



**COUNTY OF LOS ANGELES  
DEPARTMENT OF AUDITOR-CONTROLLER**

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April 8, 2009

TO: Supervisor Don Knabe, Chairman  
Supervisor Gloria Molina  
Supervisor Mark Ridley-Thomas  
Supervisor Zev Yaroslavsky  
Supervisor Michael D. Antonovich

FROM: Wendy L. Watanabe  
Auditor-Controller

SUBJECT: **HOMES OF HOPE FOSTER FAMILY AGENCY CONTRACT REVIEW –  
A DEPARTMENT OF CHILDREN AND FAMILY SERVICES PROVIDER**

We have completed a contract compliance review of Homes of Hope Foster Family Agency (Homes of Hope or Agency), a Department of Children and Family Services (DCFS) provider.

**Background**

DCFS contracts with Homes of Hope, a private non-profit community-based organization to recruit, train and certify foster care parents for the supervision of children DCFS places in foster care. Once the Agency places a child, it is required to monitor the placement until the child is discharged from the program.

Homes of Hope is required to hire qualified social workers to provide case management and act as a liaison between DCFS and foster parents. The Agency oversees a total of 55 certified foster homes in which 152 DCFS children were placed at the time of our review. Homes of Hope is located in the Fifth District.

DCFS pays Homes of Hope a negotiated monthly rate, per child placement, established by the California Department of Social Services' (CDSS) Foster Care Rates Bureau. Based on the child's age, Homes of Hope receives between \$1,589 and \$1,865 per

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month, per child. Out of these funds, the Agency pays the foster parents between \$624 and \$790 per month, per child. Homes of Hope was paid approximately \$3,149,000 during Fiscal Year 2007-08.

### **Purpose/Methodology**

The purpose of the review was to determine whether Homes of Hope was providing the services outlined in their Program Statement and the County contract. We reviewed certified foster parent files, children's case files, personnel files and interviewed Homes of Hope staff. We also visited a number of certified foster homes and interviewed several children and foster parents.

### **Results of Review**

The foster parents stated that the services they received from Homes of Hope generally met their expectations. Homes of Hope also ensured that foster parents were certified in compliance with the County contract and CDSS Title 22 regulations. In addition, Homes of Hope ensured that social worker caseloads did not exceed the maximum established by CDSS Title 22 regulations.

Homes of Hope needs to ensure that foster homes are in compliance with the County contract and CDSS Title 22 regulations. Specifically:

- One of the seven homes visited did not adequately secure knives, detergents, cleaning solutions, and an alcoholic beverage. In addition, the home's air conditioner was not working. As a result, the children's bedrooms were extremely warm at the time of our visit. One child indicated that in order to sleep at night, she opened the bedroom window. However, since the bedroom window is on the first floor and faces the street, this poses a potential security problem for the child.
- Two of the 12 children taking psychotropic medicine did not have the medication incorporated into their Needs and Services Plans (NSPs).
- Eight of the 21 NSPs reviewed contained goals that were not measurable and specific and the DCFS social worker did not approve 12 NSPs as required.
- None of the 23 Termination Reports reviewed included a closing summary of the Agency's records related to placement.
- Four of the 19 children interviewed reported that they were not provided with enough opportunities to participate in extracurricular activities.

The details of our review along with recommendations for corrective action are attached.

**Review of Report**

We discussed our report with Homes of Hope on December 19, 2008. In their attached response, Homes of Hope management indicates agreement with our findings and the actions they have taken to implement the recommendations. We also notified DCFS of the results of our review.

We thank Homes of Hope for their cooperation and assistance during this review. Please call me if you have any questions or your staff may contact Don Chadwick at (213) 253-0301.

WLW:MMO:DC:AA

Attachment

c: William T Fujioka, Chief Executive Officer  
Patricia S. Ploehn, Director, Department of Children and Family Services  
Ted Myers, Chief Deputy Director, Department of Children and Family Services  
Susan Kerr, Senior Deputy Director, Department of Children and Family Services  
Emanual Azahria Board of Directors, Homes of Hope FFA  
Sukhwinder Singh, Executive Director, Homes of Hope FFA  
Jean Chen, Community Care Licensing  
Public Information Office  
Audit Committee

**FOSTER FAMILY AGENCY PROGRAM  
HOMES OF HOPE FOSTER FAMILY AGENCY  
FISCAL YEAR 2006-2007**

**BILLED SERVICES**

**Objective**

Determine whether Homes of Hope Foster Family Agency (Homes of Hope or Agency) provided program services in accordance with their County contract and California Department of Social Services (CDSS) Title 22 regulations.

**Verification**

We visited seven of the 55 Los Angeles County certified foster homes that Homes of Hope billed DCFS in April and May 2008 and interviewed seven foster parents and 19 of the 31 children placed in the seven homes. We also reviewed case files for seven foster parents and 21 children. In addition, we reviewed the Agency's monitoring activity.

**Results**

Homes of Hope needs to ensure that foster homes are in compliance with the County contract and CDSS Title 22 regulations. Homes of Hope also needs to ensure that children's dental examinations are conducted within the required timeframes and that Needs and Services Plans (NSPs), Quarterly Reports and Termination Reports contain all the required information. We noted the following areas of non-compliance with the contract:

**Foster Home Visitation**

Six (85%) of the seven foster homes visited were well maintained and in compliance with CDSS Title 22 regulations. However, we noted the following at the remaining home visited:

- Kitchen knives, detergents, cleaning solutions, and an alcoholic beverage were not adequately secured.
- The kitchen refrigerator was dirty and needed to be cleaned.
- The home's air conditioner was not working. As a result, the children's bedrooms were extremely warm at the time of our visit. One child indicated that in order to sleep at night, she opened the bedroom window. However, since the bedroom window is on the first floor and faces the street and sidewalk, this poses a potential security problem for the child.

Prior to the conclusion of our review, the Agency provided documentation that the items above had been corrected. However, our prior audit review also noted that Homes of Hope did not always ensure that foster homes were in compliance with the County contract and CDSS Title 22 regulations.

### Medical Services

- One (4%) of the 21 children's initial dental examination was not conducted within the required timeframes. The examination was conducted three months late.
- Two (16%) of the 12 children taking psychotropic medication did not have the medication incorporated into their NSPs.

Our prior audit review also noted that Homes of Hope did not always ensure that children's initial dental examinations were conducted timely and that children taking psychotropic medication had the medication incorporated into their NSPs.

### Needs and Services Plans

- Eight (38%) of 21 NSPs contained goals that were not measurable and specific. Our prior audit review also noted that Homes of Hope did not ensure that NSPs contained all the required information.
- DCFS social workers did not approve 12 (57%) of the 21 NSPs as required. Homes of Hope provided documentation that the NSPs were forwarded to the DCFS social worker for approval. However, the Agency did not follow-up when the NSPs were not approved by the DCFS social worker.

### Quarterly and Special Incident Reports

- One Quarterly Report reviewed did not include a copy of the child's Emancipation Preparation Contract and did not address the status of the child's Transitional Independent Living Plan as required for children over 14 years old. At the time of our review, eight children reviewed were over 14 years old.
- None of the 23 Termination Reports reviewed included a closing summary of the Agency's records related to placement.

Our prior audit review also noted that Homes of Hope did not always ensure that Quarterly Reports contained all of the required information.

**Recommendations**

Homes of Hope management ensure:

1. Staff adequately monitor foster homes to ensure they comply with the County contract and CDSS Title 22 regulations.
2. Foster parents adequately secure kitchen knives, detergents, cleaning solutions, alcoholic beverages and other items that could pose a potential safety hazard to children.
3. Foster homes are maintained in accordance with the County contract and CDSS Title 22 regulations.
4. Foster homes maintain a comfortable temperature for children as required by CDSS Title 22 regulations.
5. Children's initial dental examinations are conducted within the required timeframes.
6. Children taking psychotropic medications have the medications incorporated into their Needs and Services Plans.
7. Needs and Services Plans contain goals that are measurable and specific and the children's DCFS social worker has approved them.
8. For children 14 years old and over, Quarterly reports contain an Emancipation Preparation Contract and address the status of the children's Transitional Independent Living Plan.
9. Termination Reports contain all the required information.

**CLIENT VERIFICATION**

**Objective**

To determine whether the program participants received the services that Homes of Hope billed to DCFS.

**Verification**

We interviewed 19 children placed in seven Homes of Hope certified foster homes and seven foster parents to confirm the services the Agency billed to DCFS.

**Results**

The foster children interviewed stated that they enjoyed living with their foster parents and the foster parents interviewed stated that the services they received from the Agency met their expectations. However, four of the nineteen children interviewed stated that they were not provided with enough opportunities to participate in extracurricular activities of their choice.

**Recommendation**

10. Homes of Hope management ensure that children are offered the opportunity to participate in extracurricular activities of their choice when appropriate.

**STAFFING/CASELOAD LEVELS**

**Objective**

Determine whether Homes of Hope social workers' caseloads do not exceed fifteen placements and whether the supervising social worker does not supervise more than six social workers as required by the County contract and CDSS Title 22 regulations.

**Verification**

We interviewed Homes of Hope's administrator and reviewed caseload statistics and payroll records for the Agency's social workers and supervising social worker.

**Results**

Overall, Homes of Hope's thirteen social workers carried an average caseload of 13 cases, and the Agency's three supervising social worker supervised an average of four social workers.

**Recommendation**

There are no recommendations for this section.

**STAFFING QUALIFICATIONS**

**Objective**

Determine whether Homes of Hope staff possess the education and work experience qualifications required by their County contract and CDSS Title 22 regulations. In addition, determine whether the Agency conducted hiring clearances prior to hiring their staff and provided ongoing training to staff.

**Verification**

We interviewed Homes of Hope's administrator and reviewed each staff's personnel file for documentation to confirm their education and work experience qualifications, hiring clearances and ongoing training.

**Results**

Homes of Hope's administrator and supervising social workers possessed the education and work experience required. In addition, the Agency conducted hiring clearances prior to hiring their staff and provided ongoing training to staff working on the County contract. However, one of Homes of Hope's social workers did not meet the educational requirements of the County contract and CDSS Title 22 regulations. The social worker did not possess a qualifying Master's Degree for the social worker position. Prior to the issuance of this report, the Agency terminated the social worker.

**Recommendation**

- 11. Homes of Hope management ensure that staff working on the County contract possess the education requirements in the County contract and CDSS Title 22 regulations.**

**PRIOR YEAR FOLLOW-UP**

**Objective**

Determine the status of the recommendations reported in the Auditor-Controller's prior monitoring review.

**Verification**

We verified whether the outstanding recommendations from the Fiscal Year 2005-06 monitoring review were implemented. The report was issued on June 9, 2006.

**Results**

The prior monitoring report contained nine recommendations. Homes of Hope fully implemented five of the recommendations and partially implemented another two of the recommendations. As indicated earlier, the findings related to recommendations 1, 5, 6, 7, and 8 contained in this report were also noted during the prior year's review.

**Recommendation**

- 12. Homes of Hope management fully implement the four outstanding recommendations from the Fiscal Year 2005-06 monitoring report.**



Homes of Hope  
Foster Family Agency

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January 21, 2009

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*Child Welfare League  
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[www.homesofhope.us](http://www.homesofhope.us)

TO: Supervisor Don Knabe, Chairman  
Supervisor Gloria Molina  
Supervisor Mark Ridley-Thomas  
Supervisor Zev Yaroslavsky  
Supervisor Michael D. Antonovich

FROM: Sukhwinder Singh  
Executive Director

SUBJECT: Homes of Hope Foster Family Agency  
Response to Contract Review – May 28, 2008  
Auditor Controller Audit/Contract Monitoring

It has been our privilege to serve the County of Los Angeles through the provision of foster care services. It is our desire to meet all contract requirements and support the dedication of the County service personnel and their care of dependent children.

The following corrective action plan response will address the findings and recommendations made by the Auditor-Controller/Contract Monitoring Division in their Foster Family Agency Contract Review Report.

## **Foster Home Visitation**

### **Findings:**

Six (85%) of the seven foster homes visited were well maintained and in compliance, however, we noted the following at the remaining home visited:

- Kitchen Knives, detergents, cleaning solutions, and an alcoholic beverage were not adequately secured.
- The kitchen refrigerator was dirty and needed to be cleaned on both the inside and outside.
- The home's air conditioner was not working. As a result, the children's bedrooms were extremely warm at the time of our visit. One child indicated that in order to sleep at night, she opened the bedroom window. However, since the bedroom window is on the first floor and faces the street, this poses a potential danger to the child.

### **Auditor Controller Recommendations:**

1. Staff adequately monitor foster homes to ensure they comply with the County contract and CDSS Title 22 Regulations.
2. Foster parents adequately secure kitchen knives, cleaning solutions, alcoholic beverages and other items that could pose a potential safety hazard to children.
3. Foster homes are maintained in accordance with the County contract and CDSS Title 22 Regulations.
4. Foster homes maintain a comfortable temperature for children as required by CDSS Title 22 regulations.

### **Agency Response and Corrective Action Plan:**

In reference to the above findings, in addition to the already implemented Quarterly Home Compliance Inspections conducted by the FFA Social Worker and Annual Home Compliance Inspections, conducted by the Supervising Social Workers, the agency has included a check-off list to the "Weekly Progress Summary" template as a reminder to the FFA Social Worker to physically check and immediately address any concerns such as the storing of cleaning solutions and kitchen knives while visiting the home. Additional areas of safety and Title 22 Compliance have been included to monitor comfortable home temperature. Social Workers have been reminded to ensure that the child's bedroom is comfortable during their weekly visits and have received additional training. Food supply and the cleanliness of food storage areas has also been included to the weekly visit checklist.

## **Medical Services**

### **Findings:**

- One (4%) of the 21 children's initial dental examination was not conducted within the required timeframes. The examination was conducted three months late.

### **Auditor Controller Recommendations:**

5. Children's initial dental examinations are conducted within the required time-frames.

### **Agency Response and Corrective Action Plan:**

At the initial placement, foster parents are reminded to take the minor for medical and dental exams, in addition the FFA social workers are immediately notified to follow-up on these exams. The agency has internal tracking log in place that identifies when a child's dental examination will be due or have not been timely completed. Upon receiving the results of this audit, the Administrator and the FFA Supervising Social Workers will have a formal weekly meeting to address issues of non-compliance related to the certified home that also includes minor's issues relative to dental exams. This Administrative Level meeting is in addition to the weekly supervision meeting held between the SW supervisor and FFA social Worker. Specific problems will be identified such as Medi-cal delays, consistent documentation of these delays and attempts made by the agency to follow-up with DCFS CSW and Medi-Cal. This may include the agency's Executive Order to take measures to pay for the dental exam if necessary to avoid delays by Medi-Cal and communicate this to DCFS.

### **Findings:**

- Two (16%) of the 12 children taking psychotropic medication did not have the medication incorporated into their NSPs.

### **Auditor Controller Recommendations:**

6. Children taking psychotropic medications have the medications incorporated into their NSPs.

### **Agency Response and Corrective Action Plan:**

Previously to the audit findings, the FFA Social Workers received in-house training by our own FFA SW Supervisor on how to complete NSP's. The agency was unclear about the new NSP's documentation requirements by DCFS until training by the Department was provided. This was due in part to the new 17-page template implemented by DCFS. Upon receiving the DCFS training, the agency social workers received additional in-house trainings. The agency social workers have been incorporating this information into the NSP's and more recently received additional training due to the audit findings. Supervising Social Worker Supervisors will closely monitor these reports to ensure that psychotropic medication is incorporated into the NSPs on an on-going basis.

## Needs and Services Plans

### **Findings:**

- Eight (38%) of 21 NSPs contained goals that were not measurable and specific. Our prior adult review also noted that Homes of Hope did not ensure that NSPs contained all the required information.
- Twelve (57%) of the 21 NSP's reviewed were not approved by the children's DCFS social worker as required. Homes of Hope provided documentation that the NSPs were forwarded to the DCFS social worker for approval. However, the Agency did not follow-up when the NSPs were not approved by the DCFS social worker.

### **Auditor Controller Recommendations:**

7. NSPs contain goals that are measurable and specific and are approved by the children's DCFS social worker.

### **Agency Response and Corrective Action Plan:**

FFA social workers received in-house training on NSP's that addresses goals and how they need to be measurable and specific. Written examples were incorporated into the training. Social Worker Supervisors will monitor these goals when reviewing the NSP's. Agency social workers have already been incorporating this information in the NSP's after having a better understanding of the NSP documentation requirements and received additional training in January.

In addition:

The agency's Quality Assurance Department created a tracking log that tracks the FFA's attempts to acquire CSW approval of NSPs:

- (1) date mailed out to the CSW,
- (2) when faxed to the CSW and
- (3) follow-up calls and attempts made by the agency social work department to the CSW to please approve, sign and return the NSP.
- (4) Two follow-up contacts will be made to the CSW one week apart; third week contact will be made to the CSW Supervisor.

This tracking log will serve as the agency's documentation and follow-up attempts to obtain CSW approval that go unheeded.

## Quarterly and Special Incident Reports

### **Findings:**

- One (1) Quarterly Report reviewed did not include a copy of the child's Emancipation Preparation Contract and did not address the status of the child's Transitional Independent Living Plan as required for children over 14 years old and over. At the time of our review, eight children reviewed were over 14 years old and over.

### **Auditor Controller Recommendations:**

8. For children 14 years old and over, Quarterly reports contain an Emancipation Preparation Contract and address the status of the Children's Transitional Independent Living Plan.

### **Agency Response and Corrective Action Plan:**

The agency's Quality Assurance Department has developed and prepared an Emancipation Preparation Contract form letter that is sent to the CSW reminding them that the minor is or will be 14 years of age. In addition, an Independent Living and Emancipation Program tracking log alerts all FFA social workers and supervisors when contracts will become due. This is what "initiates" the form letter notifying the DCFS CSW as a reminder. All Quarterly Reports for children age 14 and over will address the status of the child's Life Skills Training/Emancipation Preparation. Supervisors will identify these children by also cross checking the tracking log as part of their requirement to review the status. The agency will document all attempts made to the CSW to (1) obtain the Emancipation Preparation Goal Contract (at age 14), (2) get the child enrolled into ILP, (3) assist the CSW with the development of the TILP by meeting with them and the minor, (4) obtain the Emancipation Preparation Contract (age 16) on a timely basis from the CSW in order to have the documentation necessary to properly address the status on the report.

### **Findings:**

- Termination Reports reviewed did not include a closing summary of the Agency's records related to the placement.

### **Auditor Controller Recommendations:**

9. Termination Reports contain all the required information.

### **Agency Response and Corrective Action Plan:**

The agency did not include a narrative for a closing summary but more recently has started using the "**Discharge Summary for DCFS**" under the new master contract. Social Workers will provide their narrative under the section: "*the agency's assessment of the child's level of functioning upon discharge.*" Supervising Social Workers will review all reports for compliance. These will be reviewed and signed by the FFA Social Worker Supervisor.

## **Client Verification**

### **Findings:**

The foster children interviewed stated that they enjoyed living with their foster parents and the foster parents interviewed stated that the services they received from the agency met their expectations. However, four of the nineteen children interviewed stated that they were not provided with enough opportunities to participate in extracurricular activities of their choice.

### **Auditor Controller Recommendations:**

10. Homes of Hope management ensure that children are offered the opportunity to participate in extracurricular activities of their choice when appropriate.

### **Agency Response and Corrective Action:**

The Agency has included into the Weekly Visit template a section to identify whether extracurricular activities and activities occur weekly. However, whenever a child requests for an activity of their choice such as participation in sports, cheer-leading or karate, the agency has paid for some of the cost, either registration cost, cost for uniforms or shared the cost with the foster parent depending on the amount of the activity. Requests are made through the FFASW and approved by management. The agency believes that it has honored all requests that have been made known to management and brought to the attention of the FFA Social Worker.

## **Staffing Qualifications**

### **Findings:**

Homes of Hope's administrator and supervising social workers possessed the education and work experience required. In addition, the Agency conducted hiring clearances prior to hiring their staff and provided ongoing training to staff working on the County contract. However, one of the Homes of Hope's social workers did not meet the educational requirements of the County contract and CDSS Title 22 Regulations. The social worker did not possess a qualifying Master's Degree for the social worker position. Prior to the issuance of this report, the Agency terminated the social worker.

### **Auditor Controller Recommendations:**

11. Homes of Hope management ensure that staff working on the County contract possess the education required by the County contract and CDSS Title 22 Regulations.

### **Agency Response and Corrective Action Plan:**

The Administrator of Homes of Hope will collaboratively work with Human Resources Department to ensure that all questionable educational requirements are discussed and/or cleared with CDSS Title 22 Regulations Analyst with the support of the Executive Director.

## **Prior Year Follow-Up**

### **Findings:**

The Prior monitoring report contained nine recommendations. Homes of Hope fully implemented five of the recommendations and partially implemented another two of the recommendations. As indicated earlier, the findings related to recommendations 1, 4, 6, 7, and 8 contained in this report were also noted during the prior year's review.

### **Auditor Controller Recommendations:**

12. Homes of Hope management fully implement the four outstanding recommendations from the Fiscal Year 2005-06 monitoring report.

### **Agency Response and Corrective Action Plan:**

The outstanding four (4) prior recommendations have been implemented by Homes of Hope Management. The actions our agency has taken to implement the four (4) outstanding recommendations are described in our response and corrective action plan through recommendations 1, 4, 6, 7, and 8 in this report.

This concludes our corrective action plan that addresses the County review recommendations.