County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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September 19, 2012

To: Supervisor Zev Yaroslavsky, Chairman
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From: Philip L. Browning
Director

FRED JEFFERSON MEMORIAL FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a review of Fred Jefferson Memorial Foster Family Agency (Fred Jefferson) in June 2011, at which time they had 138 DCFS placed children in 59 homes. The placed children's average length of placement was 10 months, and the average age was nine.

Fred Jefferson FFA has satellite offices located in the Second Supervisorial District, Riverside County and San Bernardino County and provides services to Los Angeles County DCFS' foster youth. According to Fred Jefferson's program statement, its goal is "to maintain minors placed in our homes within their existing support system. In doing so we maintain the minors' existing attachments that they are familiar and comfortable with. We maintain attachments to birth parents when possible and when appropriate. When birth parents are not available our goal then becomes centered around developing and maintaining substitute parents. All children must be attached to an adult that is loving, nurturing, and consistently there for them. Without appropriate relationships with adults that are consistent minors are unable to develop appropriately." Fred Jefferson is licensed to serve children ranging from birth through age 17.

For the purpose of this review, 12 children were selected for the review. Six placed children were interviewed, as the other six were non-verbal. All 12 sampled children's case files were reviewed. Four certified foster parents' file, four discharged children's files, and five staff files were reviewed for compliance with Title 22 Regulations and the County contract requirements.

Three placed children were prescribed psychotropic medication. We reviewed their case files to assess the timeliness of Psychotropic Medication Authorizations (PMAs) and to confirm that documentation of psychiatric monitoring was maintained as required.

SCOPE OF REVIEW

The purpose of this review was to assess Fred Jefferson's compliance with the County contract and State regulations. The visit included a review of the Agency's program statement, administrative internal policies and procedures; 12 placed children's case files, four foster parents' files and five personnel files. Face-to-face visits and interviews were conducted with four certified foster parents to assess the quality of care and supervision provided to the children; and six placed child were interviewed to assess the care and services they were receiving.

A copy of this report has been sent to the Auditor-Controller (A-C) and Community Care Licensing (CCL).

SUMMARY

Generally, the children interviewed reported feeling safe, having been provided with good care and appropriate services, and being comfortable in their environment.

The deficiencies noted during the monitoring review were related to Certified Foster Homes documentation issues; a few physical plant deficiencies; documentation issues in the areas of Needs and Services Plans (NSPs); and Education and Workforce Readiness. Also noted, three children reported that bed linens were not changed on a regular basis. Two children accused their foster mother of favoritism. Further, there was no documentation in the reviewed staff files of initial training.

Based on our review, the aforementioned deficiencies revealed the need for more thorough documentation. Additionally, routine monitoring of the files by supervisory staff would appear to eliminate the documentation issues identified.

In conclusion, Fred Jefferson was receptive to implementing some systematic changes to improve their compliance with regulations and the contract terms. The Administrator agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

NOTABLE FINDINGS

The following are the notable findings of our review:

- Of the four certified foster parents' files reviewed, one home study had not been completed prior to the initial certification of the foster parent and the case files did not contain documentation of contact with the references. In addition, there was no documentation of current CPR/First-Aid certificates for two adults residing in two certified foster homes. The Administrator stated the Agency now has a certification analyst to ensure that mandated guidelines are followed.

- Of the four certified foster homes visited, one backyard had a large mound of recyclables and several stray cats. The stray cats could pose a health risk should a child be bitten or scratched. The certified foster parent indicated the cats belonged to a neighbor but she would remove them from her yard. In another home, the garage floor was covered with piles of clothing, the carpet was dirty and there was clutter in the living room and water damage to the kitchen ceiling. In the backyard, there were large amounts of debris and recyclables. The certified foster mother stated that there was clothing in the garage because she had emptied a storage unit. The OHCMD monitor brought these situations to the attention of the Administrator. The Administrator reported that the Agency Social Workers would ensure the recyclables were removed on a monthly basis and weekly visits would be made to ensure the stray cats were no longer present. Further, the Administrator reported the home with the garage full of clothing was placed on inactive status after the certified foster parent was evicted from the residence and the children were replaced. She stated Agency Social Workers will now perform home evaluations on a quarterly basis, which will include inspections of backyards and garages.

- Of the four certified foster homes reviewed, one home did not have access to a working computer. The Administrator stated the Agency would ensure the children have access to a computer in the certified home or within the community.

- Of the 12 placed children's files reviewed, there was no documentation indicating that three children were progressing toward meeting the NSP goals; three children were not included in the development of their NSPs; three initial NSPs were not timely or comprehensive and did not include the child; and six updated NSPs were not comprehensive as there was no documentation of the children's progress in school or therapy. We also noted that Fred Jefferson Social Workers did not document monthly contacts with the DCFS Children's Social Workers (CSW). The Administrator stated Agency Social Worker Supervisors will now thoroughly review the NSPs to ensure all needed information is documented within the NSPs and Agency Social Workers have been trained to

request the children's input when developing the NSPs. The Agency has developed a form that each child will sign indicating they participated in the development of their NSP with their Agency Social Worker. Additionally, Fred Jefferson representatives attended the NSP training conducted by OHCMD in January 2012. OHCMD will conduct the next Contract Compliance Review in August 2012 to verify if the Agency has improved its development and documentation of NSPs.

- The Agency was not meeting educational goals for three children as three children were doing poorly in school and services were not being provided. In addition, three children's academic performance had not increased since their placement and current copies of report cards were not maintained in four children's case files. The Administrator reported Agency Social Workers will now refer children to community resources to assist them in reaching educational goals and the Agency is utilizing local school districts to provide tutoring on a bi-weekly basis. The Agency representative stated Social Worker Assistants will now submit requests for copies of current transcripts and progress reports at the end of each school semester.

- Of the six children interviewed, three children reported that they did not change their bed linens on a regular basis. Two children reported there were no rules in the certified foster home and the certified foster mother shows favoritism; complains about the water bill, limits their showers and restricts the use of the washer and dryer. The Administrator stated that she met with the certified foster parent to review the children's personal rights. Further, the Agency Social Worker met with the children and certified foster parent to develop and set appropriate rules for the home.

- Of the five staff files reviewed, the staff members had no documentation of required initial training in their files. The Administrator stated an orientation checklist including a list of all trainings completed by staff has been developed and will be maintained in each employee's file.

The detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held August 30, 2011.

In attendance:

Niquelle Burks Administrator, Fred Jefferson FFA and Greta F. Walters, Monitor, DCFS OHCMD.

Highlights:

The Administrator stated she agreed with the findings and the Agency would make corrections to improve its compliance with regulations and the County contract.

Fred Jefferson submitted a timely approved written CAP, which addressed each recommendation noted in this compliance report. The approved CAP is attached.

We will assess for full implementation of recommendations during our next monitoring review.

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

PLB:RRS:KR:
EAH:NF:gfw

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Public Information Office
Audit Committee
Cecelia Jefferson-Freeman, Executive Director, Fred Jefferson Memorial FFA
Jean Chen, Regional Manager, Community Care Licensing

FRED JEFFERSON MEMORIAL FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

Los Angeles County
152 West Walnut Street Suite 150
Gardena, CA 90248
License Number: 197805297

Riverside County
12981 Perris Blvd. Suite 208
Moreno Valley, CA 92553
License Number: 336408474

San Bernardino County
14606 Main Street, #A
Hesperia, CA 92345
License Number: 366423518

	Contract Compliance Monitoring Review	**Findings: June 2011**
I	**Licensure/Contract Requirements** (6 Elements) 1. Timely Notification for Child's Relocation 2. SIRs Documented and Cross-Reported 3. Runaway Procedures 4. Community Care Licensing Citations, Out-of Home Care Management Division Reports on Safety and Physical Deficiencies 5. If Applicable, FFA Ensures Complete Required Whole Foster Family Home Training 6. FFA pays Certified Foster Parents Whole Foster Family Home Payments	Full Compliance (ALL)
II	**Certified Foster Homes** (13 Elements) 1. Home Study Prior to Certification 2. Contact with References/Including Check with OHCMD 3. Safety Inspection Prior to Certification 4. Timely DOJ, FBI, CACI 5. Health Screening Prior to Certification 6. Required Training Prior to Certification 7. Current Certificate of Approval on File Including Capacity 8. Home Inspection/Evaluations for Re-certification 9. Completed Training Hours for Re-certification 10. CPR/First-Aid/Water Safety Certificates 11. CDL/Auto Insurance 12. Other Adults: DOJ/FBI/CACI/Other Required Docs 13. Transportation	1. Needs Improvement 2. Needs Improvement 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Needs Improvement 13. Full Compliance

III	**Facility and Environment** (8 Elements)	
	1. Exterior Well Maintained	1. Needs Improvement
	2. Common Areas Maintained	2. Needs Improvement
	3. Children's Bedrooms/Interior Maintained	3. Full Compliance
	4. Sufficient Recreational Equipment	4. Full Compliance
	5. Sufficient Educational Resources	5. Needs Improvement
	6. Adequate Perishable and Non Perishable Food	6. Full Compliance
	7. Disaster Drills Conducted	7. Full Compliance
	8. Allowance Log	8. Full Compliance
IV	**Maintenance of Required Documentation and Service Delivery** (11 Elements)	
	1. DCFS CSW Authorization to Implement NSPs	1. Full Compliance
	2. Children's Participation in the Development of NSPs	2. Needs Improvement
	3. NSPs Implemented and Discussed with Foster Parents	3. Full Compliance
	4. Children's Progress Towards Meeting Goals	4. Needs Improvement
	5. Timely Developed Initial NSPs with Child	5. Full Compliance
	6. Timely Comprehensive Initial NSPs with Child	6. Needs Improvement
	7. Therapeutic Services Received	7. Full Compliance
	8. Recommended Assessments/Evaluations Implemented	8. Full Compliance
	9. DCFS CSWs Monthly Contacts Documented	9. Needs Improvement
	10. Timely Developed Updated NSPs with Child	10. Full Compliance
	11. Timely Comprehensive Updated NSPs with Child	11. Needs Improvement
V	**Education and Workforce Readiness** (7 Elements)	
	1. Children Enrolled in School Within Three Days	1. Full Compliance
	2. Children Attending School as Required	2. Full Compliance
	3. Agency Facilitates Child's Educational Goals	3. Needs Improvement
	4. Child's Academic and/or Attendance Increase	4. Needs Improvement
	5. Current IEPs Maintained	5. Full Compliance
	6. Current Report Cards Maintained	6. Needs Improvement
	7. Agency Facilitates Child's Participation in YDS/Equivalent/Vocational Program	7. Full Compliance

VI	**Health and Medical Needs** (6 Elements) 1. Initial Medical Examinations Conducted 2. Initial Medical Examinations Timely 3. Follow-up Medical Examinations Timely 4. Initial Dental Examinations Conducted 5. Initial Dental Examinations Timely 6. Follow-up Dental Examinations Timely	Full Compliance (ALL)
VII	**Psychotropic Medications** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	Full Compliance (ALL)
VIII	**Personal Rights** (13 Elements) 1. Children Informed of Foster Home's Policies and Procedures 2. Children Feel Safe 3. Satisfaction with Meals and Snacks 4. Foster Parents Treatment of Children with Respect and Dignity 5. Appropriate Rewards and Discipline System 6. Children Allowed Private Visits, Calls and Correspondence 7. Children Free to Attend Religious Services/Activities 8. Reasonable Chores 9. Children Informed About Psychotropic Medication 10. Children Aware of Right to Refuse Psychotropic Medication 11. Children Informed About Voluntary Refusal of Medical and Dental Care 12. Children Participation in At-Home and School Activities 13. Children Participation in Extra-Curricular Activities	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Needs Improvement 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Not Applicable 10. Not Applicable 11. Full Compliance 12. Full Compliance 13. Full Compliance

IX	**Personal Needs/Survival and Economic Well-being** (8 Elements) 1. Clothing Allowance 2. On-going Clothing Inventories of Adequate Quantity 3. On-going Clothing Inventories of Adequate Quality 4. Involvement in Selection of Clothing 5. Provision of Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance 8. Encouragement and Assistance with Life Book	Full Compliance (ALL)
X	**Discharged Children** (3 Elements) 1. Stabilization of Placement Prior to Discharge 2. Discharge Summary Completed 3. Child Completed High School	1. Full Compliance 2. Full Compliance 3. Not Applicable
XI	**Personnel Records** (14 Elements) 1. DOJ Timely Submitted 2. FBI Timely Submitted (After January 1, 2008) 3. CACIs Timely Submitted 4. Signed Criminal Background Statement Timely 5. Education/Experience Requirement 6. Employee Health-Screening Timely 7. Valid Driver's License 8. Signed Copies of FFA Policies and Procedures 9. Initial Training Documentation 10. One-hour Training of Child Abuse Reporting 11. CPR Training Documentation 12. First-Aid Training Documentation 13. On-going Training Documentation 14. Social Workers Appropriate Case Ratio	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Needs Improvement 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance 14. Full Compliance

FRED JEFFERSON MEMORIAL HOME FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW

Los Angeles County
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License Number: 366423518

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the June 2011 monitoring review.

CONTRACTUAL COMPLIANCE

Based on our review, Fred Jefferson was in full compliance with five of 11 sections of our contract compliance review: Licensure/Contract Requirements; Health and Medical Needs; Psychotropic Medication; Personal Needs/Survival and Economic Well-Being; and Discharged Children. The following report details the results of our review.

CERTIFIED FOSTER HOMES

Based on our review of four certified foster parents' case files and/or documentation from the provider, Fred Jefferson FFA was in compliance with 10 of 13 elements reviewed in the area of Certified Foster Homes.

We noted that the home study was not completed prior to initial certification for one certified foster parent. The Administrator stated the incident occurred during the former administrator's tenure and she will now ensure home studies are performed in a timely manner. Further, case files did not contain documentation of contacts with references prior to certification. In addition, there was no documentation of current CPR/First-Aid certificates for two adults residing in two certified foster homes. Subsequent to the review, the FFA provided OHCMD with current copies of CPR/First-Aid certificates. The Administrator stated the Agency now has a certification analyst to ensure that mandated guidelines are now followed.

Recommendations:

Fred Jefferson FFA's management shall ensure that:

1. Home Studies are completed before certification of all foster parents.

2. Contact be made with all references before certification.

3. Documentation of participation in CPR/First-Aid by all adults residing in certified foster homes is maintained in case files.

FACILITY AND ENVIRONMENT

Based on our review of four certified foster parents' homes, Fred Jefferson was in full compliance with five of eight elements reviewed in the area of Facility and Environment.

We noted in one backyard, there was a large mound of recyclables and several stray cats in the yard. The stray cats could pose a health risk should a child be bitten or scratched. The certified foster parent indicated the cats belonged to a neighbor but she would remove them from her yard. In another home, the garage floor was covered with piles of clothing, the carpet was dirty; there was clutter in the living room and water damage to the kitchen ceiling. The certified foster mother stated the clothing in the garage was there because she emptied a storage unit. The OHCMD monitor brought these situations to the attention of the Administrator. The Administrator reported the Agency Social Workers would ensure that the recyclables were removed on a monthly basis and weekly visits would be made to ensure the stray cats were not present. Further, the Administrator reported the certified foster home with the garage full of clothing was placed on inactive status after the certified foster parent had been evicted from the residence and the children were replaced. The Administrator further stated agency Social Workers will now perform home evaluations on a quarterly basis which will include inspections of backyards and garages.

One home did not have access to a working computer. The Administrator stated the Agency would ensure children have access to a computer in the certified home or within the community.

Recommendations:

Fred Jefferson FFA's management shall ensure that:

4. The exteriors of the certified foster homes are maintained.

5. The common areas of the certified foster homes are maintained.

6. Children have access to a working computer.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of 12 children's case files and/or documentation from the provider, Fred Jefferson was in full compliance with six of 11 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery. We noted there was no documentation that three children were progressing toward meeting their NSP goals; three children were not included in the development of their NSPs; three initial NSPs

were not timely or comprehensive and did not include the child; and six updated NSPs were not comprehensive as there was no documentation of the children's progress in school or therapy.

We also noted that Fred Jefferson Social Workers did not document monthly contacts with the DCFS CSWs.

The Administrator stated the Agency Social Worker Supervisors will now thoroughly review the NSPs to ensure that all needed information is documented within the NSPs and that Agency's Social Workers have been trained to request the children's input when developing the NSPs. The Agency has developed a form that each child will sign indicating they participated in the development of their NSP with their Agency Social Workers. Additionally, Fred Jefferson representatives attended NSP training conducted by OHCMD in January 2012. OHCMD will conduct the next Contract Compliance Review in August 2012 to verify if the Agency has improved its NSPs.

Recommendations:

Fred Jefferson's management shall ensure that:

7. The children are included in the development of the NSPs.

8. Children are assisted with progressing toward meeting NSP goals and that documentation of efforts is maintained.

9. Initial NSPs are timely.

10. Initial NSPs are comprehensive and include all elements.

11. Updated NSPs are comprehensive and include all elements.

12. Monthly contact with the DCFS CSWs is documented in the NSPs.

EDUCATION AND WORKFORCE READINESS

Based on our review of 12 children's case files and/or documentation from the provider, Fred Jefferson was in full compliance with four of seven elements reviewed in the area of Education and Workforce Readiness.

We noted that the Agency was not meeting educational goals for three children. Three children were doing poorly in school and services were not provided. Three children's academic performance had not increased since placement and current copies of report cards were not maintained in four children's case files. The Administrator reported Agency Social Workers will now refer children to community resources to assist them in reaching educational goals and the Agency is utilizing local school districts to provide tutoring on a bi-weekly basis. The Agency representative stated Social Worker

Assistants will now submit requests for copies of current transcripts and progress reports at the end of each school semester.

Recommendations:

Fred Jefferson's management shall ensure that:

13. Documented efforts are maintained in assisting children to meet educational goals.

14. Documented efforts are maintained in assisting children to increase academic performance.

15. Current copies of the children's report cards are maintained.

PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

Based on our review of 12 children's case files and/or documentation from the provider, Fred Jefferson was in full compliance with 12 of 13 elements reviewed in the area of Personal Rights and Social/Emotional Well-Being.

Three interviewed children reported their bed linens were not changed on a regular basis. Two children reported there were no rules in the certified foster home and the certified foster mother shows favoritism; complains about the water bill, limits their showers and restricts use of the washer and dryer. The Administrator stated she met with the certified foster parent to review the children's personal rights. Further, the Agency's Social Worker met with the children and certified foster parent to develop and set appropriate rules for the home.

Recommendation:

Fred Jefferson's management shall ensure that:

16. Children are treated with respect and dignity.

PERSONNEL RECORDS

Based on our review five staff personnel files, Fred Jefferson FFA fully complied with 13 of 14 elements in the area of Personnel Records.

We noted staff members had no documentation of required initial training in their files. The Administrator stated an orientation checklist including a list of staff completion for all trainings has been developed and will be maintained in each employee's file.

Recommendation:

Fred Jefferson management shall ensure that:

17. All staff members have completed training as required per Title 22 Regulations and the FFA's program statement.

PRIOR YEAR FOLLOW-UP FROM THE AUDITOR-CONTROLLER'S CONTRACT REVIEW REPORT

Objective

Determine the status of the recommendations reported in the A-C's prior monitoring review.

Verification

We verified whether the outstanding recommendations from the last Auditor-Controller's (A-C) contract review report issued January 28, 2010, were implemented.

Results

The A-C's prior monitoring report contained 19 outstanding findings. The A-C completed their review during September 2008. The report indicated the Agency did not always ensure that foster homes adequately secured cleaning solutions; had operable smoke detectors; have written disaster plans; disaster drills were conducted with children at the time of placement and at least every six months thereafter; that foster homes were maintained in accordance with Title 22 Regulations; and that foster parent certification files contained documentation of criminal/child abuse clearance for one adult that frequently resided in the foster home. Two homes were not assessed by the agency to determine the foster parents' ability to effectively care for more than two children prior to their placement in the home. Recertification for one foster home was past due. There was no documentation in case files of the children taking psychotropic medications and that the children were seen by the prescribing physicians. Two children did not have timely initial medical examinations. Three children did not have timely initial dental examinations. In addition, the report indicated that the Agency did not ensure NSPs were comprehensive and included specific, measurable and time-limited goals or obtain approval of the DCFS CSWs to implement the NSPs. There was no documentation that the children or the foster parents had participated in the development of the NSPs or dates of contact with the DCFS CSWs. The children and the DCFS CSWs were not provided with a comprehensive overview of the Agency's policies and procedures. There was no documentation that the Agency Social Workers were making visits to the children as required. One initial Quarterly Report was not timely. There was no documentation that five of the Quarterly Reports had been sent to the DCFS CSWs in a timely manner. One Quarterly Report did include the child's Emancipation Preparation Checklist for children 14 years of age and older. Eighteen of the Termination Reports did not contain a closing summary.

As a result of failure to fully implement the recommendations, Fred Jefferson was placed on Hold/Do-Not-Refer status. The Do-Not-Refer status was subsequently lifted as there were no concerns that rose to the level of abuse/neglect and Fred Jefferson FFA had begun to implement systemic improvements to the Agency. Another follow-up was done in August 2011, at which time OHCMD noted Fred Jefferson Memorial FFA had shown improvement in the implementation of their CAP.

Based on our follow-up of these recommendations, Fred Jefferson fully implemented 15 of the 19 outstanding recommendations from the A-C's contract review on January 28, 2010. Further corrective action was requested to address these findings, as Fred Jefferson did not fully maintain their CAP. OHCMD will conduct the next Contract Compliance Review in August 2012.

Fred Jefferson management shall ensure that:

18. They implement the four outstanding recommendations from the January 28, 2010 monitoring report, which are noted in this report as Recommendations 7, 10, 11, and 12 as to the NSPs.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of Fred Jefferson was posted on March 6, 2007. The A-C questioned a $358,606 loan of program funds made to Freeman Enrichment Center; a private school operated by the Agency's management and identified $8,889 in unallowable costs. The A-C recommended that DCFS resolve the questioned costs and if appropriate, collect all disallowed amounts. Also noted, DCFS is to ensure that Fred Jefferson management take appropriate corrective action to address the recommendations in the A-C's report and monitor to ensure the corrective actions result in permanent changes. Fred Jefferson submitted a fiscal CAP and it has been monitored by DCFS Fiscal Monitoring Section. DCFS Fiscal Monitoring Section confirmed that the disallowed amount of $8,889 was on a payment schedule and was collected; and the loan of $358,606 has been paid fully and confirmation documents of the payments are in file with DCFS.

Fred Jefferson Memorial Homes For Boys
152 West Walnut Street Suite #150
Gardena, Ca 90248

Phone # (310) 763-1660 Fax # (310) 763-0357

February 14, 2012

Attention: Department of Children and Family Services
Out of Home Care Management Division
Gretta Walters
9320 Telestar Avenue Suite #216
El Monte, CA 91731

From: Niquelle Burks, MA
Administrator

Regarding: Audit Findings Completed August 31, 2011

Fred Jefferson FFA has provided a Corrective Action Plan to the compliance review conducted July 2011.

II. Certified Foster Homes

Finding
During the audit it was noted that a certified parent was certified prior to the completion of the home study.

Action Taken
The FFA has adopted the mandated guidelines for certifying new homes which is the SAFE adoption home study. This procedure will ensure that the agency does not certify a home prior to the completion of the home study. The Certification Analyst will be responsible for ensuring the new procedure is followed.

Finding
There was no documentation in two certified parent's files that other adults in the home had current CPR/First Aid Certificates.

Action Taken
Both parties now have current CPR/ First Aid certificates which were provided to Out of Home Care Management Division.

Findings

It was noted that the foster parent case records did not include contacts with references.

Action Taken

The certification analyst has contacted all references for each foster parent and has documented it on the form which is located in each foster parent's file. The certification analyst will continue to check references for each prospective parent.

III. Facility Environment

Finding

During the audit the monitor found that there were stray cats and large amounts of recyclables on the patio of a certified home.

Action Taken

The FFA social worker will ensure that the certified parent's recyclables are removed from the home at least once per month. The FFA social worker will also ensure that there are no cats present at the weekly visits to the certified home.

Finding

In the home of one certified parent it was documented that there were piles of clothing covering the garage floor, debris in the yard, dirty carpet, clutter in the living room and water damage in the kitchen ceiling.

Action Taken

This home has been placed on an inactive status due to their eviction of this house. All children were removed from their care immediately. The FFA will ensure that the home is suitable for children prior to placing.

The Social Worker Supervisors will ensure that each social worker performs a home evaluation on a quarterly basis. Included in the home evaluation will be an inspection of the backyard and garage space.

Finding

In one certified home the children did not have access to a working computer.

Action Taken

The agency social workers will ensure that each child placed in our certified homes are provided access to a working computer. Access may be gained in the certified home or within the local community.

IV. Maintenance of Required Documentation and Service Delivery

Finding

During the audit it was founded that progress for children were not documented as well as proper documentation regarding children wraparound services, therapy and psychological health.

Action Taken

The FFA Social Worker Supervisor will ensure that progress for each minor is documented on the NSP/ Quarterly Reports as well as the Case Notes. Documentation regarding psychological appointments will be documented in the NSP/ Quarterly as well. Each social worker will remain responsible for the documentation of all children's progress and will report it accordingly.

Finding

It was founded that contact to DCFS CSW's was not properly documented.

Action Taken

The agency was provided with the most recent NSP/ Quarterly to properly document this contact. The Agency Administrator distributed to all Agency Social Workers immediately. The Agency Social Worker Supervisor will review all NSP's/ Quarterlies to ensure the proper forms are being used and the correct documentation has been implemented.

Findings

It was founded that the treatment team did not develop comprehensive initial Needs and Services Plans with the child.

Action Taken

Each social worker has been trained to request the child's assistance when developing the NSP. Each child will sign a document stating that they participated with their social worker to develop the document. Attached you will find the document that each child will sign.

Finding

It was founded that the treatment team did not develop comprehensive updated Needs and Service Plans with the child.

Action Taken

Each social worker has been trained to request the child's assistance when developing the NSP. Each child will sign a document stating that they participated with their social worker to develop the document. Attached you will find the document that each child will sign.

V. Education and Workforce Readiness

Finding

It was founded the agency did not facilitate in meeting the child's educational goals.

Action Taken

The agency's social workers will begin to refer children to various resources within the community in which the child lives to better assist in reaching the educational goals. The agency social workers will also look into resources offered within the school in which the child attends to assist with meeting these goals as well. The social worker will document all efforts made to increase the likelihood of meeting the educational goals identified within the NSP.

Finding

It was founded that based on the services provided by the facility the child's academic performance did not increase.

Action Taken

The Agency has begun using the services of Los Angeles Unified School District to offer tutoring services at the Agency two days per week. The tutor is available to assist the children in danger of failing on a weekly basis. The social workers will also begin to document all necessary improvements on the child's NSP. The social worker supervisors will ensure that this will happen.

Finding

During the audit it was founded that there were not current copies of the children's report cards or progress reports maintained in the children's files.

Action Taken

Agency Social Worker Assistants have been trained to submit a request for current copies of transcripts and or report cards at the end of each school semester for every school age child place within the agency. Each request will be placed in the child's file along with the fax confirmation. The administrator will ensure that this request is submitted each semester. A copy of the request form is attached.

VIII. Personal Rights and Social/Emotional Well-Being

Findings

It was also found that the children in a certified home do not change their linen on the beds on a regular basis.

Action Taken

The FFA Social Workers for all certified home will ensure that the children are properly changing the linen on the beds. The Social Worker will also complete random inspections of the linen in this home.

Findings

It was founded that in a certified home two children reported that there are no rules for that home. The children mentioned that the certified parent shows favoritism, complains about the water bill, limits showers and restricts the use of the washer and dryer.

Action Taken

The FFA Social Worker for this home has met with all the children and the certified parent. Together rules were implemented and set for the home. The certified parent and Social Worker will ensure that all rules are followed. Within the rules the use of the shower is addressed as well. In all of our certified homes each child will continue to have access to the bathroom to shower daily. The Social Worker will ensure that the certified parent continues to allow the children access to the washer and dryer. In the event that the appliances need repair the certified parent will transport all the children to the Laundromat and provide the funds to complete the laundry in a timely manner. In August 2011 the Administrator as well as the Social Worker Supervisor met with the certified parent to review important policy and procedure protocol regarding the children's personal rights.

X. Personnel Records

Findings

It was founded during the audit that the employees did not receive the required initial training.

Action Taken

The Human Resource Manager and the Administrator have developed a training manual to train all staff on their position. An orientation check list was also developed to verify that each person has participated in the initial training. Attached you will find the verification of training sheet. The Human Resource Manager will ensure that a copy of this form is placed in each employee's file.

If further information is needed regarding the items addressed above please feel free to contact me. I can be reached at (310) 763-1660 ext 118 or (714) 767-5494.

Respectfully submitted,

Niquelle Burks

Niquelle Burks
Administrator

Fred Jefferson Memorial Foster Family Agency
152 West Walnut Street Suite #150
Gardena, CA 90248
Phone Number (310) 763-1660 Fax Number (310) 763-0357

Transcript Request

Attention: Washington High School
(323) 754-3517

From: Monique Burks, Social Worker Assistant

Regarding:

Please fax a copy of the above mentioned minor's most recent report card, unofficial transcript and current IEP (if applicable) to me at (310) 763-0357. If further information is needed you may reach me at (310) 763-1660.

WHERE CHILDREN COME FIRST!!!

Fred Jefferson Memorial Foster Family Agency
152 West Walnut Street Suite #150
Gardena, CA 90248

Phone # (310) 763-1660 *Fax # (310) 763-0357*

APPRAISAL NEEDS AND SERVICE PLAN AGREEMENT

We_____ and _____, were
Name of Child Name of Foster Parent

part of the development of the Appraisal Needs and Service Plan. We fully understand our responsibilities in implementing this plan as indicated by our signatures below.

_____ _____
Signature of child Date

_____ _____
Signature of Foster Parent Date

Fred Jefferson Memorial Homes
FOSTER FAMILY AGENCY

(310) 763-1660 fax(310) 763-0357

ORIENTATION/TRAINING

TRAINING	DATE COMPLETED
HOUSE RULES	_____
CHILDREN RIGHTS	_____
CORPORAL PUNISHEMNT	_____
CHILD ABUSE DETECTION/REPORTING	_____
CRISIS INTERVENTION	_____
CASE NOTES	_____
HOME EVALUATIONS	_____
FIRE DRILLS	_____
QUARTERLY REPORTS/NSP'S	_____
RESIDENT BACKGROUND	_____
MEDICAL/DENTAL LOGS	_____

_____ _____

AGENCY SOCIAL WORKER DATE

_____ _____

SUPERVISOR SIGNATURE DATE