

Juvenile Justice Commission County of Santa Clara

840 Guadalupe Parkway
San Jose, California 95110
(408) 278-5993 FX (408) 294-6879



SANTA CLARA COUNTY JUVENILE JUSTICE COMMISSION GROUP HOME INSPECTION REPORT CALIFORNIA ANCHOR RESIDENTS, INC., #2 JULY 2016

INTRODUCTION

California Anchor Residents, Inc. (CAR) operates two group homes in Santa Clara County (County), one for boys (CAR #1) and one for girls (CAR #2). The subject of this report is CAR #2, which was licensed on May 16, 2006 as a Rate Classification Level (RCL) 10 for both dependency and juvenile justice placement. The Home is now at RCL 9.

As a part of the Juvenile Justice Commission's (JJC) annual review, two Commissioners visited CAR #2 (Home) on April 15, 2016. Based on the findings, the JJC decided to conduct a full inspection of the Home pursuant to California Welfare and Institutions Code Section 229.5¹ and the criteria established in the California Code of Regulations, Title 22, Division 6, Chapter 1, (§80000 *et seq.*) and Chapter 5 (§84000 *et seq.*) The Commissioners conducted the inspection of the facility on May 5, 2016.² The team interviewed the staff and reviewed documentation provided to the residents and staff. In addition, two Commissioners reviewed the California Department of Social Services Community Care Licensing Division (CCL) file for the Home. Subsequent questions were posed to the Executive Director and Supervisor of the San Jose homes. The findings and observations of the visit, inspection, interviews and document review are detailed in this report.

SITE VISIT: APRIL 15, 2016

The following is a summary of the Commissioners' observations during this visit:

- The windows were missing screens throughout the house.
- Two of the smoke detectors tested were not operating.

¹ WIC 229.5 (a) Notwithstanding any other provision of law, a juvenile justice commission may inquire into the operation of any group home that serves wards or dependent children of the juvenile court and is located in the county or region the commission serves. The commission may review the safety and well-being of wards or dependent children placed in the group home and the program and services provided in relation to the home's published program statement.

² A letter informing the CAR Executive Director and daytime Facility Manager of the inspection was emailed on Monday, May 2, 2016. The letter contained a list of documents for review and a request for additional staff to be available for the inspection. On the inspection date, the two staff present were not aware of the inspection and were unable to provide all of the requested documents nor prepared to answer all of the posed questions.

- The food menu was outdated (February) and non-compliant.
- The water heater was not secured and moved easily.
- The exterior of the house was poorly maintained; for example, paint was chipping all around the outside of the house.
- A video camera mounted in the backyard near the top of the house was pointing to the roof (Fig. 3).
- Weeds on the side of the house were overgrown.
- The garage door that leads to the outside was not working properly.
- The bedroom door next to the bathroom was loose because the door hinges were not tightly secured.
- The bathroom wall had a hole where the doorknob hit the wall.
- The evacuation plan was posted only in the office.
- What appeared to be mold was found on the backyard exterior wall next to a leaky pipe.

INSPECTION

I. Population

The Home is licensed for girls 11 to 18 years with a maximum capacity of six youth. At the time of the inspection, six girls lived in the Home, ranging from ages of 13 to 17. Two of the girls come from within Santa Clara County and four from other California counties. All of the residents were dependency placements.

II. Facility

The one story house is located in the Evergreen residential neighborhood of San Jose.

Exterior

- The front yard was generally well maintained.
- A large area of the backyard that once was a lawn is now dirt. Evergreen bushes and trees are located throughout the yard. The team found bones, trash and empty bags strewn throughout the yard (Fig. 1). The Commissioners were told the Home has a no smoking policy but the team found a lighter and a makeshift ashtray in the back yard. The yard also contains a child's play structure, which does not appear to be sturdy.
- The side yard was overgrown with weeds.
- A leaking, disconnected pipe was found in the patio area with water seeping under the house at the foundation level. A black substance covered the wall of the home and cement patio near the leaking pipe (Fig 2).
- The paint on the outside trim of the house adjacent to the roof is chipped or peeled away leaving bare wood. Also, extensive wood damage was evident (Fig. 3).

Interior

- The Home has three bedrooms and an office, which was originally the master bedroom. Two girls occupy each of the bedrooms.
- While there is a dresser and closet in each of the bedrooms, the majority of the girls' clothing was in piles on the floor, on top of the beds and in baskets/containers. None of the clothing was folded and neatly stored (Fig.4). In at least one of the bedrooms, a large container of clothing impaired ingress and egress to and from the room, which is a safety hazard.

- Two of three smoke alarms tested were inoperable.
- Two new fire extinguisher were bought a week prior to the inspection.
- While the house has air conditioning, cool air did not flow from the vents when it was switched on during the inspection. The residents reported the Home was too hot in the winter. The Commissioners were informed the temperature control for the heater was also not working. The house was warm (78°) during the inspection. To cool the interior, the front door and windows throughout the house were open. While not visible, the team was told fans were also available in the bedrooms.
- None of the windows, except for the one in the kitchen, had screens.
- The bathroom walls were stained with dirt, makeup and an unidentified red substance.
- A sliding door track on the floor for the hall closet was caked with dirt in the corner (Fig. 5).

Garage

- The garage was cluttered with a Christmas tree, unused exercise equipment, boxes, mattresses and toys/stuffed animals (Fig. 6).
- About a dozen empty large water bottles were also located in the garage (Fig. 6).
- Laundry was piled on the floor and in the washer (Fig. 6)
- A wet area was found under the water heater (Fig. 7).
- Paint cans were stored in the garage (Fig. 7).

Kitchen

- The refrigerator in the kitchen did not contain a sufficient amount of food to feed the residents for two days (Fig. 8). The only fresh vegetables were a bag of onions and a head of wilted lettuce (Fig. 9) The Supervisor indicated that other fresh perishable foods were stored in refrigerator located in the office, behind the desks, because the residents were mishandling the food – for example, drinking directly out of the juice container or throwing milk away. When a resident was asked if she cooked meals, she responded she would if there were adequate ingredients available. Access to other fresh food located in the office must be through staff.
- The kitchen cupboards contain only prepackaged food, but not in the amount that would meet the state regulations (Fig. 10).
- The food menu covered only one week and contained meals of pre-packaged junk food, hot dogs, and chicken. The menu did not contain fresh vegetables, dairy or juice.
- The girls reported that each girl prepared her own breakfast and lunch. Staff prepares dinner.
- The quantity of tableware and utensils for meal preparation was inadequate.
- The dishwasher appeared to be unused.
- A bowl was placed on the kitchen table containing only a small amount of fruit, including an overripe banana and a rotten pear covered with fruit flies (Fig. 11).
- The microwave and oven were dirty.
- Food was left on the counter, dirty dishes in the sink and trash and food scraps on the floors of the kitchen and family room (Fig.11).

- A chair was placed upside down on a dining table in the family room with what appeared to be dried vomit on the underside (Fig. 12).

III. Administrative Functions

Documentation

- The CCL license was not posted in the Home.
- Staff was unable to provide the Plan of Operation, which includes a description of services, procedures and a written intervention plan. Staff stated a Policy and Procedure Binder exists, but she could not locate it in the office.
- The Home provides an Intake Packet to each newly admitted resident and reviews the contents orally within 48 hours of admission. The Commissioners reviewed the Intake Packet, and it contains all of the required materials. The orientation packet admissions agreement states the Home is a nonprofit emancipated group home that admits youth between the ages of 18 to 21, which is out of the scope of the youth currently residing in the Home.
- In reviewing one randomly selected file of a current resident, the following were missing:
 - Educational records
 - Immunizations records
 - Consent forms
 - Service plan
 - Court status and reports

Staffing

- The staff stated staffing ratio complies with regulations, but was not documented and could not be verified. Observation of the residents' after-school activities, staff feedback and the physical condition of the Home indicate that the role of the staff is custodial only.

Staff Training

- Staff stated that the Home has a training plan, but she could not locate the Policy and Procedures Manual or the training records for each staff member.
- Staff stated training is primarily through attendance at external Eastfield Ming Quong (EMQ) trainings. The staff could not demonstrate any evidence of any internal staff trainings.
- A certificate for the completion of the group home administrator program was posted on the wall in the Office.

IV. Programs/Services

Service Plan

- The Supervisor of the San Jose homes stated a generic service plan is used when the resident is first admitted. During the inspection, the team was shown an individualized service plan, which was non-specific, pre-filled and pre-signed and consisted primarily of house rules. Staff stated that after 30 days of observed behavior by staff, the Home therapist develops an individual service plan. Staff also indicated the service plan is periodically updated. Staff stated the Home

rarely communicates with the residents' families even though family interaction is part of the service plan noted in the Plan of Operation.

Planned Activities

- Staff tries to hold a group meeting once a week, but stated most girls do not want to participate.
- Staff provided the Commissioners with the April list of monthly activities offered, which details the following: Library, Hub, YMCA, a movie at home and at a movie theater during the week and bowling, Dave & Buster and Paintball on Saturdays once during the month. The activities list was not posted. The posted HUB resource calendar of upcoming events was from the previous month. If approved by the social worker, leisure time can be spent by being outside, going to the local park or watching TV. At the time of the JJC inspection, the girls who returned from school immediately turned on the television and started watching cartoons followed with a horror movie. During the course of the inspection all of the girls spent some time watching TV and using their cell phones.
- The staff remarked that most of the girls are not interested in the planned activities. Only one girl actively visits the Hub.
- The Home does not provide assistance in money management, which is also part of the services outlined in the Plan of Operation.
- A list of specific chores assigned to each girl is posted in the kitchen. The Plan of Operation schedule of activities lists time for chores on Saturday and Sunday. No other time slots are designated during the week. Generally the living room, family room and the bathrooms were neat, but the kitchen was not.

Religious Services

- Only one of the girls attends church.

Education

- Three of the six girls attend school. The remaining girls refuse. Other than one day of restriction, no other consequences are imposed. The Commissioners were told those girls stay in bed until noon. The social worker and Community Care Licensing are notified every day of their refusal. No such documentation was available.
- The staff was unaware that the Hub offers independent living classes.
- The CAR Plan of Operation outlines the daily activities for the residents. Studying is scheduled for 3:00 to 5:00 pm. The inspection was conducted during this time. Only one girl was observed studying in her bedroom. The remaining girls watched TV, including the girls on restriction for refusing to attend school.
- Staff reported that the county of adjudication provides tutoring services. Staff also is available to help the girls on homework. The Home does not assist in seeking tutoring for the girls.
- The school contacts the Home if any of the girls are truant or have problems at the school. The Home will reach out to teachers for information concerning their progress in learning or the presence of any other problems.
- The staff said none of the girls is willing to participate in after school activities.
- The Home has only one computer, which is in the office and available to the residents to complete school assignments. At the time of the inspection the printer was out of ink. None of girls has her own computer/laptop.

- No suitable study area was provided for the girls.

Medical

- Appointments for medical, dental, and vision assessment are made within 30 days of admission. The Home provides transportation to appointments.
- A Commissioner randomly selected a resident file and found a medication and dosage record. Staff stated that refusals to take medications were noted on the daily record and are reported to the social worker. Over the counter medication are only administered with a doctor's approval.
- The medications are properly stored.
- Staff stated the immunization records are part of the Health Passport provided by the Department of Family and Children Services and would be placed in the resident's file. As was reported above, a random review of a file found the immunization records missing.

Mental Health

- A therapist comes to the Home once a week for four hours in the late afternoon. At that time, the therapist prepares or modifies the service plan and meets with the girls individually when necessary. If needed, the therapist will hold a group session.
- The majority of the girls have individual therapists outside the Home. EMQ and Seneca provide the most mental health services for the residents.
- Transportation to appointments is provided either by the Home or another support person.

First Aid

- The Commissioners reviewed the list of staff trained on first aid. One staff member is overdue for recertification.
- The first aid kit was fully stocked, but the first aid manual was not with the kit.
- The house has an emergency contact list posted.

V. Discipline

The discipline policy and procedures are included in the Intake Packet and are orally reviewed with the resident. House rules are posted on the office wall.

Consequences

- Consequences for violation of policies and procedures are posted in the kitchen and office. The notice details the consequences: three-day restriction for AWOL, two-day restriction for fighting and failure to attend school is one day.
- The type of consequences is tied to the violation. AWOL and fighting result in a loss of access to activities, trips and TV. Missing school is a one-day restriction. While the refusal to do chores has consequences, this violation is not listed on the notice.
- Staff could not describe any additional attempts to correct a resident's behavior, apart from being placed on restriction and not allowed to leave the home.

Point System

- The girls are able to earn points for compliance with the policies and procedures and house rules. They may also earn extra points. The point system is posted on the kitchen wall.

- Each of the girls receives a letter rating (A–F) that signifies her level of compliance with rules/policies. Staff at the end of each shift initials the compliance level for each girl.
- Points and compliance level letter rating for each girl is posted in the office.

Allowance

- A resident can earn up to \$20 per week in accordance with the point system.
- The Home opens a bank account for each resident and provides the girls with spending money from their accounts.

Complaint Process

- The residents are instructed to call CCL on the phone set up for this purpose. The resident leaves a message, and CCL returns the call. The complaints to CCL are logged, but no other documentation takes place.

Grievance

- According to the Intake Packet, grievances are initially brought to the attention of staff. The procedure provides for a discussion at the Home’s group meeting and/or a meeting with the facility manager, administrator, or executive director. The procedure also lists the appeal process for the resident if she is dissatisfied with the outcome.

Incident Report (IR)

- Copies of IRs are sent to CCL and kept in a binder. The Administrator and Supervisor review each IR. If a resident is placed on restriction, the action must be with the Supervisor’s approval.

VI. Personal Rights (other than what has been described in other sections)

- Personal rights are posted in the office.
- Other than personal items the girls bring with them, the Home provides clothing as needed and other personal hygiene items.
- All of the girls currently residing at the Home have cell phones. The Home asks the girls to turn in their phones at 8:00 pm, but will not press the issue if the phone is not handed in. The Home has Wi-Fi, but access can be restricted if a determination is made that a resident is using her phone inappropriately. A house phone is available for the girls to call their social workers and attorneys.

FEEDBACK FROM YOUTH

The Commissioners interviewed two residents and spoke with others. The girls did not express dissatisfaction other than with the variety and quality of the food. They indicated relief that the Home is an alternative to untenable home situations, though they would prefer to be with their families. The Commissioners inferred from the conversations and from personal observation that minimal programming, structure, or support are offered by staff on-site. Some preferred to remain off-site from the time school is dismissed until curfew. If they remain at home, they are in front of the TV or on their phone. One girl indicated the staff is agreeable to taking the residents to the HUB and YWCA when requested. The HUB was praised for its programs, services, and supportive atmosphere.

SUMMARY

The conditions found in the facility and on the grounds of the facility jeopardize the residents' safety and well-being. The omissions in administrative practices and record keeping indicate inadequate supervision of the residents. Based on the information gathered and the inspection of the facility, the Santa Clara County Juvenile Justice Commission reports that California Anchor Residents #2 has not met a significant number of requirements mandated by the California Code of Regulations, Title 22. Based on the Commission's findings, the Commission registered a complaint with CCL. The agency has undertaken an investigation that substantiated numerous violations and required corrective action to be completed by specific dates.

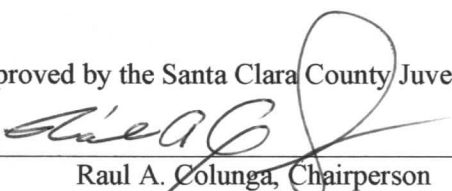
RECOMMENDATION

Based on the conditions found at the Home during the visit in April and inspection in May, the Commission recommends that no new placements be made to the California Anchor Residents #2 until the following have been achieved:

- Determination that all requirements of CCL investigation reports have been met.
- Adopted all recommendations in this report:
 - Exterior [§80087(a)]
 - Clean the backyard of debris and trash.
 - Remove the weeds in the side yard.
 - Remove or repair the children's play structure.
 - If the camera is part of the security measures for the Home, repair and reposition the camera.
 - Repair the leaking pipe in the patio area and rebate the black substance on the wall and patio. Paint the areas where paint is flaking or non-existent.
 - Facility (§80087(a))
 - Repair or replace the heating and air conditioning system to regulate the temperature in the home. [§80088(a)]
 - Replace or repair inoperable smoke alarms.
 - Deep clean the Home to remove dirt and grime throughout.
 - Remove the piles of clothing on the floor, beds or in baskets. Use techniques to modify behavior concerning the proper storage of personal belongings.
 - Establish and enforce rules about doing laundry daily.
 - Place screens on all windows. [§80087(a)(1), §80088(b)]
 - Remove clutter in garage.
 - Repair or replace the water heater to address the leak. Secure the water heater.
 - Kitchen
 - Comply with USDA Basic Food Group Plan - portion size, healthy foods (including fruits and vegetables) in the preparation of meals. [§80076(a)(1)]
 - Post a menu for the current week. [§80076(a)(5)]
 - Maintain the mandated amount of perishable and non-perishable food in the Home. [§84076(c)(1)]
 - Establish, train and enforce regulations concerning the handling of food by staff and residents. [§80076(a)(12-22)]

- Keep the kitchen clean and enforce the requirement. [§80076(a)(17)]
- Keep the microwave and oven clean. [§80076(a)(17)]
- Obtain and maintain a sufficient number of dishes, flatware and utensils for preparing and serving food. [§80076(a)(22)]
- Administrative Functions
 - Licensee must hold staff accountable for the enforcement of all policies and procedures in the Home. (§80063)
 - Post the CCL License. [§84009(a)]
 - Maintain a copy of the Plan of Operation at the home for review. [§80022(a), §84022]
 - Review and update Plan of Operation to ensure Plan is in compliance with practices in the home. In particular, review the statement on the types of children to be served by the facility and intake admission agreement. [§84022(b)(1)]
 - Maintain a resident's file with all mandated records. [§80068.2(c), §80070, §84070,]
 - Initiate an individualized service/needs plan for each resident at the time of admission until a new or modified plan replaces the initial plan. Train or retrain staff on the intake process. [§80068(a), §84068.2(b)]
 - Enforce study schedule as outlined in the Plan of Operation.
 - Review, modify and enforce consequences for violation of policies and procedures, for example, refusal to attend school. Consider assigning extra chores during the day. [§84072.1(a) & (c)]
 - Contact the County Office of Education to determine options for those residents who refuse to attend school. [§84078(d), §84079(a)(4)]
 - Schedule a variety of enrichment activities that expand learning – field trips, arts, music and exercise. [§84079(a) & (c)]
 - Maintain records of staff training, and schedule trainings that conform to regulations. [§84065 generally and §84065(j)(6)]
 - Enforce no smoking policy. [§84087(c)]

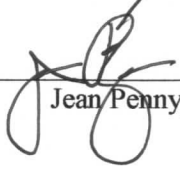
Approved by the Santa Clara County Juvenile Justice Commission on July 5, 2016.



 Raul A. Colunga, Chairperson

7/5/16

 Date



 Jean Pennypacker, Inspection Chair

7/5/16

 Date

Att: [Documents Reviewed, Photos]

DOCUMENTS REVIEWED

Title 22 California Code of Regulations Division 6, Chapters 1 and 5

CCL File on California Anchor Residents #2 up to May 19, 2016

Intake Packet

- Intake Agreement
- California Health and Human Services Pre-Placement Appraisal-Health History Evaluation-Mental and Physical Services Needed
- Appraisal Needs and Services Plan
- Physician's Report for Community Care Facilities
- Identification and Emergency Contact Information
- Admissions Agreement
- Privileges
- House Rules, to include Runaway Admonishment, Policy re Drugs, Alcohol, Fighting Dress Code, Money, Legal Rights
- Discharge-Removal Policy
- List of Personal Rights
- Record of Cash, Resources, Allowance, signed by resident and staff
- List of resident's property and valuables
- Consent to Medical Exam
- Consent for Emergency Medical Treatment
- Release of Client Medical Information
- Discipline Policies and Procedures
- Do Not Contact List
- Client Weight Chart

Handouts and Postings

- House Menu, 4-29-16 through 5-5-16
- Meal schedule
- Chore list
- Laundry days
- Personal rights
- Point system
- Consequences
- Weekly activities
- Emergency Disaster Plan with contact numbers
- Staff first aid certification list
- Certificate of completion of group home administrator program – Lisa Rivera
- Schedule of Hub events

**CALIFORNIA ANCHOR RESIDENTS #2
PHOTOGRAPHS
MAY 5, 2016**

Exterior:



Figure 1: Backyard



Figure 2: Foundation—Leak and Black Substance



Figure 3: Trim and Camera



**CALIFORNIA ANCHOR RESIDENTS #2
PHOTOGRAPHS
MAY 5, 2016**

Interior:



Figure 4: Bedroom



Figure 5: Door Track

Garage:



Figure 6: Garage Storage



**CALIFORNIA ANCHOR RESIDENTS #2
PHOTOGRAPHS
MAY 5, 2016**

Garage (cont):



Figure 7: Paint Cans & Wet Area Under Hot Water Heater

Kitchen:



Figure 8: Freezer and Refrigerator



Figure 9: Fruit and Vegetable Bin

**CALIFORNIA ANCHOR RESIDENTS #2
PHOTOGRAPHS
MAY 5, 2016**

Kitchen (cont):



Figure 10: Pantry



Figure 11: Fruit on Table & Food on Counter Top

Figure 12: Chair With Apparent Dried Vomit

