



# KERN BRIDGES YOUTH HOME

## Performance and Quality Improvement Quarterly Report

October 1, 2017 through December 31, 2017

Final – February 22, 2018

## **5 Year Plan Goals Progress 2014/2019**

a. *BoD members and senior staff to recruit members in the following professions: Medical employee of CHW, Law Enforcement, College Professor of Cal State Bakersfield, Insurance industry executive, and Oil Industry Executive, Bakersfield City Government employee and Kern High School District employee. No new members joined the BoD this quarter. The above positions still to be filled are Medical Employee of CHW and College Professor of Cal State Bakersfield, and an Oil Field Executive.*

b. *BoD members to more actively fund raise and market the agency. Progress continues.*

c. *Fully implement COA standards and gain COA Accreditation. Accredited 9/30/2014. Reaccreditation has begun and will be completed by July 2018.*

d. *Build monetary fund reserves to \$300,000.00. Current value of CDs is \$126,832.39. There is an additional \$34,033.67 in the Casa de Niño's building fund.*

### **Short Term Plans Progress in Implementing 5 Year Plan Goals**

1) *BoD members and senior staff to recruit members in the following professions: Medical employee of CHW, Law Enforcement, College Professor of Cal State Bakersfield, Insurance industry executive, and Oil Industry Executive, Bakersfield City Government employee and Kern High School District employee. No new members joined the BoD this quarter. The above positions still to be filled are Medical Employee of CHW and College Professor of Cal State Bakersfield, and an oil industry executive.*

a) *BoD will engage community members of the differing careers listed above as opportunity allows. At each BoD meeting utilization of this task will be discussed. During annual open house members from the above professions will be encouraged to consider joining our Board. After the open house each senior staff and BoD member will be asked if they made any progress towards encouraging a member of the above professions to consider joining our BoD. Open house completed. BoD recruitment continues. Next open house will be held once we are in full compliance with AB 403.*

b) *A BoD recruiting post will be put on our web site and Facebook pages. Done.*

2) *BoD members to more actively fund raise and market the agency. Progress made.*

a) *BoD members will solicit Wishmas Tree donations during the Christmas Holiday season. This was accomplished in 2015, 2016 and 2017. Christmas donations via the Wishmas tress totaled \$23,000.00 in 2017.*

c) BoD members will be asked for commitments at the October BoD meeting. This was accomplished. BoD attendance 80% in October, 80% in November, 70% in December. The By-Laws state four members constitute a quorum.

d) BoD members will spearhead at least one fundraiser in addition to those listed above. This has not been accomplished.

3) Fully implement COA standards and gain COA Accreditation. This was complete on September 30, 2014 and the next one will be due on September 30, 2018. The annual data submissions are sent to COA every year. With the new law AB 403 COA will require KBYH to be accredited as a Residential Treatment Center and as a Mental Health Provider. This process has begun and is progressing well.

a) All personnel will be involved in training for accreditation standards and will have an opportunity over the five-year plan to participate on differing committees. Will be documented in file. All personnel old and new have been trained and this is ongoing.

b) Management team will discuss accreditation progress at weekly management meetings. This is discussed at weekly management meeting and is ongoing

4) Build monetary fund reserves to \$300,000.00. Current reserve is \$160,871.67 which is an increase of \$5.59

a) Each quarter, as cash flow allows, a CD may be bought and set aside as part of fund reserves. This amount will be discussed as part of regular BoD meetings and progressed assessed. This is progressing well. There is current discussion of paying down the mortgage on the Casa property as the rate of return on CDs remains far below that loan rate being paid.

### **2016/2017 Budget Year Goals**

In addition to the above 5-year strategic plan long term goals with short-term plans the following goals are adopted for the budget year 2015/2016. Under new audit guidelines presented by CDSS all new capital expenditures over \$5,000.00 will now need CDSS preapproval effective July 9, 2015.

Paint Administrative Office Restrooms & Kitchen	Completed
Repair Sidewalks that have become a safety hazard	Completed
Repair south side of building landscape tree & Lawn safety issues	Completed
New data base – “Extended Reach”	Completed

## 2017/2018 Budget Year Goals

KBYH has one budget year goal and that is to make no new expenditures unless necessitated by a Title 22 issue or safety & health issue because of the following reasons:

- a) The reimbursement rate by the State of California is scheduled to increase by about 25% (\$3,000 per resident per month) once we are certified as an STRTP and the State is determined to move youth very quickly out of STRTP care so our typical occupancy rate of 97% or higher may change and we do not know where we are in the queue as it pertains to our STRTP certification
- b) The Adoption payment methodology for finalized adoptions, through PAARP, has remained unchanged. The current contract with the Kern County Department of Human Services pays \$2,000 per completed assessment (\$3,000 for Spanish speaking families) and is reimbursed to KCDHS when or if the family finalizes an adoption.
- c) The new Foster Parent, now known as Resource Parent, pay rate has once again been delayed. Current rates are frozen at the basic rate, with the new Level of Care rates set to begin March 1, 2018.

### **Group Homes DATA:**

#### **Planned/Unplanned Discharges**

	CASA		Almklov	
	Planned	Unplanned	Planned	Unplanned
Jan-Mar 2017	6	3	1	0
Apr-Jun 2017	4	3	1	0
July-Sept 2017	4	1	0	1
Oct-Dec 2017	3	1	1	0

The unplanned discharge at CASA during this period was for a youth who went AWOL and never returned. Almklov had no unplanned discharges during the last quarter.

## **AWOLS**

	CASA	Almklov
Jan-Mar 2017	15	21
Apr-Jun 2017	50	16
July-Sept 2017	23	5
Oct-Dec 2017	51	2

AWOLs fluctuate at both homes based on the barrier behaviors of the current residents. With that in mind, and in cooperation with Law Enforcement, youth who leave the group home without permission, and yet we know where they are, they are not considered AWOL. They are considered UA (unauthorized absence) and no police report is filed unless they are gone past midnight. When youth who leave and we do not know where they are after three hours a police report is made.

## **Medication Errors (Staff errors)**

	CASA	Almklov
Jan-Mar 2017	0	0
Apr-Jun 2017	2	0
July-Sept 2017	0	1
Oct-Dec 2017	0	0

There were no staff medication errors this quarter.

## Medication Incidents (these are not staff errors)

	CASA	Almklov
Apr-Jun 2016	42	1
July-Sept 2016	4	0
Oct-Dec 2016	21	0
Jan-Mar 2017	73	6
Apr-Jun 2017	10	11
July-Sept 2017	3	7
Oct-Dec 2017	5	5

These numbers fluctuate based on the number of residents with awoling behavior and who do not desire to be on psychotropic medication and refuse to take the prescribed medications. **An incident is when it is through no direct fault of KBYH staff.** These incidents are primarily for two reasons. The court medication order or scripts were not provided by county and/or mental health staff or (as for most of the incidents) the clients are AWOL or refuse medication.

## School Days Missed/Total Days Scheduled

School Days Missed V Scheduled	CASA	Almklov
January 2017	15/156=10%	27/96=28%
February 2017	62/228=27%	26/102=25%
March 2017	89/276=32%	11/132=8%
April 2017	59/156=38%	5/77=6%
May 2017	43/264=16%	16/113=14%

June 2017	2/24=8%	8/27=30%
July 2017	5/15=33%	0/14=0%
August 2017	19/228=8%	3/71=4%
September 2017	41/228=18%	8/110=7%
October 2017	49/254=19%	4/127=3%
November 2017	43/192=22%	3/96=3%
December 2017	40/192=21%	8/96=8%

The clients at CASA/Almklov generally come to us with major school issues. As one can see missed school days continues to be a major problem with youth in group homes. With the seriousness of this issue KBYH has instituted a comprehensive policy that includes sending a letter to the placing worker indicating that the resident may need to be moved to another facility if they believe there is a facility that can motivate the youth to attend school. This comprehensive policy has been shared with all pertinent stakeholders and the clients. Although letters have been sent, County Social Workers are as frustrated with the residents who constantly refuse school as anyone else is. Although the data shows a downward trend for KBYH residents, albeit modest, truancy remains a major issue in group homes throughout the United States. In addition, the “subjects” being measured change so the data is not a “pure” grasp of our program influence. In reviewing the data and, once again, reviewing the literature, . . . *In its review of promising truancy reduction programs, the Colorado Foundation for Families and Children noted several critical elements that were necessary for effective programming: (1) parent/guardian involvement, (2) a continuum of services, to include meaningful incentives, consequences and support, (3) collaboration with community resources—including law enforcement, mental health services, mentoring and social services, (4) school administrative support and commitment to keeping youth in the educational mainstream, and (5) ongoing evaluation. . .*

The one area we have most control over is meaningful incentive. In a non-scientific survey boys desire for money ranks in the top ten after girls, sports, video games and a few others. But three boys said it well;

Money  
This Should Be The 1St.  
Because No Money No Girl  
No Money No Games  
No Money No Cheese  
No Money No Sex - Got it? - [StylesX](#)

Money is definitely the one to vote for. These guys at school are totally in the money. I am a girl and a tomboy. I think I should know.

This should be one of the first, no money, no nothing'

KBYH has redesigned our allowance policy whereby the residents will receive \$5 per day for school attendance. This coupled with other allowance incentives provides for a total of \$70.00 or more per week. This will take place once we are certified as STRTP.

## **Individual Counseling via Community Resources**

Another issue that residents in group homes often have is the refusal to attend therapy that is provided by professionals outside of the group home. KBYH make effort to motivate residents to attend therapy with rewards for attending. No consequences are given for refusing to attend as they have a right to refuse treatment under the Foster Youth Bill of Rights.

<b>Appointments Missed</b>	<b>CASA</b>	<b>KBYH Staff Fault</b>	<b>Child Guidance Cancelled</b>	<b>Resident Refused or AWOL</b>
Jan 2017	1	0	0	1
Feb 2017	4	1	0	3
Mar 2017	6	0	0	6
April 2017	1	0	0	1
May 2017	2	0	2	0
June 2017	2	0	0	2
July 2017	1	0	0	1
Aug 2017	1	0	0	1
Sept 2017	2	0	0	2
Oct 2017	1	1	0	0
Sept 2017	1	0	0	1
Dec 2017	2	0	0	2
<b>2017 Total</b>	<b>24</b>	<b>2</b>	<b>2</b>	<b>20</b>



<b>Appointments Missed</b>	<b>CASA</b>	<b>KBYH Staff Fault</b>	<b>Child Guidance Cancelled</b>	<b>Resident Refused or AWOL</b>
Jan 2017	3	0	1	2
Feb 2017	2	0	1	1
Mar 2017	3	0	1	2
April 2017	0	0	0	0
May 2017	0	0	0	0
June 2017	3	0	0	3
July 2017	1	0	0	1
Aug 2017	4	0	2	2
Sept 2017	5	1	2	2
Oct 2017	3	0	0	3
Nov 2017	2	0	0	2
Dec 2017	0	0	0	0
<b>2017 Total</b>	<b>26</b>	<b>1</b>	<b>7</b>	<b>18</b>

Under the new law CCL conducts a comprehensive review of the programs in the State that have the top 50% of law enforcement contacts initiated by the group home.

## CASA LAW ENFORCEMENT CONTACTS

Month	Total Number of Law Enforcement Contacts	Initiated by KBYH as Required by Title 22	Initiated by KBYH at Staff Discretion	Initiated by Resident	Initiated by Stake Holder
Jan	5	2 (AWOLs)	1	1	1
Feb	2	2(AWOLs)	0	0	0
March	6	6(AWOLs)	0	0	0
April	8	6(AWOLs)	0	1	1
May	4	0	1	1	2
June	8	5(AWOLs)	0	2	1
July	4	0	1	3	0
Aug	7	3(AWOLs)	0	3	1
Sept	2	1(AWOLs)	0	1	0
Oct	3	0	3	0	0
Nov	1	0	0	0	1
Dec	8	6(AWOLs)	0	0	2
2017 Totals	58	31	6	12	9

### January 2017:

- Two calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- One call initiated by staff due to resident having suicide thoughts needed a 51/50 evaluation. Resident transported to Mary K Shell Mental Health Center by police.
- One call initiated by a resident for suicide thoughts needed a 51/50 evaluation. Resident transported to Mary K Shell Mental Health Center by police.
- One call initiated by the school due to resident having a knife.

### February 2017:

- Two calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).

### March 2017:

- Six calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).

#### April 2017:

- Six calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- One call initiated by a resident for suicide thoughts needed a 51/50 evaluation. Resident transported to Mary K Shell Mental Health Center by police.
- One call initiated by farmers at Grimmway for alleged tractor theft.

#### May 2017:

- Two residents were stop and cited by police for Jaywalking.
- One call initiated by staff due to residents under the influence of drugs.
- One call initiated by a resident for suicide thoughts needed a 51/50 evaluation. Resident transported to Mary K Shell Mental Health Center by police.

#### June 2017:

- Five calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- One call initiated by one of the resident's mother after her son Awoled during home pass.
- Two calls initiated by a resident for suicide thoughts needed a 51/50 evaluation. Resident transported to Mary K Shell Mental Health Center by police.

#### July 2017:

- Two calls initiated by a resident for suicide thoughts needed a 51/50 evaluation. Resident transported to Mary K Shell Mental Health Center by police.
- One call initiated by a resident who alleged he peer had a gun. Police search the facility but no gun was found.
- One call initiated by staff over an expensive phone theft. Resident living at the facility stole peer's iPhone.

#### August 2017:

- During AWOL resident was spotted with beer by police cited and released.
- Three calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- Three calls initiated by a resident for suicide thoughts needed a 51/50 evaluation. Resident transported to Mary K Shell Mental Health Center by police.

**September 2017:**

- One call initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- One call initiated by a resident for suicide thoughts needed a 51/50 evaluation. Resident transported to Mary K Shell Mental Health Center by police.

**October 2017:**

- Report initiated by Farmers after 3 of our boys stole their tractor and caused property damage.

**November 2017:**

- One call initiated by McFarland School after resident left school grounds without permission.

**December 2017:**

- Six calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- Two calls initiated by McFarland School after residents left school grounds without permission.

## ALMKLOV LAW ENFORCEMENT CONTACTS

Month	Total Number of Law Enforcement Contacts	Initiated by KBYH as Required by Title 22	Initiated by KBYH at Staff Discretion	Initiated by Resident	Initiated by Stake Holder
January	0	0	0	0	0
February	6	4(AWOLs)	0	1	1
March	0	0	0	0	0
April	3	2(AWOLs)	0	1	0
May	3	2(AWOLs)	0	1	0
June	3	2(AWOLs)	0	1	0
July	3	1(AWOLs)	0	0	1
August	1	0	0	0	1
Sept	2	1(AWOLs)	0	0	1
Oct	3	0	0	2	1
Nov	1	0	1	0	0
Dec	2	0	0	1	1
2017 Totals	27	12	1	7	6

**January 2017:**

- Almklov had no LEA contact in the month of January 2017.

### February 2017:

- Four calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- One call initiated by resident after being assaulted by peer.
- One call initiated by the parents of a resident after he stole their vehicle while on a home pass.

### March 2017:

- Almklov had no LEA contact in the month of March 2017.

### April 2017:

- Two calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- One call initiated by a resident for suicide thoughts needed a 51/50 evaluation.  
Resident transported to Mary K Shell Mental Health Center by police.

### May 2017:

- Two calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- One call initiated by a resident for suicide thoughts needed a 51/50 evaluation.  
Resident transported to Mary K Shell Mental Health Center by police.

### June 2017:

- Two calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- One call initiated by resident due to physical assault by peer.

### July 2017:

- Resident refused to leave his Child Guidance after his appt. The counselor called LEA to assist with incident. KBYH PD showed up and LEA left without further incident to report.
- Two calls initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).

### August 2017:

- Resident was hit by a car while riding his bike in the neighborhood; no injury to report.

### Sept 2017:

- One call initiated by staff due to mandated Title 22 requirement for AWOLs (3-hour rule).
- One call initiated by parent after resident stole her car during a home pass.

### October 2017:

- Resident called and made false allegations that staff assaulted him. Police came out to talk with resident and stated no reported is needed.
- Child Guidance made the police report because resident locked himself in the maintenance room closet and refused to come out.
- Youth was attempting to assault peer and called police alleging staff hit him due to her intervening and not allowing him to fight peer.

### November 2017:

- One call initiated by staff due to resident doing self-harm by punching himself in the face, urinating on himself and then licking it. Then he was spitting blood on staff and peers.

### December 2017:

- Resident was transported to school, got out vehicle, but walked off campus. LEA and school notified. BPD found him and transported him back to school.
- Resident was caught stealing at CVS by staff, ran out of store, and across traffic. Staff drove around looking for him but it was unsuccessful. Resident flagged down BPD and was brought back to the GH before staff made it back.

## Congregate LAW ENFORCEMENT CONTACTS

Month	Total Number of Law Enforcement Contacts	Initiated by KBYH as Required by Title 22	Initiated by KBYH at Staff Discretion	Initiated by Resident	Initiated by Stake Holder
Jan/Feb/Mar	19	14	1	3	1
Apr/May/June	29	9	9	7	4
July/Aug/Sept	19	5	1	8	5
Oct/ Nov/ Dec	18	6	4	3	5
2017 Total	85	34	15	21	15

## Injuries

### Group Home Residents Requiring Professional Medical Care

	CASA	Almklov
Jan-Mar 2017	5	0
Apr-June 2017	6	1
July-Sept 2017	5	1
Oct-Dec 2017	2	1
2017 Total	18	3

**Casa** had two injuries requiring professional medical care during Oct-Dec 2017 quarter.

- Resident collided with his teammate during football game, appeared to be non-responsive after several attempts. Seemed to have had a concussion, EMT transported him to Antelope Valley Hospital for evaluation.
- Resident was transported to DRH after falling down on his right hand and injuring his thumb during an outing. Resident received a soft cast and treated for a sprain.

**Almklov** had one incidents requiring professional medical care during Oct-Dec 2017 2017 quarter.

- Resident was seen at Mercy southwest ER. Complained of an abrasion he obtained from a containment on 10-19-17. Also, resident was seen for on-going pain in his rib area, something he had complained about before. Doctor prescribed antibiotics and pain medication.

## **Group Home Residents Requiring First Aid**

All minor injuries requiring ice or bandages.

	CASA	Almklov
Jan-Mar 2017	9	6
Apr-Jun 2017	4	3
July-Sept 2017	2	0
Oct-Dec 2017	2	3
2017 Total	17	12

## **Group Home Residents Property Destruction**

	CASA	Almklov
Jan-Mar 2017	\$3,091	\$635
Apr-June 2017	\$2,787	\$721
July-Sept 2017	\$9,413	\$350
Oct-Dec 2017	\$1,328	\$525
2017 Year Total	\$13,283	\$5,253

Property Destruction generally includes holes in walls, broken TVs, and vehicle damage. This quarter property damage was very low at both group homes. Usually around Christmas time the resident stop causing property damage because they want all their gifts. Property damage is taking into consideration when determining the amount of money, a resident will receive for his Christmas allowance.



## **Clients Taking Psychotropic Medication**

With the passage of AB 403 the State department of Social Services is now monitoring how many residents are on psychotropic medication. A mandatory review of all programs that are in the top 50% of agencies with percentage of clients on psychotropic medications is now done annually by CCL.

Fiscal Year 2016/2017	Casa Total Clients Served	Casa Total Clients and % of total clients on Psychotropic Medications	Almklov Total Clients Served	Almklov Total Clients and % of total clients on Psychotropic Medications	Congregate % of clients on Psychotropic Medications
January 2017	14	6=43%	6	6=100%	60%
February 2017	13	5=38%	7	7=100%	60%
March 2017	16	8=50%	6	5=83%	59%
April 2017	16	8=50%	6	5=83%	59%
May 2017	15	10=67%	7	6=86%	73%
June 2017	12	9=75%	6	5=83%	78%
July 2017	12	9=75%	6	5=83%	78%
August 2017	11	8=73%	6	5=83%	65%
September 2017	14	9= 64%	7	6=86%	71%
October 2017	13	9=69%	6	5=83%	74%
November 2017	14	10=71%	7	6=86%	76%
December 2017	13	10=77%	6	6=86%	84%
2017 Year Total	163	Average 63%	76	Average 87%	Average 75%

The data indicates that the percentage of residents on psychotropic medications has increased over the last six months. We attribute this to AB 403 in the sense that there is a stronger push to have youth in foster care or kin care instead of group care. Subsequently, only the youth with the most sever barrier behaviors are in group care and they are the youth most likely to be under psychiatric care.

**Bed Days = Total Available/Total Filled**

Fiscal Year 16/17	CASA	Almklov
January 2017	352/372=95%	186/186=100%
February 2017	307/336=91%	168/168=100%
March 2017	344/372=92%	186/186=100%
April 2017	355/360=99%	180/180=100%
May 2017	346/372=93%	186/186=100%
June 2017	357/360=99%	180/180=100%
July 2017	324/372=87%	186/186=100%
Aug 2017	331/372=89%	186/186=100%
Sept 2017	311/360=86%	170/180=94%
Oct 2017	372/372= 100%	186/186=100%
Nov 2017	356/360=99%	180/180=100%
Dec 2017	372/372=100%	183/186=98%
2017 Year Total	4127/4380=94%	2177/2190=99%

Occupancy Rate was 95% for Casa and 99% for Almklov for Oct--Dec 2017 quarter.

## Physical Restraints

	CASA	Almklov
Jan-Mar 2017	13	4
Apr-Jun 2017	18	2
July- Sept 2017	27	5
Oct-Dec 2017	8	5
2017 Year Total	66	16

The reason for the high rates at Casa are twofold. We are working with a high-profile resident who is extremely behaviorally disturbed. The County for this resident is paying us an additional \$18.00 an hour during the 16 hours a day he is awake for one on one supervision. One can see though, that he is improving. In addition to that we have some new residents who are aged 12 and 13 and the younger residents tend to get seriously physical with staff and other residents vs AWOLing. The high-profile resident at Almklov is making very good progress and we expect an extinction of the serious aggressive behavior during the next quarter.

## Group Home Residents Complaints

A satisfaction survey was given to all residents in December and 12 residents chose to complete the survey. The maximum score was 5 and the minimum score was 1. The overall average was 4.2 with “3” meaning neutral and “4” meaning agree. Line Staff will be shown the survey and the results will be discussed as well as ways to improve the program to help residents be more satisfied with the services they receive. This quarter showed a slight improvement than last quarter.

Complaints made by Almklov residents this quarter ranged from name calling such as “nick names” that the boys didn’t agree to. Also, resident wanted to horseplay with staff but it’s against our policy to horseplay, so residents were unhappy about the policy. These complaints were addressed with both the resident and staff in our weekly meetings. After those meetings, these two complaints are non-existent.

Complaints made by Casa de Ninos residents in this quarter were minor complaints and all resolved to resident’s satisfaction. Majority of the residents wanted stolen items replaced such as cell phone, clothing items, games, game systems etc. Most of the alleged stolen items were replaced to residents’ satisfaction except for those residents using drugs. Likewise, another resident wanted an animal but animals are not allowed in

our program. However, the GH social worker was approved to bring his dog for therapy sessions which are going well and have eliminated any animals' complaints thus far.

However, there were several complaints made in the quarter that were investigated by CCL. Almklov had 3 complaints and Casa had 5 complaints.

Almklov Complaint #1: Cited for broken window that occurred less than 12 hours prior to unannounced visit. **POC Complete**

Almklov Complaint #2: Closed out personal rights and lack of supervision allegation regarding the camping trip. **(substantiated)- POC Complete**

Almklov Complaint #3: Personal Rights: Staff used Derogatory statements towards a Client. **(unsubstantiated)**

Casa Complaint #4: Personal Rights: Unknown- Needs further investigation

Casa Complaint #5: Personal Rights: group home failed to maintain proper medical record- **Cited by CCL but KBYH won appeal.**

Casa Complaint #6: Closed out personal rights and lack of supervision allegation regarding the camping trip. **(substantiated)- POC Complete**

Casa Complaint #7: Staff failed to obtain medical treatment, staff yelled at child, staff performed inappropriate restraint, staff failed to ensure child attended school. **(unsubstantiated)**

Casa Complaint #8: Personal Rights/Lack of Supervision. **(unsubstantiated)**

## Group Home Adventure Program

Residents with substance abuse issues fluctuate in their commitment to sobriety.

Month	Total number of different residents with substance abuse problems participating in the outings	Number & % of different residents with substance abuse problems who attended all outings	Number & % of different residents with substance abuse problems who refused at least one outing
January	8	0 = 0%	8 = 100%
February	9	0 = 0%	8 = 100%
March	9	2 = 22%	7 = 78%
April	7	1 = 14%	6 = 86%
May	7	5 = 71%	2 = 29%
June	7	4 = 57%	3 = 43%
July	8	1 = 13%	7 = 87%
August	4	2 = 50%	2 = 50%
Sept	6	2 = 33%	4 = 67%
Oct	6	1 = 17%	5 = 83%
Nov	8	0 = 0%	8 = 100%
Dec	6	0 = 0%	5 = 100%

\*In the month of October 2017, all of our substance abuse residents were playing football; therefore, majority of the Adventure trips were canceled on the weekend. Also, some had visits every other weekend therefore are not involved. At one point, neither group home had any substance abuse users for nearly two weeks. Some of them graduated the program or was discharged.

All residents who have a substance abuse problem are required to attend the weekend adventure outings. That number varies from week to week based on intake and discharge and if a resident is no longer dealing with a substance abuse issue. The goal is to get 100% of the residents dealing with substance issues to participate in 100% of the outings.

## Trauma Informed Care Self-Assessment

Our annual trauma informed care self-assessment show us rating from 2 to 4 in all areas.

- 2 = Plan has been implemented
- 3 = Plan has been implemented and data have been gathered regarding implementation
- 4 = Plan has been implemented and revised based on feedback/data regarding implementation.

### Administrative Functions

Financial Stability measured by all departments.

As of December 31, which is the end of the first fiscal quarter for the fiscal year 2017/2018 ADMIN showed a net loss of **\$133,446.54** which is to be expected.

Almklov showed a **net income** of **\$8,530.87** with net income being **4,873.30** better than budget and net expenses were **\$828.51** over budget.

Casa de Ninos showed a **net loss** of **\$15,025.40** with expenses **\$32,461.83 over budget**. The reason for this was the hiring of additional staff as required by CCR which pushed our payroll budget with taxes and benefits \$30,000.00 higher than budgeted. We will not see an increase in rates until we are certified as an STRTP.

The FFA program showed a net income of **\$115,105.51** and expenses were **\$5,752.73** over budget.

The Adoption program is a break-even budget as required by Federal and State law.

The Agency overall has an overall YTD net income of **\$90,453.95**.

Measure staff turnover.

This quarter saw 2 staff separated and 5 staff hired as AB 403 creates newly required positions.

Workers Compensation Claims

There were no new workers' compensation claim this quarter. There was a first aid incident. NOTE: First Aid incidents are now required to be reported to the State.

Unemployment Claims

There were no new unemployment claims this quarter.

## Other liability insurance claims

There were no new liability insurance claims.

## CCL Reviews

Casa de Ninos received a citation for non-compliance of a POC and a fine on 10/10/17. This was overturned on appeal and no fine is to be paid as the original citation was an error as no Title 22 violation took place. I note this here because on the CCL Transparency Web Site it still shows the fine and citation. Additional fines were added on October 24 but were eventually dropped as there never was a violation of Title 22 yet this still shows on the transparency web site. On 12/15/17 an allegation was investigated and ruled unsubstantiated. On 12/16/17 an investigation was ruled unsubstantiated. On 12/21/17 an investigation was ruled unsubstantiated.

Almklov House received one type B citation this period. A resident had broken a window the prior evening and it had not yet been replaced and was not covered, albeit maintenance was in the process of repairing the window when CCL arrived at the home.

There was one CCL investigation for the FFA program and CCL concluded the allegations were unsubstantiated.

## A133 Financial Audit

The Audit for fiscal year 2016-2017 is completed with no deficiencies found.

## **Annual Risk Management**

The annual risk management review was conducted and KBYH continues to be within accepted parameters.

## **Annual Review of Policy Manual**

Policies were updated during the year to keep in compliance with State and federal changes. All policies are in compliance with the law. With that said AB 403 continues to be implemented. KBYH's FFA Policies have been approved by the State and are in compliance with AB 403. KBYH has submitted its new policies to become STRTP to the County for review and has made requested changes and is now awaiting the approval letter. Kern County refuses to issue an approval letter for unspecified reasons. Therefore KBYH has submitted it's STRTP Program to Riverside County, San Bernardino County, Madera County, and Tulare County for approval and is awaiting their responses. KBYH has submitted an application to become Medi-Cal Certified and has received preliminary approval pending site visits.

**Annual “Interested Party” Review**

Two BoD members have “interested party” status having received compensation for work performed for the agency. Mike Conard performs IT work for us and Bill Slocumb provided legal work for us.

**Annual Insurance Coverage Review and Authorization**

A review of our insurance coverage was completed again this year. Some upgrades to coverage amounts were made.

**Financials**

**March 31, 2017**

Total Current Assets:	\$852,808.05
Total Current Liabilities	\$318,123.83
Total Current Checking/Savings	\$393,560.38

**June 30, 2017**

Total Current Assets:	\$829,750.85
Total Current Liabilities	\$290,193.26
Total Current Checking/Savings	\$336,233.94

**September 2017**

Total Current Assets:	\$856,570.83
Total Current Liabilities	\$347,112.94

**December 2017**

Total Current Assets:	\$893,100.15
Total Current Liabilities	\$346,962.86
Total Current Checking/Savings	\$291,589.45

**Safety Report**

This report covers the 4th Quarter of Calendar Year (CY) 2017 which includes months October through December 2017.

The period 1 October 2017 through 31 December, 2017 culminated a successful safety record for CY-2017. During this reporting period the Foster Family Agency, Adoptions and FFA Administration enjoyed an injury free and safe quarter.

There were no safety concerns reported during the quarter. There were no reports of facility safety issues noted or reported.

Maintenance continued to inspect the KBYH Administration and FFA Buildings ensuring



a safe environment and proper operation of smoke and carbon monoxide detectors. Maintenance also continued to correct maintenance deficiencies at both group homes. Disaster Preparedness continues to be practiced.

With the Foster Family Agency, as in previous quarter, there were no major injuries and few minor injuries reported. The FFA continued to experience minor injuries with the younger clients. These younger children sustained very minor bruises, bumps and scratches during normal play and activities. These injuries were reported via Unusual Incident Reports primarily to explain such injuries to biological parents or families during visits. The outside community has posed safety risks for our clients, clients and caretakers. With continued training, education, safety practices and safety articles in the Newsletters proved useful to help minimize injuries. Additionally, caretakers and staff have exercised greater safety awareness, contributing to the low incidences of safety injuries in this agency. Thanks to all of you for making 2017 a safe year.

Safety continues to submit safety articles in the KBYH Newsletter.

The last Quarterly Health and Safety Committee meeting was held on 10/24/17 at 9:00 AM. The next meeting is scheduled for 1/16/17 at 9:00 AM.

**FFA**

Indicator	Intra-Agency Youth Transfers	School age youth NOT attending school	Injuries requiring professional medical care	Injuries requiring first aid	Property Damage by youth
August	0	0	1	9	0
September	0	0	1	4	0
October	0	0	0	10	0
November	2	0	0	11	0
December	0	0	0	10	0
Total	2	0	2	44	0

	Certified Homes at Beginning of month	Newly Approved Homes this month	Closed Homes this month	Total Certified homes at end of month
July	38	1	3	36
August	36	1	1	36
September	36	1	1	36
October	36	0	0	36
November	36	0	1	35
December	35	0	1	34

### **ADOPTIONS**

Length of time to complete home study – The length of time to complete a home study for this quarter was 4.8 months. There were 6 home studies that were completed in the quarter. A significant number of assessments were in process during this quarter and time frames were compromised as a result. However, staffing adjustments have been made in order to more adequately manage the work load.

Adoptive Family Satisfaction with the Adoption Process – all surveys were positive.

	Homes Under Study at Beginning of Month	New Studies Picked up During the Month	Studies Closed for not approved	Studies Approved
July	135	12	0	6
August	160	13	0	7
September	173	13	2	10
October	182	15	2	10
November	195	16	5	17
December	206	8	0	11
TOTAL	N/A	39	7	38

### **Client records/FFA, GH**

All forms filed within 30 days of due date. A comprehensive file review was done in 2017 and the files were in excellent shape. A new electronic file system was implemented as of May 2017. An annual Adoption Program Review by CCL was completed as this report is being written found no deficiencies.

### **Staff records**

All forms filed by due date in HR. *Survey Responses:* Staff satisfaction survey data returned an aggregate score of 4.74 out of 5 with five being completely satisfied.