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CGJ QUESTION 2.8

Is DHS monitoring the processing of Medicare claims by the new ORCHID system?

1/30/15 RESPONSE

Not Implemented – The ORCHID system was successfully implemented at Harbor-UCLA Medical Center on November 1, 2014, however, the interface between ORCHID and the Affinity system has resulted in new challenges impacting the usage of itemize billing from the system. As a result, we have postponed usage of itemize detail coming from the system to generate Medicare claims until a full assessment of the process is completed. The assessment will start in April and is expected to be completed by July 2015. In the interim, we have developed alternative plans to ensure the billing process is resumed.

RECOMMENDATION No. 2.9

Track the backlog for coding at all facilities through regular reports, similar to those produced by Los Angeles County's LAC+USC Medical Center. Aggregate and analyze coding backlog data at all facilities for resulting trends and to identify any problem areas.

7/18/14 RESPONSE

DHS agrees with this recommendation. DHS will standardize Health Information Management (HIM) reports to monitor coding backlogs as part of its implementation of ORCHID. ORCHID implementation at DHS' first facility is anticipated to be completed by November 1, 2014.

CGJ QUESTION 2.9

Has DHS standardized Health Information Reports to monitor coding backlogs?

1/30/15 RESPONSE

Implemented - DHS has developed an inventory status report to identify and prioritize accounts that need medical record coding. This report is provided to DHS facilities on a weekly basis. Additionally, current monitoring reports (e.g., staffing model, Dashboard report, Coder Output Productivity) used by LAC+USC Medical Center have been expanded to other facilities for identifying coding issues to prevent backlog.

RECOMMENDATION No. 2.10

Perform a staffing analysis in Health Information Management (HIM) divisions at all DHS facilities to assess whether additional staff might ameliorate the current HIM backlogs and delays in coding.

7/18/14 RESPONSE

DHS agrees with this recommendation. DHS will conduct a staffing analysis to determine if additional staffing will decrease HIM backlogs and delays in coding. If necessary, DHS will submit a budget request for additional staffing needed to fully implement this recommendation. Completion of the assessment is anticipated by December 31, 2014.

CGJ QUESTION 2.10

Has DHS conducted a staff analysis to determine if additional staff will decrease the HIM backlogs and delays in coding?

1/30/15 RESPONSE

Implemented - HIM completed a staffing analysis in October 2014. Based on anticipated production standards, current staffing level was sufficient to handle existing coding volume. However, staffing resource and work volume are not evenly distributed. HIM will work to reallocate staffing needs across all areas to prevent future backlogs.

RECOMMENDATION No. 2.11

Implement an electronic notification method for alerting physicians of the patients' required authorization from third party payers when follow-up services are required.

7/18/14 RESPONSE

DHS agrees with this recommendation. DHS will study the feasibility of utilizing an electronic notification to alert physicians, utilization review nurses, etc., when third party payer authorization is required for follow-up services as part of its implementation of ORCHID. Completion of the study is anticipated by December 31, 2014.

CGJ QUESTION 2.11

Has an electronic notification method been implemented to alert physicians of patients requiring authorization from third party payers for services?

1/30/15 RESPONSE

Partial Implementation - DHS has created an icon in First Net (the ORCHID ED module) to indicate that a patient has private insurance or is a managed care, assigned to a non-DHS provider. DHS is exploring the possibility of this icon auto-populating based on the insurance type, rather than being manually added by the registration staff.

CGJ Question 2.11 as of 02/19/2015

What is the method by which DHS will ensure that a patient is identified as requiring third party authorization for follow-up services prior to such services being provided – and – when will that method be fully implemented?

3/20/2015 Response

DHS will use the new ORCHID electronic health care system to identify admissions and visits that require third party authorizations. The First Net module/solution in ORCHID will enable the facilities to use an indicator (icon) on the patient's record that will alert providers and staff that an authorization is required. This indicator has been fully implemented at Harbor\UCLA Medical Center and MLK Jr. Outpatient Center and will be implemented at remaining facilities according to the ORCHID install schedule established for the Department. The schedule for the remaining hospitals is: May 1, 2015 for LAC+USC Medical Center, August 1, 2015 High Desert Regional Health Center, October 1, 2015 for Rancho Los Amigos National Rehabilitation Center and February 1, 2016 for Olive View/UCLA Medical Center. In addition, the Department is working on standardizing procedures to ensure facilities refer patients to their appropriate third party plans for follow-up care.

RECOMMENDATION No. 2.12

All physicians must be trained on the new electronic notification system and accountability measures should be implemented to ensure that physicians schedule follow-up services appropriately.

7/18/14 RESPONSE

DHS agrees with this recommendation. Based upon the outcome of feasibility study conducted on Recommendation 2.11, training will be provided to appropriate staff, e.g., physicians, utilization review nurses, etc., on the electronic notification system. If necessary, DHS will submit a budget request needed to fully implement this recommendation. Completion of the study is anticipated by December 31, 2014, and training will be subsequently scheduled as necessary.

CGJ QUESTION 2.12

Are there plans to train physicians on the electronic notification system?

1/30/15 RESPONSE

Partial Implementation - DHS has created an icon in First Net (the ORCHID ED module) to indicate that a patient has private insurance or is a managed care, assigned to a non-DHS provider. DHS is exploring the possibility of this icon auto-populating based on the insurance type, rather than being manually added by the registration staff. Once the assessment is completed, training will be provided to the appropriate staff.

CGJ Question 2.12 as of 02/19/2015

Please identify the classifications or groupings of staff who will receive training on the electronic notification system. What is the status of the training on the electronic notification system and what is the target date for full implementation of the training?

3/20/2015 Response

Classifications who have received training include physicians, nursing staff, Utilization Review nurses, clerical support staff and registration staff. These same classifications will receive training within 60 days of their scheduled ORCHID implementation date.

RECOMMENDATION No. 2.13

Require all DHS facilities to regularly pre-screen scheduled outpatient appointments to ensure that authorization is obtained or the patient is referred to a more appropriate provider.

7/18/14 RESPONSE

DHS partially agrees with this recommendation. DHS will evaluate facility staffing for pre-screening outpatient appointments (excludes Emergency Room, Urgent Care, and Walk-in Clinics). If necessary, DHS will submit a budget request for additional staffing needed to fully implement this recommendation. Completion of the evaluation is anticipated by December 31, 2014.

CGJ QUESTION 2.13

Has DHS evaluated how to pre-screen outpatient appointments to ensure authorization has been obtained?

1/30/15 RESPONSE

Partially implemented - DHS has implemented a streamlined model at one facility that has resulted in improvements in the prescreening and outpatient appointment process and is implementing a similar model at all facilities. This effort will ensure patients are appropriately prescreened for eligibility and authorization prior to their appointment and ensure patients are redirected to their appropriate provider. In addition, DHS is working with Human Resources to fill all available registration positions dedicated to the prescreening process and is working with technology staff on improving the eligibility verification system.

RECOMMENDATION No. 2.14

Evaluate effective and efficient staffing models to support the need for obtaining authorization from third party payers for inpatient services; such as a designated unit, a centralized staff, or an independent utilization review unit.

7/18/14 RESPONSE

DHS agrees with this recommendation. DHS will evaluate the feasibility of inpatient staffing to determine the organizational structure and staffing needs in order to effectively obtain authorization from third party payers for inpatient services. If necessary, DHS will submit a budget request for additional staffing needed to fully implement this recommendation. Completion of the evaluation is anticipated by December 31, 2014.

CGJ QUESTION 2.14

Has DHS selected a staffing model to expedite service authorization from third party payers?

1/30/15 RESPONSE

Implemented - DHS performed a comprehensive assessment of staffing needs within inpatient Utilization Review departments with the goal of ensuring sufficient staff are available to complete all inpatient UR related duties which would decrease backlogs and increase billing timeliness. DHS calculated the additional staff needed for each hospital to achieve full staffing levels. These items were included in DHS' 2014-15 supplemental budget request, approved by the Board of Supervisors on September 30, 2014. Approximately half of the newly added items have been filled to date, with interviews ongoing.

RECOMMENDATION No. 2.15

Determine the cost-effectiveness of implementing third party payers' online authorization tools to ensure timely authorization for inpatient services.

7/18/14 RESPONSE

DHS agrees with this recommendation. A study will be conducted to determine the feasibility of obtaining an electronic tool for online third party payer authorization for DHS' largest payers. If necessary, DHS will submit a budget request for additional staffing, and associated Services and Supplies (S&S) needed to fully implement this recommendation. Completion of the study is anticipated by December 31, 2014.

CGJ QUESTION 2.15

Has DHS selected an electronic tool to expedite service authorization from third party payers?

1/30/15 RESPONSE

Partially Implemented - DHS has approached the software vendor, Provider Advantage, to obtain an online tool for processing prior authorization and "278" referral transactions. An assessment is being completed to determine feasibility.

RECOMMENDATION No. 2.16

Collaborate with Cerner, the Department's vendor for its new electronic medical record system, ORCHID, to determine if enhancements in the new system could facilitate online processing of health care plan authorizations for DHS services.

7/18/14 RESPONSE

DHS agrees with this recommendation. DHS will collaborate with Cerner to determine the feasibility of using standard functionality or enhancing ORCHID to facilitate electronic online processing of health care plan authorizations for DHS services. If necessary, DHS will submit a budget request needed to fully implement this recommendation. Completion of the evaluation is anticipated by December 31, 2014.

CGJ QUESTION 2.16

Has DHS ensured that the new ORCHID system facilitates online processing of health care plan treatment authorizations?

1/30/15 RESPONSE

Partially Implemented - ORCHID is built to automate the faxing of key documentation required for authorized inpatient admissions. This includes the initial clinical review done by the utilization review nurse and additional care management information, including progress notes, labs, clinical updates, and additional medical record information. UR nurses at Harbor are now able to enter a fax number into ORCHID, which then generates and sends the selected paperwork. This has eliminated some of the manual work previously done by UR nurses and improved efficiency. ORCHID will be fully implemented DHS-wide by February 2016.

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GROUP HOME



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GROUP HOME

TOPIC

Based on a review of past Los Angeles County Civil Grand Jury final reports, the Los Angeles County 2014–2015 Civil Grand Jury (CGJ) noted that group homes in the County of Los Angeles had not been inspected by a Los Angeles County Civil Grand Jury for the prior eight years. Due to concern for the well-being of minors in group homes, the Group Home Committee (committee) was formed, consisting of six members of the CGJ. The committee’s focus was to determine if the basic needs of the minors—including but not limited to food, housing, clothing, education, and psychological services—were being met.

BACKGROUND

Group homes are licensed by the California State Department of Social Services, Community Care Licensing Division under Title 22 regulations.¹ The purpose of the statute is to provide support services and housing to abused and neglected youth and to juveniles on probation. The youth are placed by the Los Angeles County Probation Department (Probation) for their delinquent behaviors, and/or by the Department of Children and Family Services (DCFS) when they are removed from harmful environments resulting from neglect, abuse, or violence in the home. The general ages of group homes residents are 12–17 years old.

The committee reviewed the report of the 2006–2007 Civil Grand Jury and decided to re-evaluate the group home (GH) situation. The committee inspected the living conditions of the minors, and evaluated the minors’ safety and well-being. This was done by unannounced visits to GH facilities, where the committee conducted physical inspections and private interviews with minors and staff.

Special care was taken to include large and small GH facilities selected from each of the Los Angeles County supervisorial districts. DCFS and Probation are involved in managing the assigned children’s cases, including their initial placement, monitoring, and tracking their progress over time and developing their exit plans. The committee also reviewed monitoring of GHs by DCFS, Probation, and the Auditor-Controller.

At the time of the 2006–2007 Civil Grand Jury review, there were 238 licensed group homes in Los Angeles County. According to the Auditor-Controller Group Home Ombudsman, there are 128 licensed group homes as of 2014. This reduction in the number of group homes could be attributed to both the court and Probation and DCFS departments having changed their focus

¹ California Code of Regulations.

from placement in group homes to family reunification or relative (extended family) placement whenever possible.

According to STEP UP—an organization that promotes relative placement rather than children being placed in foster care or group homes—43 percent of Los Angeles County’s 21,000 foster children are in the home of a relative, 23 percent are placed with a Foster Family Agency, and 5 percent are in group homes. The remaining 29 percent, not addressed by STEP UP, are in other out-of-home placements—such as adoptive homes and foster homes.

STEP UP reported that foster care benefits for 100 youth in relative placement would cost the county \$984,000 a year, while group homes cost would be \$10.2 million a year. This means that for each youth moved out of a group home and into a relative’s home, the county saves enough money to pay the cost for 10 children in relative placement.²

An investigation titled “Why Is Grandma Worth Less?” was completed by the Los Angeles County 2013–2014 Civil Grand Jury. It addressed the disparity issue between foster-care payments for relatives and nonrelative foster parents. It was recommended that DCFS exercise its authority and pay a relative foster parent the same as a nonrelative foster parent.

Group Homes Inspection Report

Name of Group Home City Supervisory District Rate Classification Level ³	INSPECTION DATE	COMMENTS
Delilu Achievement Home Los Angeles District: 2 RCL 12	01/09/15	Group home appeared to be adequately meeting the needs of the residents placed there. The carpet appeared unclean. Staff stated that it was cleaned six months before.
Dimondale Group Home Lancaster District: 5 RCL: 12	01/29/15	Facility appeared to be in satisfactory condition. One resident stated that she appreciates the structured environment and has positive plans for her future.
Eagle Rock Group Home Eagle Rock District: 1 RCL 12	01/06/15	Facility was well-maintained. All six residents were present at time of the inspection. Residents interacted well among themselves and with staff.

² <http://stepupforkin.org>.

³ The Rate Classification Level (RCL) is the monthly monetary rate assessed by the Foster Care Rates Bureau of the California Department of Social Services. The RCL ranges from \$2,332 to \$9,879 per child, based on the level of behavioral, mental, emotional, and physical needs of the minor. The higher the RCL number, the greater the compensation.

Name of Group Home City Supervisorial District Rate Classification Level	INSPECTION DATE	COMMENTS
Eggleston Youth Center I Baldwin Park District: 1 RCL 12	01/27/15	Facility appeared to be in excellent condition. No minors were present during the inspection. Staff expressed pride in the facility and the services provided to the residents.
Eggleston Youth Center II Baldwin Park District: 1 RCL 12	01/27/15	All required documentation was posted. Facility was well-maintained. Staff was truly committed to the well-being of residents.
Enid House Group Home Azusa District: 1 RCL 14	01/06/15	Facility was well-maintained. One of the residents spoke openly and appeared to be well-adjusted to the placement.
Girls Republic Monrovia District: 5 RCL 10	01/30/15	Beautiful home with many amenities, well-maintained. On the premises was a small transitional house for girls ages 18 and older.
Humanistic Foundation, Inc. Los Angeles District: 2 RCL 12	01/27/15	Documents were in order and posted. Well-maintained, with seemingly more than adequate food supply. There were books, but no visual artwork or creativity. Residents were taken to a local park for outdoor activity.
Long Beach Group Home Long beach District: 4 RCL 12	01/06/15	Small but clean facility had had a sewage odor emanating from bathroom. The committee reported the sewage problem to DCFS and Group Home Ombudsman. Matter corrected.
Optimist Boys South Bay Carson District: 2 RCL 12	02/06/15	Clean and well-maintained facility. School for residents conducted at main campus in Highland Park, Ca.
Pacific Lodge Group Home Woodland Hills District: 3 RLC 12	12/17/14	Facility consisted of three cottages. Spacious property with Olympic-size swimming pool. The staff was courteous and caring. Facility has a wrap-around transition program for youth up to 21 years of age to enter the community.
Penny Lane Satellite I North Hills District: 3 RCL 12	01/27/15	Facility was well-maintained. Pool on site but not being used because there was no lifeguard. Pool was completely covered.
Penny Lane Satellite 7 Northridge District: 3 RCL 12	01/09/15	Facility was well-maintained. Residents help with food preparation and do their own laundry.

Name of Group Home City Supervisory District Rate Classification Level	INSPECTION DATE	COMMENTS
Phoenix House group Home Lake View Terrace District: 3 RCL 12	12/16/14	A spacious co-ed facility with a capacity of 120 residents. Well-appointed with artwork created by the residents. Focus was on substance abuse and behavioral problems, with seemingly positive results.
Positive Path Youth Dev. Ctr. Carson District: 2 RCL 2	01/09/15	Facility was well-maintained. One resident stated her satisfaction with the residence.
Rosemary Children Services Pasadena District: 5 RCL 12	01/23/15	Facility was well-maintained. One resident was a runaway. Appropriate authorities notified by group home staff.
St. Anne's Maternity Home Los Angeles District: 3 RCL 12	01/16/15	One of the few homes for pregnant teens and their infants. The residents receive parenting-skills education. Fathers are encouraged to be an active part of mother and infant interaction. There is an on-site daycare and school.
Silver Lake Group Home Los Angeles District: 3 RCL 10	01/30/15	The facility was in satisfactory condition.
Star View Torrance District: 4 RCL N/A ⁴	01/15/15	A community facility that provides services to multiple counties and houses youth with extreme emotional problems. Multiple disciplinary teams exhibited seemingly positive interaction with residents.
Touch A Life Group Home Los Angeles District: 2 RCL 9	01/23/15	Very clean and well-maintained facility in an inner-city community. Residents were neatly dressed and courteous.
Turmont Home For girls Lancaster District 5 RCL 8	01/29/15	Large home that was well-maintained. One resident was a runaway. Appropriate notification had been made by group home staff.

FINDINGS

All group homes visited had required documentation posted, performed fire and natural disaster drills, and provided tutorial services for the residents as needed. First aid kits were on hand, smoke

⁴ Star View is a full-service Community Care Facility for emotionally, behaviorally, and learning-challenged minors. Its rate is higher than RCL 14.

detectors were operational, and staffing ratio was sufficient. Without exception, all residents received their allotted clothing and weekly spending allowance provided by either DCFS or Probation. Several of the group homes monetarily rewarded minors for receiving good grades and for doing chores.

Residents under the supervision of DCFS were allowed the usage of cellphones under certain conditions, but residents under the supervision of Probation were not. All the group homes had adequate food supply, and dietary modifications were provided as needed.

DCFS and Probation group home compliance reports focus on the following 10 areas for residents:

- 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
- Personnel records

Department of Children and Family Services (DCFS)

Group Home Compliance Monitoring⁵

GH compliance monitoring is a component of the Performance Monitoring Section in the Out of Home Care Management Division. Annual reviews of those GHs servicing DCFS-placed children are conducted, which include program contract compliance. The reviews determined whether homes meet the requirements set forth in the Foster Care Agreement, the homes' program statements, and DCFS policies. The reviews assess the homes' service delivery to ensure that these homes are providing children with quality care and services in a safe environment, inclusive of physical care, emotional support, and other services to protect and enhance their growth and development.

Copies of DCFS Compliance Monitoring Reports can be accessed through the DCFS website at: **<http://dcfs.lacounty.gov>**.

⁵ Information obtained from the DCFS website.

Contract Monitoring Process⁶

The goals of the monitoring process are to improve child safety, increase provider services, and strengthen networking among the homes. DCFS's rating system assesses home performance and incorporates Corrective Action Plans (CAPs) and follow-up to ensure compliance:

- Fiscal Compliance—assesses home's fiscal internal controls that will ensure that the CAP, if any, is implemented.
- Contract Compliance—assesses contract deliverables on safety, service needs, and administrative compliance, and follows up on implementation by the agency CAP as necessary. Ensures that homes are in compliance with contract terms and conditions, Community Care Licensing Division approved Program Statements, Statement of Work, and Title 22 regulations.
- Quality Assurance—assesses the quality of performance and service delivery by homes to ensure children are provided with quality care and services in a safe environment.

Los Angeles County Probation Department

Office of the Ombudsman⁷

The Probation Department Office of the Ombudsman is a confidential, informational, and neutral resource where probation clients, their families, and the community can seek assistance with their concerns related to GH service delivery, policies, and/or procedures. The role of the ombudsman for GHs is twofold: 1) to ensure that the voice of youth under the care and custody of Probation is heard and 2) to provide an avenue for the Probation youth to express concerns about their GH experience without fear of retaliation from the GH provider and/or Probation officer and to get resolutions that are reasonable.

Placement Permanency and Quality Assurance Unit (PPQA)⁸

The PPQA serves Probation foster children and their families, group home providers, and the Placement Bureau as a whole. The primary purpose of the group home monitoring/investigations unit is to conduct annual monitoring inspections of group homes that have multiple sites throughout Los Angeles County; investigate GHs related to noncompliance with the county contract; conduct follow-up investigations on minor infractions; refer investigations to Probation from the DCFS Child Abuse Hotline; and develop and monitor the CAP for accuracy and compliance. GHs have 30 days to make the noted corrections; safety issues must be dealt with immediately. At the end of 30 days the PPQA makes another visit to ensure all corrective actions have been addressed.

⁶ Correspondence received from DCFS.

⁷ Information received from the Probation Department.

⁸ Correspondence received from the Probation Department.

Group Home Compliance monitoring reports can be accessed through Los Angeles County Probation at <http://probation.lacounty.gov>.

Department of Auditor-Controller

Group Home Ombudsman⁹

The Office of the Children's Group Home Ombudsman, within the Department of Auditor-Controller, is an independent advocate for children placed in group homes by DCFS. The ombudsman's responsibilities include: maintaining a toll-free telephone number for DCFS GH residents to call from anywhere to express their concerns and complaints; informing children of their rights when placed in a GH; providing a voice to speak and act on behalf of GH residents; establishing an avenue for children to discuss their concerns and complaints without fear of retaliation; offering recommendations that are reasonable and feasible; and working with the county and service providers to benefit GH residents. Although primarily for DCFS GH residents, the GH ombudsman will contact the Probation ombudsman on behalf of any Probation resident who has issues to be resolved.

Even though the ombudsman's policy is to maintain confidentiality to the extent possible, callers are informed that, by law, child endangerment, abuse, and/or neglect must be reported.

Fiscal Review of Group Homes¹⁰

According to the Auditor-Controller's Contract Monitoring Division, at the beginning of each fiscal year (July 1), the Auditor-Controller completes a Risk Home Assessment of GHs and Foster Family Agencies to determine those homes that will be included in its list of audits to be conducted for the year. In addition, both DCFS and Probation can request a fiscal audit if, during a GH program review, fiscal improprieties are noted. Fiscal reviews can also be initiated by allegations received through the Auditor-Controller's fraud hotline or a Board of Supervisor's office's referral.

The Auditor-Controller provides fiscal training upon request to the DCFS Fiscal Compliance section, Foster Family Agencies, and GHs. The Auditor-Controller also collaborates and consults with DCFS's Fiscal Compliance section on results of DCFS's Internal Controls Questionnaire and Fiscal Compliance Assessment Tool.

Fiscal Review Reports can be reviewed at <http://auditorcontroller.lacounty.gov>.

⁹ Information received from the Group Home Ombudsman.

¹⁰ Information received from the Auditor-Controller.

Note: All group homes in Los Angeles County are licensed by the Community Care Licensing (CCL) Division of the California Department of Social Services under Title 22 Regulations and as such are subject to annual reviews by CCL to ensure licensing compliance. CCL's complete Policy and Procedures Manual can be accessed at <http://cdss.ca.gov>.

SUMMARY

The focus of the Group Home Committee was to determine if the basic needs of the minors—including but not limited to food, housing, clothing, education, and psychological services—were met. Overall, the group homes inspected appeared to meet these needs. Most of the group homes housed both DCFS and Probation youths but followed different requirements based on the respective department's regulations.

Although the majority of minors interviewed were satisfied with their placement, more than one youth stated that the group home did not replace being with family. Due to the decline in the number of group homes, it would appear that the court and departments have changed their focus from group home placement to family reunification or relative placement whenever possible.

According to an email sent by DCFS to The Chronicle of Social Change, dated Sept. 30, 2014, Los Angeles County submitted a nonbinding letter to opt into the Approved Relative Caregiver Funding Program (ARC) effective Jan. 1, 2015. The new funding (initially a \$30 million budget allocation) is intended to provide relative caregivers with the same level of funding as other nonrelative foster caregivers. Currently, many relative caregivers receive about half of what other caregivers receive monthly.¹¹

On March 3, 2015, Los Angeles County Board of Supervisors passed a motion instructing DCFS to opt into the ARC program by March 15, 2015.¹²

COMMENDATION

Based on observations of the group homes visited, the committee commends the efforts of these group home providers in delivering services and promoting the safety and well-being of the home residents.

¹¹ Information obtained from <http://ChronicleofSocialChange.org>.

¹² Board of Supervisors Statement of Proceedings, March 3, 2015.

The committee also applauds the Los Angeles County Board of Supervisors' decision to participate in the Approved Relative Caregiver Funding Program. It will be a tremendous savings for the county and a win-win situation for all parties.

ACRONYMS

ARC Approved Relative Caregiver Funding Program

CAP Corrective Action Plan

CCL Community Care Licensing Division

DCFS Department of Children and Family Services

GH Group Home

RCL Rate Classification Level

PPQA Placement Permanency and Quality Assurance unit

COMMITTEE MEMBERS

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METRO RIDERSHIP



Jim Contreras, chair
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METRO RIDERSHIP

TOPIC

The Los Angeles County 2014–2015 Civil Grand Jury (CGJ) formed the Metro Ridership Committee (committee) to look into increasing the ridership within the Los Angeles County Metropolitan Transportation Authority (Metro) system and investigate the efforts of Metro to do the same. The committee also looked into whether Metro would receive maximum funding from federal sources based on achieving the farebox recovery goal of 33 percent.¹

BACKGROUND

Out of an interest in building a more sustainable community by increasing ridership on public transportation, the CGJ created this committee. Transportation is the largest contributor (41 percent) of greenhouse gas emissions in California.² The single-most effective way to reduce a “carbon footprint”³ is for a two-car household to become a one-car household.⁴

Metro riders are overwhelmingly low-income, transit-dependent, nondiscretionary riders.⁵ Riders coming from two-car households are part of the discretionary ridership and make up the rest of the riders. The goal of Metro is to serve all riders and improve transportation in Los Angeles County.

Metro is the largest transit agency in Los Angeles County and is currently supervising the nation’s largest public-works program.⁶ New bus, rail, street, and highway projects that are being built are funded primarily by voter-enacted Propositions A, C, and 108, and Measure R. The farebox recovery rate was a subject of examination by the committee after it reviewed Metro budgets and wanted to know how this rate helped Metro get federal funding. The following areas were researched to see how they affected ridership.

¹ The farebox recovery rate is determined by counting all fares collected in one year from riders of Metro bus and rail, divided by the total cost to operate Metro’s bus and rail systems.

² 2009 Metro Long Range Transportation Plan Technical Document.

³ A carbon footprint is the total amount of carbon dioxide and other greenhouse gases emitted over the full life cycle of a product or service consumed.

⁴ 2009 Metro Long Range Transportation Plan.

⁵ Metro biannual onboard survey, May 2014

⁶ Adopted Budget FY2015 Metro, Budget message from CEO.

Areas of Research

- Why Rail?
- Orange Line Bus Rapid Transit (BRT) as a Model of Success⁷
- Farebox Recovery Rate and Federal Funding
- Security and Safety
- Planning and Land Use
- Maintenance
- Technology
- Parking

INTRODUCTION

Many factors contribute to drivers' reluctance to get out of their cars, including a sense of independence the automobile offers. Speeding along to work in a subway train while reading seems desirable, as long as it is convenient and affordable. Discomfort with the idea of and a lack of knowledge about public transit may keep drivers in their cars. Commuters consider costs before deciding whether to drive or take public transport. "Costs" include not just the fare but also the time consumers would spend getting to the bus, waiting for the bus, waiting to transfer, and delays incurred by the bus or rail system.

To increase ridership, Metro is building more rail in an effort to provide a comprehensive transportation system for Los Angeles County, which includes rail, buses, and freeways. It is a subject of debate whether building more rail will increase ridership.

The people of the county have voted both to support rail and to prohibit it.⁸ Currently, rail is being built with no restrictions imposed by voters.⁹ Metro has been exploring whether to place a measure on the November 2016 ballot that will seek additional funding. The majority of that funding would be spent to build rail.¹⁰

Metro's long-range plan calls for spending \$300 billion in total over 30 years. The largest percentage of each annual budget is dedicated to building more rail.¹¹ The latest federal budget earmarks \$330 million for building rail in Los Angeles County.¹²

⁷ A BRT uses an exclusive busway for most of its journey, rail-like stations, and off-board fare collection.

⁸ Proposition A, C, and Measure R.

⁹ California State Assembly Bill 577.

¹⁰ Metro memo titled "Potential Ballot Measure: Approve New Local Sales Tax," Jan. 16, 2014.

¹¹ 2009 Metro Long Range Transportation Plan.

¹² Legislative Alert, Metro CEO Arthur T. Leahy, Feb. 2, 2015.

There is strong opposition to building more rail. Transit experts say building rail does not increase ridership.¹³ The Bus Riders Union (BRU) says subsidies to rails starve buses.

The history of the Orange Line Bus Rapid Transit illustrates the controversy over whether to build rail or continue on with bus service.

As for the farebox recovery rate, it has very little to do with obtaining federal funds. The attainment of a 33 percent farebox recovery rate is used by Metro as a reason to raise fares. This effort to reach the 33 percent mark is also used as a reason to cite fare evaders. Citing fare evaders by armed personnel is dangerous, and this danger can be avoided by using non-armed personnel.

Metro increases ridership by making the system safer and more secure, cleaner and more visually appealing, adjusting land use policies for transit, experimenting with parking, installing Wi-Fi in stations, improving countdown clocks, and initiating other technological advances that will enhance the experience of riding with Metro.

METHODOLOGY

Given the time constraints of the CGJ the subject matter was focused and necessarily limited.

The committee interviewed 22 people knowledgeable in transit—including academics, community activists, city of Los Angeles Transportation and Planning personnel, and many employees of Metro including its CEO. Comments were received from two members of the Los Angeles County Board of Supervisors and a deputy mayor of the city of Los Angeles. Research papers from academics, the 10-year consent decree initiated in 1995, as well as many internal documents and charts from Metro personnel were reviewed. Metro’s Adopted Budget for fiscal year 2015 was examined, along with the 2009 Long Range Transportation Plan and the related 2009 Long Range Transportation Plan Technical Document. Four main sources of Metro’s income—Propositions A, C, and 108, and Measure R—generated study by the committee. Transit issues, national and international, were explored through the Internet.

In addition, this report is based in part on many of the committee members’ personal experiences and observations while using Metro transportation.¹⁴

¹³ Wendall Cox, publicpurpose.com; James E Moore II, “Ridership and Cost on the Long Beach–Los Angeles Blue Line Train”; Don H. Pickrell, “Fantasy and Fact in Rail Transit Planning;” Tom Rubin and James E. Moore II, reason.org/studies/show/why-rail-will-fail.

¹⁴ The committee has a combined 30-year history of Metro use, which includes the daily jury service commute.

WHY RAIL?

There is a passionate debate among transit experts over building more rail or increasing bus service. The debate centers on whether building rail increases transit ridership.

The facts are that more rail is being built, and funding to expand the rail system is in the pipeline. Propositions A and C and Measure R will guarantee a substantial amount of funding coming from county sales tax to continue rail expansion. Metro has stated that building new rail is important to provide the benefits of rail along with a wide-ranging bus system and a well-managed freeway system. In the next 10 years, Metro will expand rail by 32 miles of track and grow from 80 to 110 stations to offer approximately 120 miles of rail service in total. Metro measures its success by evaluating how it will improve mobility, air quality, and the economy.

Many transit experts say none of this can be accomplished by building more rail. Their research shows:

- it is not possible to build a way out of congestion,
- the power sources for rail produce more carbon emissions than buses, and
- funds spent on rail are a waste.

Metro counters this point of view by citing its extensive research regarding these issues, which concludes that its efforts will and have increased ridership, will decrease carbon emissions, and show that if nothing is done congestion will worsen.

The following tables (Figs. 1–3, provided by Metro) show increased ridership where rail has displaced buses.

Fig. 1

RED LINE BUS/RAIL INTERFACE LINE CHANGES

Line	Change in Service	Ridership Prior to Service Cancellation			Sources
		DX	SA	SU	
Ridership Before Red Line Opening					
1	Line Discontinued- Service supplemented by Lines 180, 181, 217 on Hollywood Bl, and Lines 2 & 4 on Sunset Bl.	4,042	3,045	2,401	Final Revised Metro Red Line Segment 2B Bus/Rail Interface Plan- April 22, 1999 Planning and Programming Committee- Appendix 2
420	Segment 2B - Terminate at Vermont/Santa Monica Station. Segment 3B - Discontinue Express Route, Reduce service levels south of North Hollywood Station, convert to Local Line 156	21,170	13,510	10,826	Final Revised Metro Red Line Segment 2B Bus/Rail Interface Plan- April 22, 1999 Planning and Programming Committee- Appendix 2. Final Revised Metro Red Line Segment 3 Bus/Rail Interface Plan- January 20, 2000 Planning and Programming Committee- Appendix 2
424/425	(424) Discontinue Express Route, convert to Local Line 150, end route at Universal City Station (425) Discontinue Express Route, convert to Metro Rapid Line 750, end route at Universal City Station	13,240	9,800	4,550	Final Revised Metro Red Line Segment 3 Bus/Rail Interface Plan- January 20, 2000 Planning and Programming Committee- Appendix 2 (Lines 424 & 425 counts combined)
426	Line Discontinued	1,652	-	-	Extended on Oxnard St. and realigned to North Hollywood Station via Lankershim Blvd. The remaining freeway segment was eliminated June 29, 2003.
427	Line Discontinued	408	-	-	MOS-3 opening, discontinued. Parallel Line 154 was routed to North Hollywood Station. APC Generated Ridership Analysis- December 1999- June 2000
429	Line Discontinued	614	-	-	APC Generated Ridership Analysis- December 1999- June 2000
522	Express Line Discontinued, convert to Local Line 240. End Route at Universal City Station	10,180	-	4,258	Final Revised Metro Red Line Segment 3 Bus/Rail Interface Plan- January 20, 2000 Planning and Programming Committee- Appendix 2
TOTAL RIDERSHIP BEFORE		51,306	26,355	22,035	
Ridership Today					
150/240	Ridership After Opening - Note, Lines 150 and 240 are interlined on Ventura Bl, hence the data is captured together.	10,741	11,686	8,316	Ridership of May 2012 (\mmta28\OP_Reports\Ridership\Monthly\FY 2012\May12.doc)
156	Ridership After Opening	1,808	1,362	1,023	Ridership of May 2012 (\mmta28\OP_Reports\Ridership\Monthly\FY 2012\May12.doc)
750	Ridership After Opening	4,836	-	-	Ridership of May 2012 (\mmta28\OP_Reports\Ridership\Monthly\FY 2012\May12.doc)
802	Red Line Only Ridership	147,777	105,849	72,441	April 2014 Ridership Report
901	Orange Line - Opened June 2005	29,181	17,922	13,323	April 2014 Ridership Report
TOTAL RIDERSHIP AFTER		194,343	136,819	95,103	

DX=daily

SA=Saturday

SU=Sunday

Fig. 2

GREEN LINE BUS/RAIL INTERFACE LINE CHANGES					
Line	Change in Service	Ridership Prior to Service Cancellation			Sources
		DX	SA	SU	
Ridership Before Green Line Opening					
120	Cut into two pieces (120- LAX City Bus Center to Imperial/Wilmington and 121- Imperial/Wilmington to Norwalk/Santa Fe Springs Transportation Center)	11,074	6,219	3,401	Line Performance Trends- Count Date: November 15, 1993 (DX), January 17, 1992 (SA), February 27, 1994 (SU)
TOTAL RIDERSHIP BEFORE		11,074	6,219	3,401	
Ridership Today					
120	Ridership After Opening (Line 120 and 121 were rejoined as operated today.)	4,640	2,184	1,789	Ridership of May 2012 (\\mta28\OP_Reports\Ridership\Daily_Bus_Line_Level\Monthly\FY_2012\May_2012_Daily_Line_Patronage.xls)
803	Green Line	41,023	25,457	19,057	April 2014 Ridership Report
TOTAL RIDERSHIP AFTER		45,663	27,641	20,846	

Fig. 3

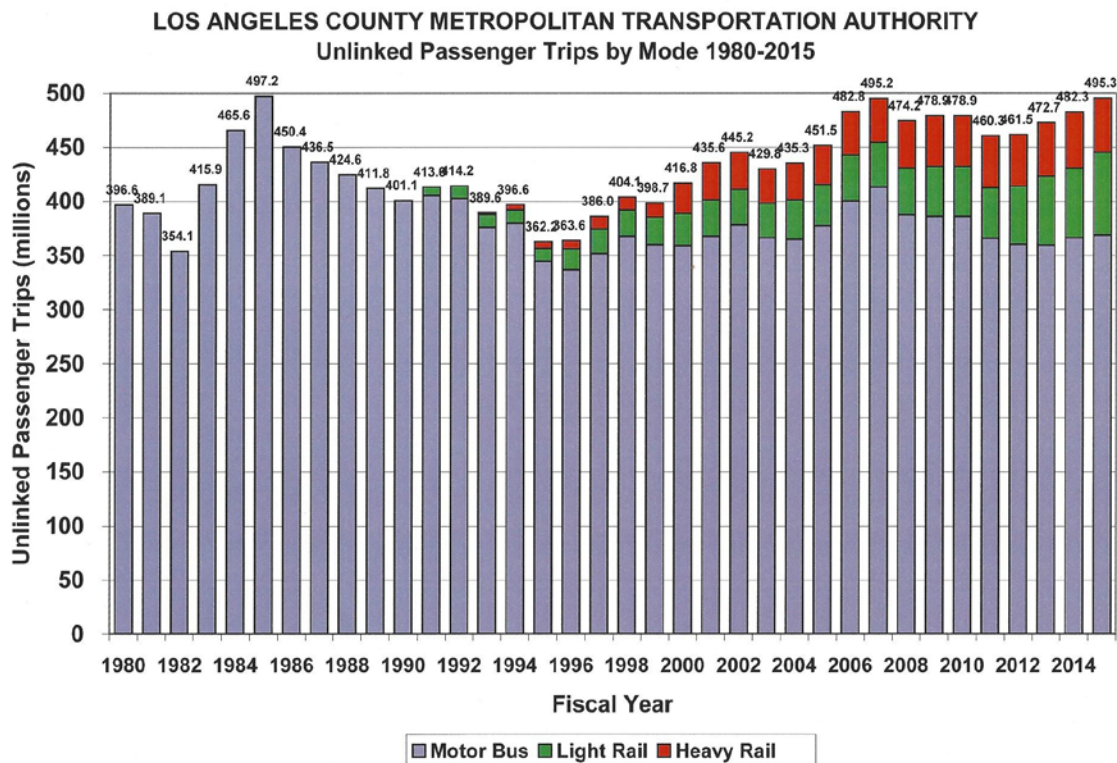
BLUE LINE BUS/RAIL INTERFACE LINE CHANGES					
Line	Change in Service	Ridership Prior to Service Cancellation			Sources
		DX	SA	SU	
Ridership Before Blue Line Opening					
60/61	Line 60 from DT LA to DT LB Line 61 Discountinued, Replaced with rerouting of 117 and 251	30,823	24,151	14,905	Line Performance Trends- Count Date: February 14, 1990 (DX), March 28, 1987 (SA), July 16, 1989 (SU)
351	Line Discountinued, Replaced with Local Line 51	5,391	-	-	Findings of December 2, 1989 Public Hearing on Revised Bus/Rail Integration Plan and Recommended Service Plan (Attachment C)
358	Line Discountinued	699	-	-	Findings of December 2, 1989 Public Hearing on Revised Bus/Rail Integration Plan and Recommended Service Plan (Attachment C)
360	Line Discountinued, Replaced with Local Line 60	2,194	-	-	Findings of December 2, 1989 Public Hearing on Revised Bus/Rail Integration Plan and Recommended Service Plan (Attachment C)
456	Line Discountinued	2,510	1,936	1,394	Findings of December 2, 1989 Public Hearing on Revised Bus/Rail Integration Plan and Recommended Service Plan (Attachment C)
457	Line Discountinued	354	-	-	Findings of December 2, 1989 Public Hearing on Revised Bus/Rail Integration Plan and Recommended Service Plan (Attachment C)
TOTAL RIDERSHIP BEFORE		41,971	26,087	16,299	
Ridership Today					
60	Ridership After Opening - Later Terminated at Artesia Station	21,117	16,032	13,465	Ridership of May 2012 (\\mta28\OP_Reports\Ridership\Daily_Bus_Line_Level\Monthly\FY_2012\May_2012_Daily_Line_Patronage.xls)
801	Blue Line	85,283	54,927	44,636	April 2014 Ridership Report
TOTAL RIDERSHIP AFTER		106,400	70,959	58,101	

At first glance, the above tables seem to support Metro’s position that rail is a strong driver of increased ridership. They show ridership increases of roughly two to four times, from before each line opened until May 2012. On closer inspection, those increases are over a 12- to 24-year period. Population growth alone could explain a large part of that increase.

According to the table below, ridership growth was greater in the early 1980s and then dropped over the next 10 years. The table shows almost no growth in bus riders and all the growth in rail riders since the mid-1990s. But would that growth have occurred even if there were no rail built? If so, the tables show only a change from bus to rail and no growth in ridership due to building rail.

Many studies have been published on these issues. The tables here are not definitive but are provided only to show that this is a complex issue the public needs to carefully examine.

Fig. 4



Metro is a nearly \$6-billion-per-year enterprise, and it plans to spend \$300 billion over the next 30 years to service the county’s transit needs. Metro has plans to sponsor another sales tax measure as early as November 2016. This measure would raise more funding for rail transit expansion. Many of the academics interviewed and a highly visible community

organization said rail is an inefficient way to spend this money and it would be better spent on buses and BRTs.

According to a survey in Metro's 2009 Long Range Plan, 81 percent of Los Angeles County residents agree that air pollution is a serious problem and that climate change threatens the economy and quality of life. Given that the citizens of Los Angeles County recognize the need to change the way we transport ourselves, it is critical we have a wide-ranging discussion about building rail with our tax money when many learned experts insist we should not.

The Los Angeles Bus Riders Union (BRU) is a campaign/movement comprising 200 active and 3,000 dues-paying members. BRU is committed to strengthening the bus transit system. The union contends that the high-cost rail system benefits a smaller, wealthier portion of the population and deprives the bus system of its resources. The Bus Riders Union was successful in the 1990s in obtaining a consent decree imposed on Metro requiring money be spent first on quality bus service, thus shrinking the budget to build more rail.¹⁵ The union disputes the numbers Metro uses to describe the relative expenses of the systems. Even by Metro figures, rail is more highly subsidized than buses. These figures show recovery of operating expenses from revenues—FY2015 at 29 percent for buses and only 24 percent for rail. Of course operating expenses ignores the huge capital expenditures on the rail system and don't show the true cost per journey.

The union's focus is to institute:

- \$20 monthly bus passes
- 50-cent fares with a free transfer
- Doubling the clean fuel fleet of 2,500 to 5,000
- Freezing rail spending
- Fully implementing Civil Rights Consent Decree
- \$10 student bus passes sold at schools (K-12, college, and adult school)

Metro and BRU disagree on a number of issues: zero fares for seniors, veterans and disabled; whether Metro must restore to the bus operations budget all of the bus-dedicated funds generated by the sales tax Measure R; and whether rail construction should continue or whether, instead, bus lines discontinued since 2008 should be restored.

Metro and BRU have adopted informal compromises:

¹⁵ MTA/BRU Civil Rights Consent Decree 1996.

- BRU has placed a temporary moratorium on its demand for zero fares in light of Metro reducing fares for students (K–12) and the institution of the two-hour-window for transfers to avoid double-fare payment for the rider.
- In response to BRU’s contention that Metro misallocated Measure R funds, Metro will increase the number of buses by 500 units in areas where Metro has determined they are most needed.

BRU is nonetheless considering a suit against Metro because of reduced bus services affecting lower-income riders. BRU contends that when fares increase or bus service is reduced, an additional burden is placed on low-income riders, who then must find other means to remain mobile. One transit expert, in academic programs at the Viterbi School of Engineering at the University of Southern California, supports BRU’s focus on buses. He said:

- In older, denser cities, rail makes sense, not in Los Angeles.
- Rail makes sense when the system is built with no public money, as in Hong Kong.
- Fares should be based on the price of gas and/or population density.
- Metro’s 30 Year Plan is unimpressive and should not support rail, motor rail, light rail, Metro Link, or high-speed link.
- The Metro Local Bus 456 from downtown Los Angeles to Long Beach was faster than the Blue Line. Metro looked at the market share and cancelled the 456 bus to make sure people took the train (Fig. 3). People can’t use the buses if they aren’t there. The amount of money used to subsidize the Blue Line would have covered the cost of 22 bus lines.

Figure 4 was prepared by a previous CEO of the now-defunct Southern California Rapid Transit Department,¹⁶ from 1989 through 1993. He was the chief expert for BRU in its case against Metro that resulted in its consent decree. The CEO said, “To the best of my knowledge, this legal action produced the only event where the question of which is better, improvements to bus transit or rail expansion, was directly submitted to the U.S. judicial system.”

¹⁶ The precursor of Metro.