

### County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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**Board of Supervisors HILDA L. SOLIS First District** MARK RIDLEY-THOMAS Second District SHEILA KUEHL Third District DON KNARE Fourth District MICHAEL D. ANTONOVICH

Fifth District

**BRANDON NICHOLS** Chief Deputy Director

August 16, 2016

To:

Supervisor Hilda L. Solis, Chair

Supervisor Mark Ridley-Thomas

Supervisor Sheila Kuehl Supervisor Don Knabe

Supervisor Michael D. Antonovich

From:

Philip L. Browning

Director

### VISTA DEL MAR COMMUNITY TREATMENT FACILITY CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of the Vista Del Mar Community Treatment Facility (the CTF) in September 2015. The CTF has one site located in the Second Supervisorial District and provides services to the County of Los Angeles DCFS placed children and Probation foster youth. According to the CTF's Program Statement, its stated purpose is to "provide comprehensive, family-centered social, educational, and behavioral health services which encourage children, adolescents and their families to lead self-reliant, stable, and productive lives."

At the time of the review, the CTF served 18 DCFS placed children and three Probation foster youth. The CTF is licensed to serve a capacity of 24 male and female youths, ages 14 through 18. The placed children's average length of placement was seven months, and their average age was 16.

### SUMMARY

During CAD's Contract Compliance Review, the interviewed children generally reported: feeling safe at the CTF; having been provided with good care and appropriate services; being comfortable in their placement environment; and being treated with respect and dignity.

The CTF was in full compliance with 6 of 10 areas of CAD's Contract Compliance Review: Maintenance of Required Documentation and Service Delivery; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Discharged Children; and Personnel Records.

CAD noted deficiencies in the areas of: Licensure and Contract Requirements, related to a Community Care Licensing (CCL) citation; Facility and Environment, related to expired or unlabeled Each Supervisor August 16, 2016 Page 2

perishable food; Personal Rights and Social/Emotional Well-Being, related to staff not treating some children with respect and dignity; Personal Needs/Survival and Economic Well-Being, related to allowing children to purchase personal care items with their allowance.

Attached are the details of CAD's review.

### **REVIEW OF REPORT**

On September 28, 2015, Eboni Alexander, DCFS CAD and Adelina Arutynmyan, DCFS Out-of-Home Care Management Division (OHCMD), held an exit conference with the CTF representatives: Amy Jaffe, Senior Vice President of Operations; Renee Capeloto, Acting Site Administrator; Lynn Cohen, Handler Unit Director; Maricela Morales, Quality Assurance Manager; and Ana Solares, Clinical Case Coordinator. The CTF's representatives agreed with the review findings and recommendations; were receptive to implementing systematic changes to improve compliance with regulatory standards; and were in agreement with addressing the noted deficiencies in a Corrective Action Plan (CAP).

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

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

On September 28, 2015, OHCMD provided technical assistance to the CTF to help implement the recommendations noted in this report. On October 19, 2015, CAD conducted a follow-up visit to the CTF to verify implementation of the CAP.

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

PLB:KR LTI:ea

#### Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Calvin C. Remington, Interim Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Nancy Tallerino, LCSW, Acting Chief Executive Officer, Vista Del Mar Community
Treatment Facility
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Lenora Scott, Regional Manager, Community Care Licensing Division

License Number: 197803679 / Community Treatment Facility

	Contract Compliance Review	Findings: September 2015	
1	Licensure/Contract Requirements (9 Elements)		
	<ol> <li>Timely Notification for Child's Relocation</li> <li>Transportation Needs Met</li> <li>Vehicle Maintained In Good Repair</li> <li>Timely, Cross-Reported SIRs</li> <li>Disaster Drills Conducted &amp; Logs Maintained</li> <li>Runaway Procedures</li> <li>Comprehensive Monetary and Clothing Allowance Logs Maintained</li> <li>Detailed Sign-In/Out Logs for Placed Children</li> <li>CCL Complaints on Safety/Plant Deficiencies</li> </ol>	<ol> <li>Full Compliance</li> <li>Improvement Needed</li> </ol>	
-	Facility and Environment (5 Elements)	3. Improvement Needed	
	<ol> <li>Exterior Well Maintained</li> <li>Common Areas Well Maintained</li> <li>Children's Bedrooms Well Maintained</li> <li>Sufficient Recreational Equipment/Educational Resources</li> <li>Adequate Perishable and Non-Perishable Foods</li> </ol>	<ol> <li>Full Compliance</li> <li>Full Compliance</li> <li>Full Compliance</li> <li>Full Compliance</li> <li>Full Compliance</li> <li>Improvement Needed</li> </ol>	
III	Maintenance of Required Documentation and Service		
	<ol> <li>Child Population Consistent with Capacity and Program Statement</li> <li>DCFS Children's Social Worker's Authorization to Implement Needs and Service Plans (NSPs)</li> <li>NSPs Implemented and Discussed with Staff</li> <li>Children Progressing Toward Meeting NSP Case Goals</li> <li>Therapeutic Services Received</li> <li>Recommended Assessment/Evaluations Implemented</li> <li>DCFS Children's Social Workers Monthly Contacts Documented</li> <li>Children Assisted in Maintaining Important Relationships</li> <li>Development of Timely, Comprehensive Initial NSPs with Child's Participation</li> <li>Development of Timely, Comprehensive, Updated NSPs with Child's Participation</li> </ol>	Full Compliance (All)	

IV	Education and Workforce Readiness (5 Elements)		
	Children Enrolled in School Within Three School     Days	Full Compliance (All)	
	Group Home Ensured Children Attended School and Facilitated in Meeting Their Educational Goals		
	Current Report Cards/Progress Reports     Maintained		
	Children's Academic Performance and/or     Attendance Increased		
	5. Group Home Encouraged Children's Participation in Youth Development Services (YDS) or		
-	Equivalent Services and Vocational Programs		
V	Health and Medical Needs (4 Elements)		
	Initial Medical Exams Conducted Timely	Full Compliance (All)	
	2. Follow-Up Medical Exams Conducted Timely		
	Initial Dental Exams Conducted Timely     Follow-Up Dental Exams Conducted Timely		
VI	Psychotropic Medication (2 Elements)		
V1	2 Liements)		
	Current Court Authorization for Administration of      Development Madienting	Full Compliance (All)	
	Psychotropic Medication  2. Current Psychiatric Evaluation Review		
VII	Personal Rights and Social/Emotional Well-Being		
	(13 Elements)		
	Children Informed of Group Home's Policies and Procedures	1. Full Compliance	
	2. Children Feel Safe	2. Full Compliance	
	Appropriate Staffing and Supervision	3. Full Compliance	
	4. Group Home's Efforts to Provide Nutritious Meals and Snacks	4. Full Compliance	
	5. Staff Treat Children with Respect and Dignity	5. Improvement Needed	
	6. Appropriate Rewards and Discipline System	6. Full Compliance	
	<ol><li>Children Allowed Private Visits, Calls, and Correspondence</li></ol>	7. Full Compliance	
	Children Free to Attend or Not Attend Religious     Services/Activities	8. Full Compliance	
	9. Children's Chores Reasonable	9. Full Compliance	
	10. Children Informed About Their Medication and	10. Full Compliance	
	Right to Refuse Medication  11. Children Free to Receive or Reject Voluntary	11. Full Compliance	
	Medical, Dental, and Psychiatric Care	ka = " = "	
	12. Children Given Opportunities to Plan Activities in Extracurricular, Enrichment, and Social Activities	12. Full Compliance	
1	(Group Home, School, Community)		
		13. Full Compliance	

	13.	Children Given Opportunities to Participate in Extracurricular, Enrichment, and Social Activities (Group Home, School, Community)		
VIII		onal Needs/Survival and Economic Well-Being		
	(7 Ele	ements)		
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	1.	\$50 Clothing Allowance	1.	•
	2.	Adequate Quantity and Quality of Clothing Inventory	2.	Full Compliance
	3.	Children Involved in the Selection of Their Clothing	3.	
	4.	Provision of Clean Towels and Adequate Ethnic Personal Care Items	4.	Improvement Needed
	5.	Minimum Weekly Monetary Allowances	5.	Full Compliance
	6.	Management of Allowance/Earnings	6.	
	7.	Encouragement and Assistance with a Life Book or Photo Album	7.	Full Compliance
IX	Disch	narged Children (3 Elements)		
	1.	Children Discharged According to Permanency Plan		Full Compliance (All)
	2.	Children Made Progress Toward NSP Goals		
	3.	Attempts to Stabilize Children's Placement		
X	Perso	onnel Records (7 Elements)		
	1.	Federal Bureau of Investigation (FBI), Department of Justice (DOJ), and Child Abuse Central Index (CACI) Submitted Timely		Full Compliance (All)
	2.	Timely Completed Criminal Background Statement		
	3.	Education/Experience Requirement		
	4.	Employee Health Screening/TB Clearances Timely		
	5.	Valid Driver's License		
	6.	Signed Copies of Group Home Policies and		
		Procedures		
	7.	All Required Training		53

# VISTA DEL MAR COMMUNITY TREATMENT FACILITY CONTRACT COMPLIANCE REVIEW FISCAL YEAR 2015-2016

### **SCOPE OF REVIEW**

The following report is based on a "point in time" review. This compliance report addresses findings noted during the September 2015 review. The purpose of this review was to assess the Vista Del Mar Community Treatment Facility's (the CTF's) compliance with its County contract and State regulations and included a review of the CTF's Program Statement as well as internal administrative policies and procedures. The compliance 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, six Department of Children and Family Services (DCFS) placed children were selected for the sample. The three Probation foster youth were not available for the child interviews. The Contracts Administration Division (CAD) interviewed six children. Additionally, three discharged children's files were reviewed to assess the CTF's compliance with permanency efforts. During the site visit, the children were observed to be comfortable and well cared for in the CTF and staff were observed to be responsive to the children's needs. At the time of the review, six children were prescribed psychotropic medication. Each child's case file was reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the 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 provision of quality of care and supervision provided to the placed children.

### CONTRACTUAL COMPLIANCE

CAD found the following four areas to be out of compliance:

### **Licensure/Contract Requirements**

Community Care Licensing (CCL) citation.

CCL cited the CTF as a result of deficiencies and findings noted during an unannounced facility visit on December 10, 2014. According to the report, a child received medication from Planned Parenthood and then shared it with another child upon her return to the CTF. Staff did not check the child's bag that was brought back from the clinic and did not inform the CTF's Health Center that

the child was given medication at another clinic. Both children were transported to the hospital for a safety check and no concerns were noted. The responsible staff was terminated from employment and the CTF was cited for not following established protocol. CCL requested a Plan of Correction (POC) from the CTF that required additional training for staff regarding the CTF procedures. The POC was cleared by CCL on December 17, 2014. A Child Welfare Services/Case Management System (CWS/CMS) search confirmed the DCFS Child Protection Hotline generated a non-Emergency Response (ER) referral, and DCFS ER or Out-of-Home Care Investigations Section was not involved with an investigation.

### Recommendation:

The CTF's management shall ensure that:

1. The CTF is in compliance with Title 22 Regulations and free of CCL citations.

### **Facility and Environment**

Adequate perishable and non-perishable food were not maintained.

Food items (butter and Lactaid) within the residential units were not properly labeled, missing expiration dates, or had already expired.

The CTF staff removed and disposed of the unlabeled and expired items the day of the CAD review. The CTF implemented a new food service policy for the residential units, which required all food service staff to check the expiration dates on food items before distributing them to the residential units. Unit staff will then double check all expiration dates prior to storing them in the pantry or the refrigerator.

CAD conducted a follow-up visit on November 24, 2015, and found that all food items stored in the residential units were properly labeled.

### Recommendation:

The CTF's management shall ensure that:

2. Adequate perishable and non-perishable food are maintained.

### Personal Rights and Social/Emotional Well-Being

Staff did not treat the children with respect and dignity.

Three of the six children interviewed reported that they were not treated with respect and dignity by staff. The children mentioned incidents of staff taunting them, calling them names, staff cursing, and otherwise intentionally provoking children. The same children reported feeling safe within the CTF overall, and added that the majority of staff were responsive to their needs and concerns.

During the review, the CTF representative was informed of the children's statements and staff acknowledged that they heard similar reports, and had previously met with one of the identified staff

to discuss these matters. The identified staff was given a final warning counseling memo where expected behaviors were discussed and it was noted that failure to comply would result in termination of employment.

CAD conducted a follow-up visit on November 24, 2015, and interviewed three additional placed children. Each child reported feeling that they were treated with respect and dignity by staff, and stated that they had witnessed other children being treated similarly.

### Recommendation:

The CTF's management shall ensure that:

3. Staff treat children with respect and dignity.

### Personal Needs/Survival and Economic Well-Being

Personal care items were not provided.

Four of the children interviewed stated that they have used their allowance to purchase preferred personal care items not provided to them by the CTF.

At the exit conference, the CTF representative stated that staff would be provided additional training regarding the policy that residents must not spend their own money on personal care items.

CAD was later provided documentation verifying that staff were trained on September 17, 2015, regarding the provision of personal care items to residents. The residents were also informed of the new protocol where children will be taken to the store, where they can select their desired special personal care items if the CTF does not have those in stock, and/or staff will purchase those items for them.

### **Recommendation:**

The CTF's management shall ensure that:

4. Children are provided with adequate personal care items.

### PRIOR YEAR FOLLOW-UP FROM DCFS CAD'S CTF CONTRACT COMPLIANCE REVIEW

CAD's last compliance report dated January 11, 2016, identified 17 recommendations.

#### Results:

Based on CAD's follow-up, the CTF fully implemented 14 of 17 recommendations for which they were to ensure that:

- SIRs are cross-reported and timely.
- Comprehensive monetary and clothing allowance logs are maintained.

- Detailed Sign-In/Out log for placed children are maintained.
- Children progressing toward meeting Needs and Services Plan (NSP) case goals.
- Therapeutic services received.
- Development of timely, comprehensive, Updated NSPs with child's participation.
- Children's academic performance or attendance increased.
- Follow-up medical exams conducted timely.
- Children feel safe.
- Appropriate staffing and supervision.
- Appropriate rewards and discipline system is in place.
- Children informed about their medication and right to refuse medication.
- Adequate quantity and quality of clothing inventory.
- Staff complete all required training.

Based on the results of the current review, 3 of 17 recommendations were not implemented:

- The CTF is in compliance with Title 22 Regulations and free of CCL complaints.
- Staff treat children with respect and dignity.
- Provision of adequate personal care items.

### Recommendation:

The CTF's management shall ensure that:

5. The outstanding recommendations from the previous report dated January 11, 2016, which are noted in this report as recommendations 1, 3 and 4, are fully implemented.

The CTF representative expressed their desire to remain in compliance with Title 22 Regulations and contract requirements. CAD conducted a follow-up visit on November 24, 2015, and the CTF had implemented all of the recommendations noted in this report. The CTF's unlabeled food items were immediately discarded during the review. The CTF's Senior Vice President immediately met with residential unit staff to review staff conduct expectations. Facility staff were provided additional training on the policy regarding the provision of personal care items on September 17, 2015. The CTF will consult with the Out-of-Home Care Management Division for additional support and technical assistance, and CAD will continue to assess implementation of the recommendations during the next review.

Philip M. Stein Chair, Board of Directors

Louis Josephson, Ph.D. President/Chief Executive Officer



October 8, 2015

Out of Home Care Management Division 9320 Telstar Avenue, Suite 206 El Monte, CA 91731 (626) 569-6819

Attention: Eboni Alexander

### RE: CORRECTIVE ACTION PLAN, Community Treatment Facility (CTF)

Dear Ms. Alexander:

I am providing the Contracts Administration Division with a Corrective Action Plan (CAP) as requested regarding the findings revealed during the monitoring of our CTF (AKA Special Care Facility) by DCFS' Contract Compliance Department.

### FINAL MONITORING REVIEW FIELD EXIT SUMMARY 9/28/2015

### I. Licensure/Contract Requirements

9. Is the group home free of any substantiated CCL, complaints on safety and/or physical deficiencies since the last review?

CAP: CCL complaint was immediately addressed upon receipt and CAP was enacted and approved by CCL.

#### II. Facility and Environment

14. Does the group home maintain adequate perishable and non-perishable foods and adhere to product "used by or freeze by" or expiration date?

An expired Lactaid and an unlabeled butter stick were found in the Sky wing.

CAP: Our Food Company completed a corrective action plan whereby their management staff will check all food before it is delivered to the units to ensure that all food has a "use by" date and are not outdated. A signed copy will be saved and filed. On a weekly basis, one of the management team will audit all the unit's pantry stock to ensure that all food items are not outdated. Unit staff will also double check "use by dates" when food is delivered and as well as set out for use by the children. (See attached FOOD SOLUTIONS CORRECTIVE ACTION FORM).

### VII. Personal Rights and Social/Emotional Well Being

40. Do children report being treated with dignity?

Three of the six children interviewed stated that certain staff call them names and taunt them.

CAP: Senior VP Amy Jaffe met individually with the 4 staff who the three children identified as those who do not treat them with dignity. Prior to the review, this writer had met with staff MR regarding engaging in power struggles and for engaging with a child in a judgmental manner. Following the DCFS review, this writer met with MR again and he received a FINAL WARNING counseling memo. Expected behaviors were discussed and he understands that failure to comply will result in termination of employment. This writer also met with staff MS, JE and MP. Expected interactions were reviewed and we discussed Vista Del Mar's relationship based/DBT approach to working with youth which focuses on treating clients in a nonjudgmental, validating and supportive manner at all times. All were open to feedback and in fact have demonstrated positive interactions with our residents. Staff JE was able to self-reflect and understood how a comment he made about drug use could have been pulled out of context or misinterpreted. He will be more mindful of how he expresses himself.

### VIII. Personal Needs/Survival and Economic Well-Being

52. Are children provided with a sufficient supply of clean towels along with adequate personal care items...and are these items readily accessible?

Four of the children interview stated that they have used their allowance or gift cards to purchase "special" hygienic items not made available to the CIF.

CAP: Review took place with all staff (including supervisors) regarding the policy that residents should not spend their own money on personal hygicine products if we don't have the comparable product that the child desires in our regular supply. This was reviewed in unit meetings during October (please see attached training ontline and sign in sheet). If a resident would like a personal care item that is not stocked at this facility, Vista Del Mar will fund the alternative options that can be purchased during off site community outings or for those residents who cannot safely go off grounds, the staff will purchase the requested item for them. In addition, direct care staff have met with the children one on one to review this protocol. Please also see information regarding this as addressed in the unit's handbook for residents.

Please let me know if additional information is needed.

Sincerely,

Amy Jaffe, LCSW

Senior Vice President of Intensive Intervention Programs

Cc: Adelina Arutyunya, DCFS Quality Assurance/OHCMD
Louis Josephson, PhD, CEO
Quality Assurance Department
Steven Smithwick, Contract Compliance Manager, Vista Del Mar