



COUNTY OF LOS ANGELES PROBATION DEPARTMENT

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CALVIN C. REMINGTON
Interim Chief Probation Officer

May 27, 2016

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

FROM: Calvin C. Remington 
Interim Chief Probation Officer

**SUBJECT: FUTURE STARS YOUTH SERVICES 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 December 2015. 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.

Future Stars is a six (6) bed site and is licensed to serve a capacity of six girls, 13-18 years old. At the time of review, Future Stars served one Los Angeles County DCFS child and did not have any Los Angeles County Probation children. Based on the one placed child, the average length of placement was seven (7) months, and she was 17 years old.

The one DCFS child was selected for the child interview, and she was not prescribed psychotropic medication; therefore, her case was not reviewed for timeliness of Psychotropic Medication Authorizations (PMAs) or to confirm the required documentation of psychiatric monitoring. Additionally, one 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 Regulations and County Contract Requirements.

SUMMARY

During the PPQA/GHM review, the interviewed child generally reported feeling safe at Future Stars, and that she was provided with good care and appropriate services, was comfortable in her environment and treated with respect and dignity. Future Stars was in compliance with eight (8) of the 10 areas of our Contract Compliance Review: "Licensure/Contract Requirements", "Education and Workforce Readiness", "Health and Medical Needs", "Psychotropic Medication", "Personal Rights and Social/Emotional Well-Being", "Personal Needs/ Survival and Economic Well-Being", "Discharge Children", "Personnel Records".

PPQA/GHM noted deficiencies in two (2) out of the 10 areas, and there were no egregious findings or child safety issues in any of the areas. In the area of "Facility and Environment", Future Stars needed to ensure that all children's mattresses are in good condition. In the area of "Maintenance of Required Documentation and Service Delivery", Future Stars needed to ensure that all NSP's initial and updated are comprehensive and that they document the child's progress towards their permanency goal.

REVIEW OF REPORT

On January 8, 2016, Probation PPQA Monitor RaTasha Smith held an Exit Conference with Future Stars Youth Services Program Manager DaNette Seay. Mrs. Seay 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 Youth Services 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 corrected or 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.

Each Supervisor
May 27, 2016
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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.

CCR:REB
LCM:ae

Attachments

c: Sachi A. Hamai, Chief Executive Officer
Lori Glasgow, Executive Officer, Board of Supervisors
John Naimo, Auditor-Controller
Phillip L. Browning, Director, Department of Children and Family Services
Public Information Office
Audit Committee
Sybil Brand Commission
Latasha Howard, Probation Contracts
Sarah Wright, Future Stars Executive Director
Community Care Licensing

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

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

	Contract Compliance Monitoring Review	Findings: December 2015
I	<p><u>Licensure/Contract Requirements</u> (9 Elements)</p> <ol style="list-style-type: none"> 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 	Full Compliance (ALL)
II	<p><u>Facility and Environment</u> (5 Elements)</p> <ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Improvement Needed 4. Full Compliance 5. Full Compliance
III	<p><u>Maintenance of Required Documentation and Service Delivery</u> (10 Elements)</p> <ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Improvement Needed 10. Improvement Needed

IV	<p><u>Educational and Workforce Readiness</u> (5 Elements)</p> <ol style="list-style-type: none"> 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 	Full Compliance (ALL)
V	<p><u>Health and Medical Needs</u> (4 Elements)</p> <ol style="list-style-type: none"> 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 	Full Compliance (ALL)
VI	<p><u>Psychotropic Medication</u> (2 Elements)</p> <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 	Full Compliance (ALL)
VII	<p><u>Personal Rights and Social/Emotional Well-Being</u> (13 Elements)</p> <ol style="list-style-type: none"> 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 	Full Compliance (ALL)

	<ol style="list-style-type: none"> 12. Children Given Opportunities to <u>Plan</u> Activities in Extra-Curricular, Enrichment and Social Activities (GH, School, Community) 13. Children Given Opportunities to <u>Participate</u> in Extra-Curricular, Enrichment and Social Activities (GH, School, Community) 	
VIII	<p><u>Personal Needs/Survival and Economic Well-Being</u> (7 Elements)</p> <ol style="list-style-type: none"> 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 	Full Compliance (ALL)
IX	<p><u>Discharged Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 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	<p><u>Personnel Records</u> (7 Elements)</p> <ol style="list-style-type: none"> 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. <u>All</u> Required Training 	Full Compliance (ALL)

**FUTURE STARS YOUTH SERVICES GROUP HOME
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2015-2016**

SCOPE OF REVIEW

The purpose of this review was to assess Future Star's 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

For the purpose of this review, there was only one placed Los Angeles County DCFS foster child who made up the sample. Placement Permanency & Quality Assurance (PPQA), Group Home Monitor (GHM) interviewed the child and reviewed the case files to assess the care and services the child received. At the time of the review, no placed children were prescribed psychotropic medication; therefore, there were no case files reviewed to assess for timeliness of Psychotropic Medication Authorizations (PMAs) or to confirm the required documentation of psychiatric monitoring. Additionally, one Los Angeles County DCFS child's discharge 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 two (2) areas were out of compliance.

Facility and Environment

An inspection of the interiors and exteriors of Future Stars revealed some cosmetic deficiencies that require correction in the Children's Bedrooms:

- One of the mattresses in Bedroom #3 needed to be replaced, due to the worn springs that were no longer able to provide necessary support.

Recommendation

Future Star's management shall ensure that:

1. All of the aforementioned deficiencies sited in the children's bedrooms are repaired or corrected in a timely manner, especially that all children's mattresses are in good repair.

Maintenance of Required Documentation and Service Delivery

One child's file was reviewed, which had both Initial and Updated NSP's.

- The one (1) Initial NSP reviewed was not comprehensive. The date of admission was documented incorrectly as "5/24/15", when it should have been 4/24/15. Under the area "Case Plan Goal", the correct box was marked for family reunification; however, the comment section reads "to rejoin family members". The narrative in the comment section should reflect parents' involvement in the case plan and what reunification services the Group Home offered to the parents. Under the "Concurrent Case Plan Goal", the box was marked as "PPLA" but there was no documented efforts explaining why Adoption or Legal Guardianship was not considered. The education section of the initial NSP was also incomplete in some sections. The NSP also contained conflicting information throughout the report. For example, under "Life Skills Training", the box is marked 'No', indicating that the child's clothing does not meet the standard; however, it then stated that the child's clothing does meet the minimum standard set forth by the placing agency. The goal section was also out of compliance. The goals were too complex and not child specific. They were too broad to realistically provide any information as to whether the child improved or decreased the behavior issue, which made it difficult to determine if the child was making progress towards their goals. For example, "Develop and demonstrate a healthy sense of respect for social norms, consideration of boundaries that others around her feel safe, the over-all rights of others, and the need for transparency and honesty when conversing with others".
- Of the two (2) Updated NSPs reviewed, both were not comprehensive. One was marked as "Initial", when it should have been marked as updated. Both Updated NSPs still have the "Case Plan Goal" as family reunification with the same incorrect narrative "to rejoin family members"; however, there have not been any family visits documented. The

education section remains incomplete in some sections. The goals listed are the same as the initial NSP. There is a modified date listed but the goals were not changed or adjusted to ensure that the child meets the goal. The goals continue to be non-child specific and do not address any progress that the child may have made, and they are not specific as to why the child is placed. Also, all of the NSP's reviewed were not on the correct template form consistent with the form utilized for Los Angeles County youth.

Recommendation

Future Stars management shall ensure that:

1. All NSPs are written in a manner to show that children are progressing toward meeting NSP Case Goals.
2. All Initial NSPs are developed in a comprehensive manner with child's participation ensuring that all sections are complete and that the goals provided are child specific to why the child is placed. They shall also ensure that the goals are written in a way that can be measured.
3. All Updated NSPs are developed in a comprehensive manner with child's participation ensuring that all sections are complete and that the goals provided are child specific to why the child is placed. They shall also ensure that the goals are written in a way that can be measured.

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

PPQA/GHM's last compliance report dated August 17, 2015, identified six (6) recommendations.

Results

Based on the follow-up, Future Stars Youth Services fully implemented five (5) of the six (6) previous recommendations for which they were to ensure that:

- All placed children receive their minimum weekly allowance
- The Group Home is free of substantiated Community Care Licensing Complaints
- All physical deficiencies are corrected and repaired in the Common Areas

- All employees have their DOJ, FBI, Child Abuse Clearance prior to their hire date
- All employees have their minimum education/experience documented in their files

However, the follow-up discovered that Future Stars failed to fully implement one (1) of the previous recommendations for which they were to ensure that:

- Children's bedrooms are properly maintained. Future Stars fully implemented last year's recommendation surrounding the children's bedrooms and the common area by making the minor repairs; however, this year there was a new deficiency noted in this same area.

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 2015-2016, Fiscal Year.

Future Stars, inc.

April 5, 2016

Monitoring Review CAP

I. Facility and Environment

A. Area of non-compliance:

Are children's bedroom well maintained?

Explain the cause:

In bedroom #3 there was a mattress that needs to be re-placed.

Details on correcting the non-compliance:

A request for a new mattress had been received 24 hours prior. The maintenance Department was in the process of replacing and purchasing a new mattress during the monitoring review on the following day. The mattress was replaced within a 24 hour period.

How will CAP be implemented?

Facility manager will continue to ensure that maintenance request are submitted and completed within 24 hours.

Quality Assurance plan:

Program Manager, will continue to ensure all items of maintenance requests are submitted to Administrator. The item will be corrected within 24 hours on a weekly basis.

II. Maintenance Of Required Documentation and Service Delivery

A. Area of non-compliance:

Are the sampled children progressing toward meeting the Needs and Services case plans goals?

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Explain the cause:

Facility therapist was not documenting the progress of each youth. Los Angeles Probation monitor met with the Program therapist 1/14/16 and conducted a training demonstrating how to document the child's progress towards their child specific goals.

Details on correcting the non-compliance:

Facility therapist will ensure that all NSP's initial and updated document the child's progress by clearly identifying a need and developing goals that are attainable and reachable for each youth.

How will CAP be implemented?

Program manager, will check each NSP to ensure that that therapist has set attainable goals for each youth and they are progressing towards there goals.

Quality Assurance plan:

Administrator will ensure all NSP's are re-checked before being placed in client's file.

B. Area of non-compliance:

Did treatment team develop timely comprehensive, initial and updated Needs and Service Plans (NSP) with the participation of the developmentally age appropriate child?

Explain the cause:

The facility therapist did not proof read the NSP's which resulted in incorrect dates and missing information. The therapist was also not clear in the case plan goal section. He did not have the correct boxes checked concerning the child's case plan goal due to not being clear on the differences between the permanency planning goals. The agency also completes a follow up on reviewing each NSP prior to placing the document in the children's files; however, the designated facility staff who reviews the NSP's, did not notice the missing information and mistakes.

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Details on correcting the non-compliance:

The Los Angeles Probation monitor met with Facility therapist 1/14/16 to complete a training concerning the documentation of the NSP's. The Group Home Administrator held a training with the Facility Manager on 1/27/16 to ensure that all NSP's are properly proofread for errors or missing information prior to placing them in the files.

How will CAP be implemented

Program manager, will ensure all NSP's initial and updated are completed with all information being in its proper place. The goal sections will be reviewed to ensure that the goals are specific to why the child is placed and written in a way that are easily understood. The goals will also be reviewed to ensure that they are not cookie cutter and that they are specific to each child. Once the Program Manager approves the NSP's they will be sent to an agency representative and placed in youth's file.

Quality Assurance plan:

Administrator will ensure that all reports are re-checked before being filed in youth's files.



Sarah Wright-Administrator
Sarah Wright

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