



COUNTY OF LOS ANGELES PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY – DOWNEY, CALIFORNIA 90242
(562) 940-2501



JERRY E. POWERS
Chief Probation Officer

November 13, 2012

TO: Each Supervisor

FROM: Jerry E. Powers
Chief Probation Officer

J. P. *AB*

Board of Supervisors
GLORIA MOLINA
First District
MARK RIDLEY-THOMAS
Second District
ZEV YAROSLAVSKY
Chairman - Third District
DON KNABE
Fourth District
MICHAEL D. ANTONOVICH
Fifth District

SUBJECT: **COMMUNITY YOUTH SPORTS & ARTS FOUNDATION CONTRACT
COMPLIANCE MONITORING REVIEW**

We have completed a review of Community Youth Sports and Arts Foundation (CYSAF), operated by Community Youth Sports and Arts Foundation. The Group Home contracts with the Los Angeles County Probation Department. The Group Home is located in Los Angeles, California.

CYSAF Group Home is a six (6) bed home, which provides care for boy's 12-17 years of age, from the Los Angeles County Probation Department. The Group Home's target population is boys who exhibit emotional and behavioral difficulties. The program is designed to treat boys who have been physically, sexually, and emotionally abused. The Group Home provides individual, group, and family counseling as well as alcohol/drug education, and substance abuse counseling.

At the time of the review CYSAF was providing care for four (4) Probation children. For this review, all four (4) Probation cases were reviewed, and four (4) child interviews were conducted. Three (3) discharged files were reviewed, and five (5) personnel files were reviewed. In addition, one (1) of the four (4) children was taking psychotropic medications, and the file was reviewed for timely Psychotropic Medication Authorizations and required monitoring.

CYSAF is located in the Second District of Los Angeles County.

SCOPE OF REVIEW

The purpose of our review is to determine whether the Agency is providing the services as outlined in their Program Statement. In addition, the review covers basic child safety and licensing issues and includes an evaluation of the Agency's Program Statement, internal policies and procedures, child case records, a facility inspection and interviews with children placed in the Group Home at the time of the review. Interviews with children are designed to obtain their perspectives on the program services provided by the Agency and to ensure

adherence to the Foster Youth Bill of Rights. In addition, a review of the most recent Auditor Controller Fiscal Review was conducted.

SUMMARY

Based on child interviews, the contents of the Needs and Service Plans (NSP) and other documentation provided by the CYSAF, the Agency is providing the services as outlined in their Program Statement and is meeting the overall needs of the children placed at the Group Home. This compliance report addresses issues that were noted during the month May 2012. A review of four (4) child files and five (5) employee files were reviewed. The areas of deficiency are found under, "Facility and Environment", which require immediate attention, "Maintenance of Required Documentation and Service Delivery", related to the NSPs, "Personal Rights and Social/Emotional Well-Being", related to the children planning activities, "Personal Needs/Survival and Economic Well-Being", related to Life Books, "Discharge Plan" and "Personnel Records" related to one-hour child abuse training.

NOTABLE FINDINGS

- There were minimal physical deficiencies noted at the Group Home that required correction only, as described in the "Facility and Environment" section of the Monitoring Review; such as, the dining room walls need to be cleaned or painted, in addition to all three (3) bedroom walls that need to be re-painted.
- There was one (1) deficiency with the NSP completed on a child that requires corrective action as described in the "Maintenance of Required Documentation and Service Delivery" section the of Monitoring Review; such as, the initial NSP was not completed within 30-days.
- There was one deficiency described in the area of the "Personal Rights and Social/Emotional Well-Being" section of the Monitoring Review; two (2) children reported that they do not participate in planning activities.
- All children interviewed reported that they did not have Life Books, as described in the "Personal Needs/Survival and Economic Well-Being" section of the Monitoring Review.
- There was one (1) deficiency as described in the area of the "Discharge Plan" section in that one (1) child was not discharged according to the permanency plan in that they left the facility without permission prior to completion of the program.
- All five (5) employees were missing the one (1) hour child abuse training.

EXIT CONFERENCE

In attendance:

Glen Scott, Director

Roland Freeman, Assistant Director

Highlights:

The Exit Conference was conducted on July 3, 2012. The deficiencies cited were addressed at the time of the exit conference. The representatives present were in agreement with providing Life Books to the children; however, they did state that the children are offered a "Life Book" type packet to complete called "Pathways to Success", which allows the children to express their feelings and set individual goals for themselves. The representatives reported that the children receive this packet upon their arrival or sign a waiver stating that they decline the packet. The signed waivers were reviewed during the exit conference. The representatives were in agreement with addressing the other deficiencies discussed during the exit conference. A written Corrective Action Plan (CAP) was submitted on July 31, 2012, and has been approved. A follow-up visit was conducted on August 16, 2012, to ensure that all deficiencies have been corrected. The results of the follow-up visit, which can be found in detail on the final page of the "Compliance Review" section, are as follows: dining room and all bedroom walls have been repainted, a written CAP received addressed the untimely initial NSP, children are now included in planning activities, children now have appropriate Life Books, and all employees have received training on child abuse.

If you need additional information or have questions or concerns, please contact Director Lisa Campbell-Motton, Placement Permanency and Quality Assurance, at (323) 240-2435.

JEP:REB:LCM:ed

Attachments (3)

c: William T Fujioka, Chief Executive Officer
Sachi A. Hamai, Executive Officer, Board of Supervisors
Brence Culp, Chief Deputy Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Philip L. Browning, Director, Department of Children and Family Services
Public Information Office
Audit Committee
Sybil Brand Commission
Glen Scott, Director, Community Youth Sports & Arts Foundation
Jean Chen, Regional Manager, Community Care Licensing
Lenora Scott, Regional Manager, Community Care Licensing
Georgia Mattera, Public Safety, Chief Executive Officer
Chief Deputies
Justice Deputies

**COMMUNITY YOUTH SPORTS & ARTS FOUNDATION PROGRAM CONTRACT
COMPLIANCE MONITORING REVIEW- SUMMARY**

	Contract Compliance Monitoring Review	Findings: May/2012
I	<u>Licensure/Contract Requirements</u> (9 Elements) <ol style="list-style-type: none"> 1. Timely Notification for Child's Relocation 2. Transportation 3. SIRs 4. Compliance with Licensed Capacity 5. Disaster Drills Conducted/Logs Maintained 6. Runaway Procedures 7. Allowance Logs 8. CCL citations for safety/plant deficiencies 9. Detailed sign in/out log for children 	Full Compliance (All)
II	<u>Facility and Environment</u> (6 Elements) <ol style="list-style-type: none"> 1. Exterior Well Maintained 2. Common Quarters Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non Perishable Food 	<ol style="list-style-type: none"> 1. Full Compliance 2. Needs Improvement 3. Needs Improvement 4. Full Compliance 5. Full Compliance 6. Full Compliance
III	<u>Maintenance of Required Documentation and Service Delivery</u> (13 Elements) <ol style="list-style-type: none"> 1. Child Population Consistent with Program Statement 2. Probation Caseworker Authorization to Implement NSPs 3. Children's Participation in the Development of NSPs 4. NSPs Implemented and Discussed with Staff/Parents 5. Sampled children progressing towards meeting the NSP case goals 6. Treatment team developed timely initial NSP with the child 7. Treatment team develop comprehensive initial NSP with the child 8. Therapeutic Services Received (individual, group, substance abuse, etc.) 9. Recommendation Assessments/Evaluations Implemented (psychological, psychiatric, medical evaluations/assessments) 10. Probation Caseworkers Monthly Contact Verified 11. Agency assist the child in maintaining important relationships 12. Treatment team develop timely updated NSP with the child 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Needs Improvement 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance

	13. Treatment team develop comprehensive updated NSP with the child	13. Full Compliance
IV	<u>Education and Workforce Readiness</u> (8 Elements) <ol style="list-style-type: none"> 1. Child enrolled in school within three (3) days after placement or efforts documented 2. Child attends school as required 3. Agency facilitates in meeting the child's educational goals (IEP conference, tutoring, parent/teacher conference, homework, etc.) 4. Based on services provided, has the child's academic performance and/or attendance increased (improved grades, test scores, promotion to the next level, High School graduated, IEP goals?) 5. Current IEPs maintained 6. Current copies of the child's report cards or progress cards maintained 7. Group Home provides children with opportunities to participate in age appropriate youth development services (YDS) and vocational training programs 8. Group Home encourages children's participation in YDS or equivalent programs. 	Full Compliance (All)
V	<u>Health and Medical Needs</u> (6 Elements) <ol style="list-style-type: none"> 1. Initial medical examinations conducted 2. Initial medical examinations timely 3. Required follow-up medical examinations conducted timely 4. Initial dental examinations conducted 5. Initial dental examinations timely 6. Required follow-up dental examinations conducted timely 	Full Compliance (All)
VI	<u>Psychotropic Medications</u> (2 Elements) <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication or document effort to obtain 2. Current Psychiatric Evaluation/Review for each child on psychotropic medication 	Full Compliance (All)
VII	<u>Personal Rights and Social/Emotional Well-Being</u> (17 Elements) <ol style="list-style-type: none"> 1. Children informed of Group Home's policies and procedures 2. Children feel safe at Group Home 3. Children supervised by staff 	1. Full Compliance 2. Full Compliance 3. Full Compliance

	<ol style="list-style-type: none"> 4. Group Home provides appropriate staffing and supervision 5. Children report satisfaction with meals and snacks 6. Staff treats children with respect and dignity 7. Appropriate rewards and discipline system in place 8. Consequences fair 9. Children allowed private visits, make and receive telephone calls and to send and receive unopened correspondence/mail 10. Children free to attend religious services and activities of their choice 11. Children's chores easy or hard (reasonable) 12. Children informed about their medication 13. Children aware of their right to refuse medication 14. Children free to received or reject voluntary medical, dental and psychiatric care 15. Children given opportunities to participate in planning activities 16. Children participate in activities, including at the Group Home, in the community or school 17. Children given opportunities to participate age-appropriate extra-curricular, enrichment and social activities in which they have an interest 	<ol style="list-style-type: none"> 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance 14. Full Compliance 15. Needs Improvement 16. Full Compliance 17. Full Compliance
VIII	<p><u>Personal Needs/Survival and Economic Well-Being</u> (8 Elements)</p> <ol style="list-style-type: none"> 1. \$50.00 Clothing Allowance 2. Adequate Quantity Clothing Inventory 3. Adequate Quality Clothing Inventory 4. Involvement in Selection of Clothing 5. Provision of Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance 8. Encouragement and Assistance with Life Book 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Needs Improvement
IX	<p><u>Discharge Plan</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. Children placed at least 30 days, was the child discharged according to the permanency plan 2. Children placed at least 30 days, did the child make progress toward meeting their NSP goals 3. Group Home using available resources to attempt to stabilize the placement prior to requesting the removal of the child 	<ol style="list-style-type: none"> 1. Needs Improvement 2. Full Compliance 3. Full Compliance
X	<p><u>Personnel Records</u> (14 Elements)</p> <ol style="list-style-type: none"> 1. DOJ submitted timely 2. If applicable, FBI submitted timely 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance

	3. Child Abuse Clearance Index (CACI) submitted timely 4. Appropriate employees sign a criminal background statement timely 5. Group Home staff who have direct contact with children meet the educational/experience requirements 6. Employees received timely health screenings 7. Required employees have a valid CA drivers license 8. Appropriate Group Home employees signed copies of the Group Home policies and procedures 9. Appropriate employees received the required initial training 10. Appropriate employees received minimum one-hour training in the area of child abuse identification and reporting 11. Appropriate employees received CPR training 12. Appropriate employees received First-Aid training 13. Appropriate employees received the required annual on-going training 14. Appropriate employees received emergency intervention training per the Group Home's program statement	3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Needs Improvement 11. Full Compliance 12. Full Compliance 13. Full Compliance 14. Full Compliance
--	--	---

**COMMUNITY YOUTH SPORTS & ARTS FOUNDATION
PROGRAM CONTRACT COMPLIANCE MONITORING REVIEW**

**Community Youth Sports & Arts Foundation
4828 Crenshaw Blvd.
Los Angeles, CA 90043
License Number: 191800533
Rate Classification Level: 9**

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of four (4) case files, three (3) discharged child files, five (5) staff files, and documentation provided by the agency, Community Youth Sports & Arts Foundation (CYSAF) complied with all (9) nine elements in the area of "Licensure/Contract Requirements":

The Group Home provides timely notification for a child's relocation when necessary. The children's transportation needs are met; such as, doctor and dental appointments, school and outings in the community. Special Incident Reports (SIRs) are submitted in a timely manner. The Group Home reported that they are aware of the reporting guidelines as outlined by the Probation Department. The Group Home is in compliance with the licensed capacity. The Group Home is licensed for six (6) children. At the time of the review, the Group Home had four (4) Probation children. A review of the logs revealed that disaster drills are completed every month, and the last drill was completed on May 1, 2012, at 4:00 pm. Runaway Procedures are completed in accordance with the Los Angeles County Group Home Foster Care Services Contract. Allowance Logs were reviewed and are maintained appropriately, showing that the children are receiving at least their minimum required allowance on a weekly basis. A detailed sign in/out log for children was utilized and maintained for the children's caseworkers and other visitors. Los Angeles County Community Care Licensing reported that as of January 21, 2011, CYSAF did not have any safety or physical plant deficiencies.

Recommendations:

None

FACILITY AND ENVIRONMENT

Based on our walk through inspection of CYSAF and interviews with four (4) placed children, CYSAF was in compliance with four (4) out of the six (6) elements in the area of "Facility and Environment". The areas of non-compliance were, "Common Quarters Maintained" and "Children's Bedrooms/Interior Maintained".

CYSAF is located in a residential community near the historic Leimert Park District in Los Angeles. The Group Home's overall structure was in good repair. There was no visible peeling paint. The building is white with royal blue trim. There is no grass at the facility; however, there is a lemon tree between the on grounds school and the living quarters. There is a lavender flower tree in the back yard that was in full bloom. There are hand painted tiles on the ground that surround the flowering tree. The back yard also contains a mosaic tile center piece on the ground that is surrounded by green and terra cotta colored cement.

The living room consists of appropriate furniture. There is a computer in the living room but there is no internet. The Group Home staff reported that they had issues with the children visiting inappropriate internet sites so they removed the internet from the computer. There is a 40-inch flat screen television with a DVD/VCR combo. There was a variety of age appropriate movies; such as, "Plant Life in Action" and "Keeping the Faith". The living room floor is covered with clean royal blue carpet. The living room also contained a book shelf with books; such as, "Where the Red Fern Grows", "I Am the Cheese", and "One of the Family". There was also appropriate framed art work on the walls along with an oversized ceiling fan with a white frosted globe. The dining room had walnut laminate flooring with a wooden dining room table. There was a bowl of fresh fruit on the dining room table that contained apples and oranges.

The Group Home has three (3) bedrooms that all have clean walnut laminate flooring. Bedroom #1 has a television with a VCR with a private bathroom. This bedroom is utilized for those youth who are on the highest behavioral level at the Group Home. The remaining bedrooms do not have individual televisions. All the bedrooms had adequate furniture, appropriate window coverings and proper lighting. The bathrooms were clean and neat. The bathroom walls were painted in a neutral color and the floor contained tan multicolored ceramic tile.

The Group Home provides age appropriate and accessible educational and recreational equipment. The Group Home has a second computer with a printer in the dining room. There is a stand alone gym in the back yard of the facility that contains a ping pong table, pool table, a versa climber exercise machine, punching bags, free weights and jump ropes. There is also a graffiti wall in the gym where the residents are allowed to express themselves artistically, but they are not allowed to use profane or gang language or draw gang signs. The fire escape/evacuation routes were posted in visible areas and the smoke detectors and fire extinguishers were fully operational and current.

The Group Home's kitchen contains a stainless steel stove, refrigerator, and dishwasher. There was a menu posted on the wall with a variety of meals. There is a separate deep freezer in the staff office which contained frozen sausage, bacon, cheese, ground beef, chicken, lasagna, and bread. The refrigerator in the kitchen contained items such as, three (3) gallons of milk, a case of individual cartons of milk, eggs, and watermelon. The freezer contained items such as, chocolate chip ice cream and twin ice pops. There was adequate food in the pantry; such as, peanut butter, pinto beans, corn, canned pineapple chunks and tomato sauce.

However, the bedrooms and common areas were in need of some minor repairs:

- All three (3) bedroom walls need to be cleaned or painted.
- The walls in the dining room need to be cleaned or painted.

Aside from the aforementioned deficiencies cited, the Group Home provides a home-like environment for the children.

Recommendations:

1. CYSAF shall ensure that the aforementioned deficiencies cited will be corrected in a timely fashion and provide verification of correction.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of CYSAF, interviews with four (4) children and/or documentation provided by the Agency, CYSAF complied with 12 out of the 13 elements in the area of "Maintenance of Required Documentation and Service Delivery". The area of non-compliance was, "Treatment team developed timely initial Needs and Services Plan (NSP) with the child".

The children meet the Group Home's population criteria as outlined in their Program Statement and are assessed for needed services within 30-days of placement. The case files reflected adequate documentation to show that children are receiving treatment services; such as, drug and alcohol counseling and individual and family counseling. The children also confirmed during their interviews that they are receiving treatment services. The children reported that they are receiving services as outlined in their NSPs.

Based on a review of the NSPs, the Group Home was in full compliance in the area of "Probation Caseworker Authorization to Implement NSPs". All four files contained the probation officer's signature of authorization to implement the NSPs.

Based on the child interviews and the files reviewed, the Group Home was in full compliance in the area of "Children's Participation in the Development of NSPs". All four (4) children interviewed reported that they participated in the development of their NSP. All of the NSPs reviewed also contained the children's signatures. The NSPs also contained the required staff/parent signatures on the documents. Out of the NSPs reviewed, all four (4) files showed that the children are progressing towards their NSP goals. During the child interviews, all the children reported that they felt they were making progress toward their goals. One child reported that one of his goals is to catch up on his school credits. He reported that, before his placement at the Group Home, he did not have any credits towards his graduation and now has 45 credits. Another child interviewed reported that one of his NSP goals is to graduate from high school, and he is scheduled to graduate on June 12, 2012. The NSPs also provided a detailed method for the children to achieve their goals and who the responsible parties were.

In three (3) of the four (4) files reviewed, the initial NSPs were developed in a timely manner, which is completion of the plan within or by the first 30 days of their placement at the Group Home. However, one NSP did not meet the standard. The date of completion on the NSP was incorrect. The NSP was dated over 30-days after the child's placement at the Group Home. The remaining NSPs were developed according to the standard. Out of the four (4) files reviewed, all of the NSPs were comprehensive and child specific. The Group Home provided goals that were specific to each child and time orientated. Examples of some of the NSP goals were, "Client will attend school daily and on time from once a week to five (5) times a week; Client will earn a minimum of fifteen (15) credits towards completing the current semester of high school." The Group Home also explained how the children were to meet their goals.

Based on the children's interviews and the case files reviewed, the Group Home is providing therapeutic services as outlined in the NSPs. The children reported that they are receiving treatment services; such as, individual, group counseling, and drug and alcohol counseling. Out of the four (4) files reviewed, one (1) required a psychiatric assessment. The one child is receiving regular assessments and evaluations for

psychotropic medication needs as required. The children reported that they have monthly contact with their Probation caseworker, and this information was also verified through the Group Home's visitation book and the NSPs. The children reported during their interviews that the Group Home is assisting them in maintaining important relationships. One child reported that he is having weekly visits with his mother at the Group Home. The Group Home has also documented the dates of community day passes and approved visits.

The Group Home has ensured that all of the updated NSPs were completed in a timely manner. Out of the four (4) files that were reviewed, only two (2) required updated NSPs. The Group Home did comply with ensuring that the updated NSPs were comprehensive. The Group Home has documented the children's dates of progress throughout the updated NSP and has detailed whether or not the child has achieved their goals or indicated if a goal needs to be modified.

Recommendations:

1. CYSAF shall ensure that all initial NSPs are completed in a timely manner. They shall make substantial efforts to ensure the dates of completion are accurate.

EDUCATIONAL AND WORKFORCE READINESS

Based on our review of CYSAF, interviews with four (4) children and/or documentation provided by the Agency, CYSAF complied with all eight (8) elements in the area of "Education and Workforce Readiness".

The Group Home provides an on grounds school through the Los Angeles Unified School District Central TRI-C. The children wear white collared dress shirts with ties and black slacks to school daily. The children were enrolled in school within three (3) days, were attending school and provided with educational support and resources to meet their educational needs. The children reported that, since the school is located on the grounds, they do not have issues with being late or absent. The children reported that Group Home staff attends meetings to help with school related issues. The children also reported that if they need assistance with their homework a Group Home staff or a tutor is available for them. A review of the children's report cards and school transcripts reveal that the children are progressing in school. One child reported that prior to his placement he was not attending school at all and now he is attending school daily and currently has passing grades in all of his classes.

Out of the four (4) files reviewed, none of the children had Individualized Education Plans. The Group Home had copies of current report cards, progress reports and transcripts in the children's file. The Group Home provides the children with the opportunity to participate in age appropriate Youth Development Services (YDS). One child reported that he has learned how to manage his time, how to cook and how to budget. Another child reported that he has learned how to wash clothes. Another child interviewed reported that he is on the basketball team at school. He indicated that he is a starter and the shooting guard. He reported that he averages 10 points per game.

Recommendations:

None

HEALTH AND MEDICAL NEEDS

Based on our review of CYSAF, interviews with four (4) children and/or documentation provided by the Agency, CYSAF complied with all six (6) elements in the area of "Health and Medical Needs".

Initial medical and dental exams conducted were completed within the first 30-days of placement as verified through Group Home documents. The children reported that all of their medical and dental needs were being met. They also reported that, if medical or dental treatment required any follow-up exams, they were completed within the appropriate time frame. The children indicated that they are aware of their right to refuse medication. Of the four (4) children interviewed only, one (1) child was on psychotropic medication. All four (4) children reported that they are aware of their right to refuse medication and medical attention and indicated that if they were to refuse the Group Home would complete a special incident report. A review of the medication log indicates that medication is properly distributed and documented.

Recommendations:

None

PSYCHOTROPIC MEDICATION

Based on our review of CYSAF, interviews with four (4) placed children and/or documentation provided by the Agency, CYSAF complied with both elements in the area of "Psychotropic Medication".

Of the four (4) children interviewed, one (1) child was on psychotropic medications. The child had a current psychiatric evaluation and a current court authorization for administration of psychotropic medication in his file. The child reported that he was aware of the type of medication that he was taking and why he was taking it. The child reported that he is taking an antidepressant and indicated that he does not feel any different when he takes it. He indicated that he "doesn't know" if the medication is helping him. The child was taken back to the psychiatrist and continued to take his medication as prescribed.

Recommendations:

None

PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

Based on our review of CYSAF, interviews with four (4) placed children and/or documentation provided by the Agency, CYSAF complied with 16 out of the 17 elements in the area of "Personal Rights and Social/Emotional Well-Being". The area of non-compliance was, "Children given opportunities to participate in planning activities".

Out of the four (4) interviews, all the children reported that they were informed of the Group Home's policies and procedures when they were first placed at the Group Home. All four (4) children reported during their interviews that they feel safe at the Group Home and are always supervised by Group Home staff. The four (4) children

interviewed all reported that there is appropriate staffing and supervision and that they get sufficient meals and snacks. The children reported that they would rate the food they receive as "fair". The children reported that there is a menu posted outside the kitchen on the wall. The children reported that there is always fresh fruit available to them on a daily basis such as watermelon, apples and oranges. They also reported that they receive snacks; such as, cookies, tortilla chips, and fruit.

During the child interviews, all four (4) children interviewed reported that the Group Home staff treats them with dignity and respect. They also reported that the discipline policies are consistently enforced, and there are fair and appropriate consequences for inappropriate behavior. The children reported that the Group Home operates on a behavioral level system, and when they do not follow the rules, as a consequence, they lose a privilege and have to write an essay.

All four (4) children reported that they receive unopened mail and have private visits. They also reported that they are allowed to make and receive private phone calls.

During the child interviews, all four (4) children reported that they are free to attend religious services and activities of their choice. They also reported that their chores are reasonable and not difficult. Examples of the types of chores the children reported include, cleaning the bathroom, raking the leaves out side, sweeping the floor and washing the dishes. The children reported that they were informed about their medication and that they are aware of their right to refuse medication. They also reported that they are free to receive or reject voluntary medical, dental and psychiatric care.

Only half of the children interviewed reported that they have the opportunity to participate in planning activities; however, all the children reported going on a variety of community activities. Some of the planned activities include taking a hike in San Pedro, going to the beach, going to the movies and going to a live play. One child reported that his favorite and most recent activity was going to see the play "The Covert" at the Kirk Douglas Theater. The children reported that they are given the opportunity to participate in age appropriate extra-curricular and social activities. The children reported that they all play on the school's basketball team. They indicated that they do participate in age appropriate social and community activities. These activities include hiking in community parks and visiting various theaters throughout the city.

Recommendations:

1. CYSAF shall ensure that all the children are given the opportunity to participate in planning activities.

PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

Based on our review of CYSAF, interviews with four (4) placed children and/or documentation provided by the Agency, CYSAF complied with seven (7) of the eight (8) elements in the area of "Personal Needs/Survival and Economic Well-Being". The area of non-compliance was, "Encouragement and Assistance with Life Book".

The Group Home provides appropriate clothing, items of necessity and gives monthly \$50.00 dollar clothing vouchers. The child interviews confirmed that the children receive

\$50.00 dollars every month. Clothing receipts were also verified to ensure that the children were receiving their clothing vouchers. Children are provided with opportunities to select their own clothes, and the clothing provided is of good quality and of sufficient quantity. The children reported that they shop at the Slauson Fashion Center and that they are satisfied with the clothes that they select.

The children reported that they receive the required minimum weekly allowance and that they are allowed to spend their allowance as they choose. All the children interviewed reported that they were given the opportunity to save their allowance; however, they reported that they spend their allowance on junk food, fast food, and potato chips.

During the child interviews, none of the children reported having Life Books. The Group Home staff reported that, upon arrival to the Group Home, the children are given the opportunity to complete a "Life Book" type packet called "Pathways to Success" and sign a waiver stating that they have received it. The waivers were reviewed at the Group Home; however, the packet did not contain any slots to attach pictures. The Group Home was encouraged to purchase albums or books and take pictures of the children while on outings so that the children can incorporate the pictures into their Life Books.

The Group Home provides the children with adequate personal care items; for example, lotion, deodorant and shampoo. The children also confirmed that they have these personal care items during their interviews.

Recommendations:

1. CYSAF will ensure that all children have "Life Books".

DISCHARGE PLAN

Based on our review of three (3) closed Probation files, CYSAF complied with two (2) of the three (3) elements in the area of "Discharge Plan". The area of non-compliance was, "Children placed at least 30-days, was the child discharged according to the permanency plan".

Of the three (3) discharged files reviewed, two (2) were discharged according to their permanency plan. The remaining child left the facility without permission and did not return. All three (3) children's case plan goals were family reunification and two (2) out of the three (3) were placed back with their families. The NSPs that were reviewed were child specific, measurable and time orientated. The NSPs reviewed showed that the children were making progress toward their goals as evidenced by the children being discharged according to their plan. The children were attending school regularly and participating in therapeutic services; such as, individual and group therapy, drug and alcohol program and behavior modification programs.

Recommendations:

None

PERSONNEL RECORDS

Based on our review of CYSAF and a review of five (5) personnel files, CYSAF complied with 13 of the 14 elements in the area of "Personnel Records". The area of non-compliance was, "Appropriate employees received minimum one-hour training in the area of child abuse identification and reporting".

A review of five (5) personnel records was completed. All training and background checks, such as, Department of Justice, Federal Bureau of Investigations and the Child Abuse Clearance Index were completed and current. The appropriate criminal background statements were signed and present in the files. All 10 staff had de-escalation and restraint training. Of the staff files reviewed, none had the minimum one (1) hour training in the area of child abuse identification and reporting. All files reviewed had the required educational documentation and criminal and child abuse clearances for their employees prior to being hired. The employee files had current CPR and First-Aid training. There were also signed copies of the Group Home policies and procedures in the files. All files reviewed had timely initial health screenings and emergency intervention training. The staff files had the required initial training, as well as the annual required on-going training. There were also current copies of the employee's driver's licenses in the files.

Recommendations:

1. CYSAF shall ensure that all staff receive the required one (1) hour training in the area of child abuse and provide verification of their completion.

AUDITOR CONTROLLER FISCAL REVIEW

The most recent Fiscal Review for CYSAF from the Department of Auditor Controller is dated December 10, 2007, for the fiscal period of January 1, 2004, to December 31, 2004. The report dated December 10, 2007, indicated that CYSAF had questioned/disallowed costs. CYSAF submitted a timely approved fiscal Corrective Action Plan, which is being monitored by the Department of Children and Family Services, Fiscal Monitoring Section.

Recommendations:

N/A

FOLLOW-UP VISIT

A follow-up visit was conducted on August 16, 2012, at CYSAF, to verify that all recommendations have been completed.

- A walk through of the interior was completed, and all the recommendations regarding washing or painting the dining room and bedroom walls and had been completed. The facility's entire interior was repainted a tan color.
- At the time of the review, none of the children had Life Books. The Group Home has purchased life books for all of the residents along with a camera to take pictures while out on outings. The Group Home has also developed a

form for the children to sign to ensure that each child has received their Life Book.

- At the time of the review, the children reported that they do not get to participate in planning activities. The Group Home has provided a written corrective action plan outlining how they will include the children's participation in planning activities.
- At the time of the review, one (1) child's NSP was not completed in a timely manner. The Group Home has provided a written corrective action plan detailing how they will ensure that all children's future NSPs are developed in a timely manner.
- At the time of the review, one child was not discharged according to his permanency plan. The Group Home Administration will continue to provide all the children with the services necessary to successfully complete their program in an attempt to ensure that all children are discharged according to their plan.
- At the time of the review, none of the employees had the required one (1) hour child abuse training. On July 21, 2012, the Group Home conducted a child abuse training class for its entire staff. The Group Home provided a copy of the class's sign-in sheet for verification of completion.



The Community Youth Sports and Arts Foundation

CORRECTIVE ACTION PLAN for COMMUNITY YOUTH SPORTS & ARTS FD.

July 18, 2012

On July 2, 2012, DPO Ratasha Smith discussed and submitted to Community Youth Sports & Arts Foundation, the Department of Probation's Group Home Monitoring Review Field Exit Summary. Present were Ms. Smith, Roland Freeman, Assistant Director and Glenn Scott, Administrator of the group home.

Community Youth, in response to Deficiencies cited in the Exit Summary, will institute the following **CORRECTIVE ACTION PLAN** to correct the items cited in this Exit Summary and to prevent any future violations of the items cited. Community Youth will also address any relevant Time Frames in which corrective actions are to be implemented and the person(s) who will be responsible for ensuring the Corrective Action Plan is implemented.

1. Number II: FACILITY and ENVIRONMENT (Items 11& 12). Community Youth will paint the dining room wall and paint and clean all of the bedrooms. The Administrator and the Assistant Director will ensure that the walls are painted and cleaned by August 31, 2012 and will inspect walls on a monthly basis to ensure the walls remain clean.
2. Number III: MAINTENANCE of REQUIRED DOCUMENTATION & SERVICE DELIVERY (Item 21). The Administrator and the Assistant Director will ensure that Community Youth's Treatment Team will develop and complete the initial Needs & Services Plan for each new resident within 30 days of the new resident's arrival at Community Youth. To ensure the initial Needs & Services Plan is completed within 30 days of the youth's arrival, the Administrator & the Assistant Director will develop a check list for each new resident and will contact the Treatment Team after 20 days of the resident's arrival to ensure the initial Needs & Services Plan is completed within 30 days.
3. Number VII: PERSONAL RIGHTS & SOCIAL/EMOTIONAL WELL-BEING (Item 59). The Administrator & the Assistant Director will conduct a monthly group session with the residents to give them the opportunity to participate in planning activities and outings. The first monthly group planning session with the residents will be held during the third week of July to plan activities and outings for the remainder of July and the first 2 weeks of August. These monthly planning sessions with the residents will be documented and will be held during the third week of each month.
4. Number VIII: PERSONAL NEEDS (Item 69). The Administrator & the Assistant Director will ensure that a photograph album of group home activities and/or outing are documented by taking pictures and by compiling the pictures taken into photo album of the residents while are involved in their activities and/or outings. Each resident will be encouraged to participate in developing his own photo album.
5. Number X: PERSONNEL RECORDS (Item 82). On July 21, 2012, Community Youth will conduct a one-hour Child Abuse Training which will be taught by the Community Youth social worker. The

4828 Crenshaw Boulevard Los Angeles, California 90043
(323) 294-8320 • FAX (323) 294-7440
e-mail: cysaf@pacbell.net

one-hour Child Abuse training will teach each staff how to identify and report Child Abuse. This course will be taught each year.

Glenn Scott, 8/18/12

Glenn Scott, Administrator, July 18, 2012
