



BRANDON T. NICHOLS
Acting Director

County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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

Board of Supervisors

HILDA L. SOLIS
First District

MARK RIDLEY-THOMAS
Second District

SHEILA KUEHL
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

July 12, 2017

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

From: *for Cynthia McCoy Miller*
Brandon T. Nichols
Acting Director

SAN GABRIEL CHILDREN'S CENTER GROUP HOME CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a contract compliance review of the San Gabriel Children's Center Group Home (the Group Home) in August 2016. The Group Home has three licensed sites located in the First Supervisorial District. All sites provide services to the County of Los Angeles DCFS placed children, Probation foster youth, children placed by other counties, and Non-Minor Dependents (NMDs). According to the Group Home's Program Statement, its stated purpose is, "to develop the strengths within each child by providing a safe nurturing and appropriately challenging environment for behavioral and emotional growth."

At the time of the review, the Group Home served five DCFS placed children and three Probation foster youth. The Group Home has three 6-bed sites and is licensed to serve a total capacity of 18 male children, ages 12 through 18 and NMDs. The children's average length of placement was nine months and their average age was 16.

SUMMARY

During CAD's Contract Compliance 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 placement environment; and being treated with respect.

The Group Home was in full compliance with 7 of 10 applicable areas of CAD's Contract Compliance Review: Facility and Environment; Educational and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Rights and

"To Enrich Lives Through Effective and Caring Service"

Each Supervisor
July 12, 2017
Page 2

Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Discharged Children.

CAD noted deficiencies in the areas of: Licensure/Contract Requirements, related to a Community Care Licensing Division (CCLD) citation; Maintenance of Required Documentation and Service Delivery, related to inaccurate completion of initial and updated Needs and Services Plans (NSPs); and Personnel Records, related to not having copies of the Group Home Policies and Procedures signed by staff on record.

REVIEW OF REPORT

On October 27, 2016, Kong Ng, DCFS CAD, and Elizabeth Villalobos, DCFS Out-of-Home Care Management Division (OHCMD), held an exit conference with the Group Home representatives: Ruth Sigala, Residential Director; Janet Lester, Director of Clinical Services; Lynette Hanna, Site Administrator; and Hector Gonzalez, Site Administrator. The Group Home representatives agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve the Group Home's compliance with regulatory standards; and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

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

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

BTN:KR
LTI:kn

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Terri L. McDonald, Chief Probation Officer
Sheila Mitchell, Assistant Chief Deputy Probation Officer, Juvenile Services
Public Information Office
Audit Committee
Sybil Brand Commission
Porfirio Rincon, President and CEO, San Gabriel Children's Center
Lenora Scott, Regional Manager, Community Care Licensing Division

**SAN GABRIEL CHILDREN'S CENTER GROUP HOME
CONTRACT COMPLIANCE REVIEW SUMMARY**

**Rate Classification Level 14
License Number: 197804961**

**Rate Classification Level 14
License Number: 197805170**

**Rate Classification Level 12
License Number: 197806481**

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

SAN GABRIEL CHILDREN'S CENTER GROUP HOME
 CONTRACT COMPLIANCE REVIEW
 PAGE 2

<p>III</p>	<p><u>Maintenance of Required Documentation and Service Delivery</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. The Initial NSP was completed accurately and on time. 2. The Updated NSPs were completed accurately and on time. 3. The Group Home provided children with counseling and other services (based on current NSPs). 	<ol style="list-style-type: none"> 1. Improvement Needed 2. Improvement Needed 3. Full Compliance
<p>IV</p>	<p><u>Education and Workforce Readiness</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. Children are enrolled in school within three school days. 2. The Group Home ensured the children attend school as required. 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. 	<p>Full Compliance (All)</p>
<p>V</p>	<p><u>Health and Medical Needs</u> (4 Elements)</p> <ol style="list-style-type: none"> 1. Initial medical exams are conducted timely. 2. Initial dental exams are conducted timely. 3. Required follow-up medical examinations are conducted timely. 4. Required follow-up dental examinations are conducted timely. 	<p>Full Compliance (All)</p>
<p>VI</p>	<p><u>Psychotropic Medication</u> (2 Elements)</p> <ol style="list-style-type: none"> 1. Current Court-Approved Authorizations are on file. (Including accurate dosage) 2. Psychiatric Evaluation/Review (561c) is current. 	<p>Full Compliance (All)</p>
<p>VII</p>	<p><u>Personal Rights and Social/Emotional Well-Being</u> (18 Elements)</p> <ol style="list-style-type: none"> 1. Children are informed of the Group Home's rules and consequences. 2. Children report the consequences for not following the rules are fair. 3. Children are informed of the Foster Youth Bill of Rights. 4. Children participate in the development of their NSPs. 	<p>Full Compliance (All)</p>

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

SAN GABRIEL CHILDREN'S CENTER GROUP HOME
 CONTRACT COMPLIANCE REVIEW
 PAGE 4

	<ol style="list-style-type: none"> 12. Children receive at least the basic clothing allowance. 13. Children are able to choose the clothes they buy, as long as they are appropriate. 14. Children have enough clothes to wear. 15. Children are supervised while in the pool area. 16. Children report the home is free of unsecured dangerous items. 	
IX	<p><u>Discharged Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. The Group Home placed the child in accordance with their Program Statement and population criteria. 2. The Group Home discharged the child in accordance with the NSP permanency plan, or to a lower level of care. 3. The Group Home attempted to stabilize the child's placement prior to requesting a removal. 	Full Compliance (All)
X	<p><u>Personnel Records</u> (14 Elements)</p> <ol style="list-style-type: none"> 1. Staff signed a criminal record statement (LIC 508) prior to or on hire date. 2. Staff received criminal clearance from CCLD prior to hire date. 3. Staff received medical clearance within one year prior to hire date or within seven days after hire date. 4. Staff received tuberculosis (TB) clearance within one year prior to hire date or within seven days after hire date. 5. Staff met educational and/or experience requirements in accordance with the agency's Program Statement and Title 22 Regulations. 6. Staff signed the agency's policies, including confidentiality agreement and mandated reporter acknowledgment. 7. Staff had current California Driver's License (CDL) on file. 8. Staff had current Cardiopulmonary Resuscitation (CPR) certification on file. 9. Staff had current First Aid certification on file. 10. Staff received initial emergency intervention training [e.g. Professional Assault Crisis Training (Pro-ACT)]. 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Improvement Needed 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance

SAN GABRIEL CHILDREN'S CENTER GROUP HOME
CONTRACT COMPLIANCE REVIEW
PAGE 5

11.	Staff received initial 24-hours of training (eight hours prior to supervision of children 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

**SAN GABRIEL CHILDREN'S CENTER GROUP HOME
CONTRACT COMPLIANCE REVIEW
FISCAL YEAR 2016-2017**

SCOPE OF REVIEW

The following report is based on a "point in time" review. This compliance report addresses findings noted during the August 2016 review. The purpose of this review was to assess the Group Home's compliance with its County contract. The review covered the following 10 areas:

- Licensure/Contract Requirements,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Education 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, two DCFS placed children and two Probation foster youth were selected for the sample. CAD interviewed each child and reviewed their files to assess the level of care and services they received. During the site visits, the children were observed to be comfortable and well cared for in the Group Home and the staff were observed to be responsive to the children's needs. Additionally, three discharged children's files were reviewed to assess the Group Home's compliance with permanency efforts. At the time of the review, four children were prescribed psychotropic medication. These children's files were reviewed to assess for timeliness of Psychotropic Medication Authorizations and required documentation of psychiatric monitoring.

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

CONTRACTUAL COMPLIANCE

CAD found the following three areas out of compliance:

Licensure/Contract Requirements

- CCLD citations.

CCLD cited the Group Home on August 17, 2016, in response to a Special Incident Report (SIR) received on June 21, 2016. One of the children did not receive his medication for three days when the Group Home did not ensure the medication was issued from its

Medication room. CCLD requested a Plan of Correction (POC), in which the Group Home was to provide staff with additional training on the importance of obtaining and dispensing children's medication according to physician instructions. The Group Home conducted the training on August 26, 2016, and CCLD cleared the POC on August 29, 2016. There was no referral called in to the Child Protection Hotline (CPHL) and therefore, no DCFS investigation.

Recommendations:

The Group Home's management shall ensure that:

1. The Group Home is in full compliance with Title 22 Regulations and free of CCLD citations.

Maintenance of Required Documentation and Service Delivery

- Initial NSPs were not completed accurately.

During the review, CAD found that 2 out of 4 initial NSPs were not completed accurately. Two initial NSPs concurrent case plan goals were not documented or checked.

- Updated NSPs were not completed accurately.

During the review, CAD found that 5 of 6 updated NSPs were not completed accurately. Five updated NSPs' concurrent case plan goals were not documented or checked.

At the Exit Conference, CAD spoke with the Group Home representatives about the importance of the development of accurate and comprehensive NSPs that include the concurrent case plan goals. The Group Home representative stated they have already discussed the issues and provided training to the clinicians.

On November 28, 2016, CAD conducted a follow-up visit and reviewed one initial and two quarterly NSPs, all of which were accurate and included concurrent case plan goals.

Recommendations:

The Group Home's management shall ensure that:

2. Initial NSPs are completed accurately.
3. Updated NSPs are completed accurately.

Personnel Records

- Staff signed the agency's policies, including confidentiality agreement and mandated reporter acknowledgment.

SAN GABRIEL CHILDREN'S CENTER GROUP HOME
CONTRACT COMPLIANCE REVIEW
PAGE 3

The confidentiality agreement forms for four Group Home staff were not dated. The Group Home representatives stated that this issue has been brought to the attention of their Human Resources to ensure employees sign and date all agency's documents and forms.

On November 28, 2016, CAD conducted a follow-up visit and reviewed three confidentiality agreement forms, all of which were signed and dated.

Recommendation:

The Group Home's management shall ensure that:

4. Staff sign and date all employment documents, including agency policies, confidentiality agreement and mandated reporter acknowledgment.

PRIOR YEAR FOLLOW-UP FROM DCFS CAD'S GROUP HOME CONTRACT COMPLIANCE REVIEW

CAD's last compliance report dated August 5, 2016 (review conducted in July 2015), identified three recommendations.

Results:

Based on the results of the current review, the Group Home fully implemented 2 of 3 recommendations for which the Group Home was to ensure that:

- Special Incident Reports (SIRs) are submitted timely or appropriately cross-reported.
- Group Home employee's educational requirements are verified timely.

Based on the results of the current review, the Group Home did not implement one recommendation for which the Group Home was to ensure that:

- Initial and Updated NSPs are completed accurately.

Recommendation:

The Group Home's management shall ensure that:

5. The outstanding recommendations from the prior report noted in this report as recommendation numbers 2 and 3 are fully implemented.

At the exit conference, the Group Home representatives expressed their desire to remain in compliance with Title 22 Regulations and contract requirements. The Group Home will consult with the OHCMD for additional support and technical assistance, and CAD will assess contract compliance during the next review.



San Gabriel Children's Center

November 2, 2016

Kong Ng, M.S.W.
Children Services Administrator I
Department of Children and Family Services
Contracts Administration Division
Contract Compliance Section
3530 Wilshire Blvd. 4th Floor,
Los Angeles, CA 90010

Re: Group Home Monitoring Review Exit Summary Corrective Action Plan (CAP)

Dear Mr. Ng,

In response to your Monitoring Review Field Exit Summary findings dated 10/20/16, I have included our Corrective Action Plan and documentation to finalize the review.

I. Licensure/Contract Requirements

1. 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.
- The Group Home Manager responsible for ensuring medications are picked up and given to clients was disciplined due to violating San Gabriel Children's Center policy, which resulted in the citation. Our agency has a system in place to ensure medications are delivered and picked up timely so that all youth will be given medications at their designated time. SGCC's Licensed Psychiatric Technician is also involved in this process to ensure medications are picked up timely.

III. Maintenance of Required Documentation and Service Delivery

14. The initial NSP was completed accurately and on time.
15. The updated NSP's were completed accurately and on time.
- On 9/28/16, the clinicians and the program manager who approves NSP's were informed of the need to complete the concurrent case plan goal. In addition, the clinicians have also been trained to ensure they do not leave anything blank,

San Gabriel Children's Center, Inc.
2200 E. Route 66 Suite #100
Glendora, CA. 91740
(626) 859-2089 / Fax (626) 859-6537



San Gabriel Children's Center

which will ensure that the concurrent case plan goal is completed. This training was presented on Oct. 24, 2016.

X. Personnel Files

68. Staff signed the agency's policies, including confidentiality agreement and mandated reported acknowledgement.
 - The remediation process was begun on the same day that this was addressed. The Confidentiality Agreement document was revised immediately to separate the signature and date line. It was then distributed to all employees for signature and date. Going forward the updated form is distributed on the employee's first day of employment and verified by Human Resources staff to ensure it is signed and dated.

As a result of these findings, Director of Residential Services, Ruth Sigala, Director of Clinical Services Janet Lester and Human Resources Director, Carrie Ray will be responsible for ensuring that the CAP will be fully implemented. All of these findings have already been addressed and corrected.

Should you require anything further to finalize your review, please contact me at ruthsigala@sangabrielchild.com or 626-859-2089 ext. 213

Respectfully,

Ruth Sigala, MA
Director of Residential Services

Cc: Porfirio "Pete" Rincon, CEO