facility and repairs are completed within a 24-hour time frame.

### **III. PERSONNEL FILES**

#### Non-compliance:

Employee does not have a high school diploma.

#### Cause of non-compliance:

There was a job description placed in the employee personnel file in error. However, employee is not a youth counselor for our youth. She is a cook and does crafts & recreational activities with our youth.

#### Corrective actions:

Employee job description has been updated in her personnel file. Employee has expressed interest to work as a Youth Counselor. Employee will continue to work toward her GED after she has completed her GED she will then be considered to become a youth counselor for our agency.

#### Quality Assurance to maintain compliance:

Administrator will ensure that all requirements are met for all employees before employment begins.

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# Future Stars, inc.

*Sarah Wright*

Sarah Wright-Administrator

*Sarah Wright*

*Future Stars, Inc.*

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