



County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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November 16, 2012

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

From: Philip L. Browning
Director

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**SOUTH BAY BRIGHT FUTURE FOSTER FAMILY AGENCY CONTRACT
COMPLIANCE MONITORING REVIEW**

The Out-of-Home Care Management Division (OHCMD) conducted a review of South Bay Bright Future Foster Family Agency (FFA) in April 2012, at which time the Agency had 47 Los Angeles County DCFS placed children in 29 certified homes. The placed children's overall average length of placement was 23 months, and the average age was nine.

South Bay Bright Future FFA is located in the Fourth Supervisorial District and provides services to Los Angeles County DCFS foster youth. According to South Bay Bright Future FFA's program statement, its stated goal is "to ensure the safety of each child, support and strengthen biological/certified families and promote the healthy development of all children." South Bay Bright Future FFA is licensed to serve children ranging from birth through 17.

For the purpose of this review, five children were interviewed as two children were non-verbal. All seven sampled children's case files were reviewed. Three certified foster parents' files were reviewed; five discharged children's files were reviewed; and five staff files were reviewed for compliance with the Title 22 Regulations and County contract requirements.

"To Enrich Lives Through Effective and Caring Service"

Two placed children were prescribed psychotropic medication. We reviewed their case files to assess 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 South Bay Bright Future FFA'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, seven placed children's case files, three certified foster parent files, and five personnel files. Three certified foster homes were visited and the foster parents were interviewed to assess the quality of care and supervision provided to children and five placed children 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

During our review, interviewed children reported feeling safe, having been provided with good care and appropriate services, being comfortable in their environments and treated with respect and dignity.

The deficiencies noted during the monitoring review were in the areas of Licensure/Contract Requirements, Certified Homes, Maintenance of Required Documentation and Service Delivery, Health and Medical Needs, Personal Rights and Social Emotional Well-Being, Personal Needs/Survival and Economic Well-Being and Personnel records.

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. Overall, South Bay Bright Future FFA was providing good care and services to all placed children and support to the certified foster parents, which is evident in the relationships formed with the children, Agency staff, and certified foster parents.

In conclusion, South Bay Bright Future FFA was receptive to implementing some systemic changes to improve their compliance with regulations and the County contract requirements. The Administrator agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

NOTABLE FINDINGS

The following were the notable findings of our review:

- South Bay Bright Future FFA did not consistently submit Special Incident Reports (SIRs) nor submit them to OHCMD and appropriate parties timely. This matter had previously been addressed during OHCMD regular SIR monitoring and the FFA Administrator had submitted a CAP whereby the foster parents, Agency social workers and supervising social worker would be retrained on the SIR reporting protocol. During the monitoring review, it was discovered that an incident requiring submission of an SIR was not reported to OHCMD and other appropriate parties. Although this incident had occurred prior to the SIR retraining, the OHCMD monitor reiterated the importance of SIRs protocol compliance. The FFA Administrator stated that the Agency staff will ensure that the protocol is followed. It was also noted that CCL had also cited South Bay Bright Future FFA for its failure to submit SIRs to CCL in a timely manner.
- South Bay Bright Future FFA had several CCL citations for physical plant deficiencies and safety concerns in their certified homes. In one home, the foster parent's adult son was residing in the home with no criminal record clearance. Further, her garage was used as a living area; three rooms in the home might not have a permit and three children were sharing a bedroom without CCL exception. In addition, the home was also cited for inappropriate discipline of a foster child by the foster parent. The Agency's representative reported that the deficiencies had been corrected and had submitted a Proof of Correction (POC) to CCL.

Another home was cited because the foster parent's designated caregiver had no criminal clearance. Further, the home had dirty carpets, an unkempt and unsanitary backyard and blocked window with security bars. The Agency's representative submitted a POC to CCL with proof that the deficiencies had been corrected and that the "designated caregiver" did not reside in the foster home as originally reported. However, he would not be designated as the children's caregiver until his criminal clearance was received. OHCMD placed this home on "Indefinite Hold." CCL also cited two other homes for having a portable swimming pool accessible to children without a current water safety certificate and for having potentially hazardous items and debris around the outside of the house, respectively. The Agency's representative has submitted a Proof of Correction (POC) to CCL and reported that the deficiencies had been corrected.

Lastly, in one of the homes, the foster parent locked out foster children from her home when she was away. She also failed to intervene when her adult daughter emotionally and physically harmed a placed child as well as when a placed child was threatened by her schoolmate. Further, she failed to provide close supervision and a safe home environment to a suicidal child resulting in the child making several suicide attempts. Subsequently, CCL revoked her certificate. OHCMD placed this home on "Indefinite Hold."

- Of the three certified foster parent's files reviewed, one was certified in 2009, and had only one reference on file prior to certification. During the review, the FFA

obtained an additional letter of reference. The FFA Administrator stated that the Agency would ensure that references would be obtained prior to certification and had developed a check list to be used as a tool to verify that all references were requested and received.

- Of the three certified foster parent's files reviewed, one was certified in 2009, and did not have timely initial health screening on file. It was noted that a health screening found in her file was dated March 2012, which was three and a half years late. The FFA Administrator stated that the Agency is developing a tracking method to ensure initial health screenings are conducted prior to certification.
- None of the three certified foster parent files contained safety inspections and re-evaluations prior to annual recertification. The FFA Administrator stated that the safety inspections/re-evaluations of certified homes were conducted verbally. The Agency has since developed a protocol for foster parent re-certification and will ensure required written inspections/re-evaluations are maintained in the foster parents' files.
- One certified foster parent's husband, noted as a substitute caregiver did not have health screening/TB test, California Driver's License, CPR and First-Aid certificate in the file. The FFA staff provided verification that a health screening and TB test were obtained during the review and an affidavit was signed by the foster father indicating that he will not babysit or drive the children until he obtains his CPR/First-Aid certificates and verification of a current CDL. Following the review, the FFA Administrator provided the OHCMD the required documents.

For one certified foster parent, her significant other and adult son had no verification of TB tests, CDL's and CPR/First-Aid certificates. The FFA Administrator has provided OHCMD a copy of the foster parent's significant other's car insurance and driver's license and is in the process of obtaining the TB tests. She stated that the foster parent's son does not drive the foster children.

Another certified foster parent had no verification of criminal clearances, health screening, CPR/First-Aid and CDL on two of her substitute caregivers. The FFA Administrator stated that one of the caregivers was not a routine caregiver and therefore, was exempted from the criminal clearance requirement under "Prudent Parent Standard." The FFA Administrator has since provided OHCMD proof of criminal clearance, CPR and First Aid training of the routine caregiver.

- Of the five children's Needs and Services Plans (NSPs) reviewed, one did not have CSW's authorization to implement the NSP in the case file. The FFA provided verification that the NSP has been sent to the CSW, during our review.
- Of the five children's NSPs, one child's initial NSP was not comprehensive. The FFA Administrator indicated that the social worker supervisor will utilize their

Quality Assurance tool and monitor the development of children's NSPs to ensure compliance with the NSP format.

- Of the seven children's NSPs reviewed, four children's updated NSPs were not comprehensive. Specifically, some goals were not specific, measurable and time limited. The FFA Administrator indicated that they will re-train the social workers on NSP development and the social worker supervisor will ensure compliance with the NSP format. The FFA staff had attended OHCMD NSP training in January 2012.
- Of the seven children reviewed, one did not have a timely initial medical examination. The FFA Administrator indicated that they would ensure all children's medical examinations are timely. Of the seven children reviewed, one did not have timely initial dental examination. The FFA Administrator indicated that they would ensure all children's dental examinations are timely.
- One youth taking psychotropic medication stated that he was not informed about his medications. The FFA representative stated that the youth had been taking medications prior to his placement at the South Bay Bright Future FFA certified home and was aware of what his medications are for. The Agency has developed a check list for their social workers to ensure that children taking psychotropic medication will be informed about their medications.
- One youth taking psychotropic medication stated that he was not aware of his right to refuse medication. As mentioned above, the youth has been taking medications prior to his placement at the South Bay Bright Future FFA certified home. The Agency has developed a check list for their social workers to ensure that children taking psychotropic medication will be informed about their rights to refuse their medications.
- One youth taking psychotropic medication stated that he was not aware of his right to reject voluntary medical, dental and psychiatric care. As mentioned above, the youth had been taking medications prior to his placement at the South Bay Bright Future FFA certified home. The Agency has developed a check list for their social workers to ensure that children taking will be informed about their rights to reject medications and their rights to reject voluntary medical, dental and psychiatric care.
- Of the seven children reviewed, none were encouraged or assisted in updating a Life book or photo album. The FFA Administrator stated that the Agency will develop a Life Book and they will be given to all placed children.
- Of the five personnel files reviewed, one staff's initial health screening was three years late. Per the FFA Administrator, they had been made aware of the delay in

the staff health screening, due to a previous CAP in 2004, and had corrected the deficiency.

- Of the five personnel files reviewed, one staff, hired in June 2008, had no documentation on file indicating that the staff reviewed and signed the FFA policies. During the review, the said staff completed the required documents. Of the five personnel files reviewed, one staff, hired in June 2008, had no documentation on file indicating that the staff completed the required initial training and emergency intervention training. During the review, the said staff completed the required training. The FFA Administrator stated that the Agency will ensure that all new staff will complete the required training.

A detailed report of our findings is attached.

EXIT CONFERENCE

The following are highlights from the Exit Conference held May 18, 2012.

In attendance:

Kathey Wilborn, Administrator of South Bay Bright Future FFA and Gladys Hidayat, Monitor, DCFS OHCMD.

Highlights:

The Administrator was in agreement with our findings and recommendations. South Bay Bright Future FFA submitted an approved written CAP, which addressed each recommendation noted in this compliance report. The approved CAP is attached.

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:gh

Attachments

- c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Public Information Office
Audit Committee
Kathey Wilborn, Administrator, South Bay Bright Future FFA
Angelica Lopez, Acting Regional Manager, Community Care Licensing

**SOUTH BAY BRIGHT FUTURE FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY**

**24404 Vermont Avenue. Suite 206
Harbor City, California 90710
License # 198201659**

	Contract Compliance Monitoring Review	Findings: April 2012
I	<p><u>Licensure/Contract Requirements</u> (6 Elements)</p> <ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 1. Full Compliance 2. Needs Improvement 3. Full Compliance 4. Needs Improvement 5. Full Compliance 6. Full Compliance
II	<p><u>Certified Foster Homes</u> (13 Elements)</p> <ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 1. Full compliance 2. Needs Improvement 3. Full Compliance 4. Full Compliance 5. Needs Improvement 6. Full Compliance 7. Full Compliance 8. Needs Improvement 9. Full Compliance 10. Full Compliance 11. Full Compliance 12. Needs Improvement 13. Full Compliance

<p>III</p>	<p><u>Facility and Environment</u> (8 Elements)</p> <ol style="list-style-type: none"> 1. Exterior Well Maintained 2. Common Areas Maintained 3. Children's Bedrooms/Interior Maintained 4. Sufficient Recreational Equipment 5. Sufficient Educational Resources 6. Adequate Perishable and Non Perishable Food 7. Disaster Drills Conducted 8. Allowance Logs 	<p>Full Compliance (ALL)</p>
<p>IV</p>	<p><u>Maintenance of Required Documentation and Service Delivery</u> (11 Elements)</p> <ol style="list-style-type: none"> 1. DCFS CSW Authorization to Implement NSPs 2. Children's Participation in the Development of NSPs 3. NSPs Implemented and Discussed with Foster Parents 4. Children's Progress Towards Meeting Goals 5. Timely Developed Initial NSPs with Child 6. Timely Comprehensive Initial NSPs with Child 7. Therapeutic Services Received 8. Recommended Assessments/Evaluations Implemented 9. DCFS CSWs Monthly Contacts Documented 10. Timely Developed Updated NSPs with Child 11. Timely Comprehensive Updated NSPs with Child 	<ol style="list-style-type: none"> 1. Needs Improvement 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full compliance 6. Needs Improvement 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Needs Improvement
<p>V</p>	<p><u>Education and Workforce Readiness</u> (7 Elements)</p> <ol style="list-style-type: none"> 1. Children Enrolled in School Within Three Days 2. Children Attended School as Required 3. Agency Facilitates Child's Educational Goals 4. Child's Academic and/or Attendance Increase 5. Current IEPs Maintained 6. Current Report Cards Maintained 7. Agency Facilitates Children's Participation in YDS/Equivalent/Vocational Programs 	<p>Full Compliance (ALL)</p>

VI	<p><u>Health and Medical Needs</u> (6 Elements)</p> <ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 1. Full Compliance 2. Needs Improvement 3. Full Compliance 4. Full Compliance 5. Needs Improvement 6. Full Compliance
VII	<p><u>Psychotropic Medications</u> (2 Elements)</p> <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 	<p>Full Compliance (ALL)</p>
VIII	<p><u>Personal Rights and Social Emotional Well-Being</u> (13 Elements)</p> <ol style="list-style-type: none"> 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, School, Community Activities 13. Children Participation in Extra-Curricular Activities 	<ol style="list-style-type: none"> 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. Need Improvement 10. Need Improvement 11. Need Improvement 12. Full Compliance 13. Full Compliance
IX	<p><u>Personal Needs/Survival and Economic Well-Being</u> (8 Elements)</p> <ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance

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	<ul style="list-style-type: none"> 5. Provision of Personal Care Items 6. Minimum Monetary Allowances 7. Management of Allowance 8. Encouragement and Assistance with Life Book 	<ul style="list-style-type: none"> 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Need Improvement
X	<p><u>Discharged Children</u> (3 Elements)</p> <ul style="list-style-type: none"> 1. Stabilization of Placement Prior to Discharge 2. Discharge Summary Completed 3. Child Completed High School 	<p>Full Compliance (ALL)</p>
XI	<p><u>Personnel Records</u> (14 Elements)</p> <ul style="list-style-type: none"> 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 	<ul style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full compliance 5. Full Compliance 6. Needs Improvement 7. Full Compliance 8. Needs Improvement 9. Needs Improvement 10. Full Compliance 11. Full Compliance 12. Full Compliance 13. Full Compliance 14. Full Compliance

**SOUTH BAY BRIGHT FUTURE FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW**

**24404 South Vermont Avenue, Suite 206
Harbor City, CA 90710
License # 198201659**

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the April 2012 monitoring review.

CONTRACTUAL COMPLIANCE

Based on the results of our compliance review, South Bay Bright Future Foster Family Agency (FFA) was in full compliance with four of 11 sections of our Contract Compliance Review: Facility and Environment; Education and Workforce Readiness; Psychotropic Medication; and Discharged Children. The following report details the results of our review.

LICENSURE/CONTRACT REQUIREMENTS

Based on our review of three certified foster parent files and/or documentation from the provider, South Bay Bright Future FFA was in full compliance with four of six elements reviewed in the area of Licensure/Contract Requirements.

Prior to the monitoring review, OHCMD had requested a Corrective Action Plan (CAP) from South Bay Bright Future FFA as they did not consistently submit Special Incident Reports (SIRs) to OHCMD and appropriate parties. During the monitoring review, it was discovered that an incident requiring submission of a SIR was not reported. Although this incident had occurred prior to the SIR retraining, the OHCMD monitor reiterated the importance of SIR protocol compliance. The FFA Administrator stated that the Agency staff will ensure that the SIR reporting protocol is followed. It was also noted that CCL had also cited South Bay Bright Future FFA for their failure to submit SIRs to CCL in a timely manner.

South Bay Bright Future FFA had several Community Care Licensing (CCL) citations for safety and physical plant deficiencies in their certified homes. In one home, the foster parent's adult son was residing in the home with no criminal record clearance. Further, her garage was used as a living area, three rooms in the home might not have a permit and three children were sharing a bedroom without CCL exception. In addition, the home was also cited for inappropriate discipline of a foster child by the foster parents.

Another home was cited because the foster parent's designated caregiver had no criminal clearance in file, the home had dirty carpets, was unkempt, had an unsanitary backyard and blocked window with security bars. The FFA Administrator reported to CCL that the "designated caregiver" did not reside at the foster home and would no longer be the children's caregiver until he has had his clearance. OHCMD placed this home on "Indefinite Hold."

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Two other homes were cited for having a portable swimming pool accessible to children without a current water safety certificate and for having potentially hazardous items and debris around the outside of the house respectively.

The Agency's representative submitted a Proof of Correction (POC) to CCL with proof that the deficiencies had been corrected.

Additionally, CCL revoked one of the certified homes because the foster parent locked out foster children from her home when she was away; her failure to intervene when her adult daughter emotionally and physically harmed a placed child; her failure to protect a foster child from potential harm when the child was threatened by her schoolmate and failure to provide close supervision and a safe home environment to a suicidal child resulting in the child making several suicide attempts. OHCMD has placed this home on "Indefinite Hold."

Recommendations:

South Bay Bright Future FFA's management shall ensure that:

- 1) All SIRs are reported to OHCMD and all appropriate parties timely.
- 2) FFA certified homes comply with CCL regulations concerning Children's Safety/Physical plant and other Licensure/Contract Requirements.

CERTIFIED FOSTER HOMES

Based on our review of three certified foster parents' case files and/or documentation from the provider, South Bay Bright Future FFA was in full compliance with nine of 13 elements reviewed in the area of Certified Foster Homes.

We noted that one foster parent who was certified in September 2009, only had one contact reference and during the review, an additional letter of reference was obtained. The FFA Administrator indicated that they would ensure that more than one reference would be contacted for each certified foster parent prior to certification.

We also noted that one foster parent who was certified in August 2008, had a timely TB test prior to certification; however, we did not find a timely health-screening in her file. We did find a current health-screening conducted in March 2012. The FFA Administrator indicated that they would ensure that all certified foster parents obtain timely health-screenings, to include TB tests, and that documentation is maintained in the files.

In addition, we also noted that all three certified foster parents reviewed did not have any Evaluations/Assessments prior to their annual recertification in their files. As per the FFA Administrator, all foster parents have routine safety inspections and the FFA staff reviews and verbally discusses the matter with the foster parents at the time of recertification as well as during their annual reviews; however, there was no documentation of the reviews. The FFA Administrator indicated that the FFA will implement an annual written

evaluation/assessment document and will ensure that written documentation is completed at the time of recertification and placed in files.

For one certified foster parent, who was certified without her spouse in August 2008, we did not have verification of a health-screening, TB test, CPR and First-Aid certificate, and CDL on file with the Agency. The FFA Administrator indicated that the foster mother was the designated stay-at-home parent and opted to become certified alone and her husband was an additional adult in the home. During the review, the FFA required the foster mother's husband to obtain the required documents, as per Title 22 regulations and until that time, the FFA obtained an affidavit indicating that he would not provide care and supervision to the children in the home. During the review, the FFA provided documentation that a TB test with negative results was obtained and the FFA Administrator indicated that she is closely monitoring the home to ensure the rest of the requirements were completed and that documentation was on file with the FFA. The FFA Administrator has since provided the OHCMD the required documents.

We noted that the significant other of one foster parent, certified in July 2009, whose clearances are on file with the Agency and is a routine visitor to the home, did not have a TB test nor verification of CPR/First-Aid training on file at the time of the review. The FFA Administrator has since provided OHCMD with a copy of his car insurance and driver's license. We also noted that the certified foster parent's adult son, who resided in the home, had his clearances on file; however, we did not find verification of his TB test, CPR/First-Aid, CDL and car insurance. The FFA Administrator stated that he does not drive the foster children. Further, the Administrator is in the process of obtaining other required documentation.

For a third foster parent, during the visit to the home, the certified foster parent stated that there were two other substitute caregivers for the home; however, we did not find the required clearances or CPR/First-Aid certificates on file for either and for one, we did not find a current California Driver's License (CDL) or car insurance on file. The FFA Administrator stated that one of the caregivers was not a routine caregiver and therefore, was exempted from the criminal clearance requirement under "Prudent Parent Standard." The FFA Administrator has since provided OHCMD the routine caregiver's proof of criminal clearance, CPR and First-Aid training.

Recommendations:

South Bay Bright Future FFA's management shall ensure that:

- 3) The FFA contacts the required number of references prior to certification and written verification is maintained in the certified parents' files.
- 4) All certified foster parents have required timely health-screenings and verification of TB tests on file with the FFA.

- 5) The FFA completes annual assessments/evaluations of all certified foster homes, prior to the annual re-certification and that documentation is maintained in the certified foster parent' files.
- 6) All other adults, such as frequent visitors and/or designated care providers for placed children have the required documents, including criminal clearances, timely completed TB tests, CPR/First-Aid certificates and when necessary, current CDLs on file with the Agency.

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Based on our review of seven placed children's files and/or documentation from the provider, South Bay Bright Future FFA was in full compliance with eight of the 11 elements reviewed in the area of Maintenance of Required Documentation and Service Delivery.

We noted that for one child, placed in November 2011, the initial NSP was not comprehensive and there was no verification that it was submitted to the CSW for a review. Further, we also noted that four children's updated NSPs did not have goals that were specific, measurable, and time limited. The FFA Administrator stated that the Agency social workers and supervisors will be retrained on NSP development and the social worker supervisor will utilize their Quality Assurance tool and monitor the development of children's NSPs to ensure compliance with the NSP format. The Representatives from the FFA also attended the NSP training conducted by OHCMD in January 2012.

Recommendations:

South Bay Bright Future FFA's management shall ensure that:

- 7) All children's NSPs are sent to the case-carrying Children's Social Workers (CSWs) for authorization to implement the plans and documentation is maintained in the children's files.
- 8) All initial children's NSPs are comprehensive.
- 9) All children's updated NSPs are comprehensive, including child specific, measurable, and time-framed goals.

HEALTH AND MEDICAL NEEDS

Based on our review of seven children's files and/or documentation from the provider, South Bay Bright Future FFA fully complied with four of six elements reviewed in the area of Health and Medical Needs.

For one foster youth, placed in November 2011, his initial medical examination was three months late and his initial dental examination was two months late. The FFA Administrator indicated that they would ensure all children's medical examinations are timely.

Recommendations:

South Bay Bright Future FFA's management shall ensure that:

- 10) All placed children's initial medical examinations are timely and documentation is maintained in the children's files.
- 11) All placed children's initial dental examinations are timely and documentation is maintained in the children's files.

PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

Based on our review of seven children's files and/or documentation from the provider, South Bay Bright Future FFA fully complied with 10 of 13 elements reviewed in the area of Personal Rights and Social/Emotional Well-Being.

One child taking psychotropic medication reported that he was not informed about his medications, was not aware of his right to refuse medication, nor was he aware of his right to reject voluntary medical, dental and psychiatric care. The FFA representative stated that the youth had been taking medications prior to his placement at the South Bay Bright Future FFA certified home. Following the review, the Agency will ensure that all children taking psychotropic medication will be informed about their medications and their right to refuse medication and reject voluntary medical, dental and psychiatric care.

South Bay Bright Future FFA's management shall ensure that:

12. Children are informed about their medications.
13. Children are informed of their right to refuse medication.
14. Children are made aware that they may reject voluntary medical, dental and psychiatric care.

PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

Based on our review of seven children's files and/or documentation from the provider, South Bay Bright Future FFA fully complied with seven of the eight elements reviewed in the area of Personal Needs/Survival and Economic Well-Being.

We noted that none of the interviewed children had a Life Book/Photo Album. The FFA representative stated that all children will be provided a Life Book/Photo Album.

South Bay Bright Future FFA's management shall ensure that:

15. All children are encouraged and assisted in creating and updating a Life Book/Photo Album.

PERSONNEL RECORDS

Based on our review of five staff files and or documentation from the provider, South Bay Bright Future FFA fully complied with 11 of the 14 elements reviewed in the area of Personnel Records.

We noted that one FFA staff hired in July 2001, had an initial health-screening on file dated February 2004. Per the Administrator, they had been made aware of the delay of the health- screening due to a previous CAP request in 2004, and had corrected the deficiency.

We also noted that another staff, hired in June 2008, had no documentation on file indicating that the staff reviewed and signed the FFA policies; completed the required initial training and completed the required emergency intervention training. During the review, the FFA Administrator provided verification that the FFA staff completed the above noted required documents and training.

Recommendations:

South Bay Bright Future FFA's management shall ensure that:

16. All employees' health screenings are completed within the required timeframe and documentation is maintained in the files.
17. All social work employees receive and sign the FFA's policies and procedures and documentation is maintained in the FFA personnel files.
18. All social work staff receive the required initial training upon hire and documentation is maintained in the FFA personnel files.

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

Objective

Determine the status of the recommendations reported in the A-C's prior compliance report.

Verification

We verified whether the outstanding recommendations from the last A-C's contract review report issued October 4, 2007, were implemented.

Results

The A-C's prior monitoring report contained nine outstanding recommendations. South Bay Bright Future FFA staff was to adequately monitor foster homes to ensure they complied with the County contract requirements and CDSS Title 22 regulations; that foster homes were well maintained with acceptable housekeeping and that children did not share bedrooms with adults; that foster homes had operable smoke detectors in the hallways leading to the children's bedrooms; that detergents and cleaning solutions were stored where they were inaccessible to children and that window safety devices were operable and not obstructed by furniture; that children taking psychotropic medication had current court authorizations for the administration of the medications and that the children were seen monthly by the prescribing physician; that NSPs and quarterly reports contained all the information required and that the CWSs approved in writing all NSPs; that children's case files contained all the information required and that children were visited the number of times required by the County contract and CDSS Title 22 regulations; that social workers received no less than 20 hours annual in-service training; that one outstanding recommendation from the Fiscal Year 2004-05 was implemented.

Based on our samples, South Bay Bright Future FFA fully implemented seven of nine outstanding recommendations from the A-C's October 4, 2007 report. Further corrective action was requested to address the remaining findings.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of the South Bay Bright Future FFA and Group Home was published on May 14, 2009. The review report states that A-C identified \$8,232 in unallowable costs and \$21,469 in unsupported/inadequately supported expenditures and to collect any disallowed amounts. Further, it was also noted that their Chief Executive Officer (CEO) who also served as Board President, owned three Group Home properties that were leased to the Agency. Further, the Agency provided a document indicating their administrative costs were allocated 36% to the Group Home program and 64% to the FFA program. However, the Agency did not have a formal cost allocation plan and did not provide supporting documentation showing how they determined the allocation percentages. In addition, the Agency did not maintain vehicle mileage logs and their fixed assets list did not identify the description and serial number of each fixed asset, nor did the Agency conduct an inventory of fixed asset at least once each year. Lastly, the Agency did not have the contractor's submitted invoices, written contract and 1099 for one of their contractors. South Bay Bright Future FFA submitted a fiscal CAP, which is monitored by DCFS Fiscal Monitoring Section.

On November 8, 2012, the DCFS Fiscal Monitoring Section reported that South Bay Bright Future FFA has returned the excess funds to DCFS and the Los Angeles County Treasurer and Tax Collector.



SOUTH BAY BRIGHT FUTURE, INC.

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June 18, 2012

DCFS-Out of Home Care Management Division

Attn: Nestor Figueroa, Manager

FAX: 626-572-2368

RE: Corrective Action Plan (CAP)

Dear Mr. Figueroa,

This is the CAP for the Foster Family Agency as requested by [REDACTED] on May 18, 2012 related to the Foster Family Agency Monitoring Review Field Exit Summary.

Are special incident reports (SIRs) appropriately documented and cross-reported?

CAP: The Administrator has counseled with the Supervisor on the necessity for all social workers to report incidents to her (Supervisor) for SIR reporting effective 4/13/2012. This was part of a previous CAP.

Are there Community Care Licensing citations, Out of Home Care Management Division reports on safety and physical plant deficiencies?

CAP: Agency Social Workers to submit monthly home evaluations to the Administrator for review and compliance with Title 22 and DCFS Contract. Safety and physical plant deficiencies are to be discussed at staff meetings, foster/resource family trainings and an immediate plan of correction for any deficiencies. Agency has hired a Resource Specialist to focus on home compliance weekly.

Does the foster parent case record include contact with references, including check w/OHCMD for historical information?

CAP: SBBF will use the check list (Attachment A) as a tool to verify that all references have been mailed and received. Additionally, SBBF will use ABCDM 228 (Attachment B) for retrieving historical information from OHCMD and CCL.

Did foster parents obtain health screenings prior to certification?

CAP: SBBF will use the checklist (Attachment A) as a tool to verify that health screen is done prior to certification.

Were safety inspections and re-evaluations completed at least every six months or per the timelines approved in the agency Program Statement?

CAP: SBBF will use the Certified Foster Parent Re-Certification Recommendation (Attachment C) to document the re-evaluation process.

Do additional adults who reside in the home (adult children of foster parents, other family members) and baby-sitters have all the necessary information in the certified foster parent's file?

CAP: SBBF will use the checklist (Attachment A) to verify that adults who reside in the home and baby-sitters have all the necessary information prior to certification. Additionally, SBBF Resource Specialist

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will use the Quality Assurance tool for the certified foster parent chart (Attachment D) and report monthly any deficiencies and a plan of correction immediately to the administrator.

Did the FFA obtain the DCFS CSWs' authorization or document efforts to obtain their implementation of the Needs and Service Plan?

CAP: The Supervisor will monitor weekly compliance with reports and access to the CSW for authorization or fax receipt as proof of the efforts to obtain their approval of implementation. The Supervisor will use the FosterTrak system to track the submission of reports to the CSW. The Quality Assurance tool (Attachment D) will monitor this matter and the administrator will review and track compliance.

Did the treatment team develop comprehensive initial Needs and Services Plan (NSP) with the child?

CAP: The Supervisor will monitor in her weekly supervisor the compliance with NSP developed with the child, CSW and foster parent. Effective July 15, 2012, SBBF will use the new NSP/QTR. The Quality Assurance tool (Attachment D) will monitor this matter and the administrator will review and track compliance.

Did the treatment team develop comprehensive updated Needs and Service Plans (NSP) with the child?

CAP: The Supervisor to ensure the compliance with the new NSP/QTR format (7/15/2012). The Quality Assurance tool will monitor this matter and the administrator will review and track compliance.

Are initial medical examinations timely? Are initial dental examinations timely?

CAP: SBBF will use the FosterTrak system to track compliance. The Supervisor will monitor for compliance weekly. When there is non-compliance the agency social worker will work to take the child to the appointment as directed by the Supervisor. The Quality Assurance tool will monitor this matter and the administrator will review and track compliance.

Are children informed about their medication? Are children aware of their rights to refuse medication? Are children aware that they may reject voluntary medical, dental and psychiatric care?

CAP: Agency Social Workers to use the Psycho-Education Form (Attachment E) for children upon placement moving forward and for completion on the current caseload no later than June 30, 2012.

Does the CFP encourage and help children to update a life book or a photo album?

CAP: Foster Parent Training held on June 2, 2012 provided education to the CFP on the personal needs/survival and economic wellbeing of the children. The Administrator reviewed the need for updating the life book and maintaining photos for the child's album. Agency social workers will incorporate into their NSPs moving forward in the independent living section.

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The Administrator will ensure the CAP is immediately implemented 6/18/2012, and maintained by incorporation into the quality assurance program. If additional information is needed please contact me at (310) 891-0096, your assistance is greatly appreciated.

In partnership,



Kathleen M. Wilborn, MSW
24 310 0096
Administrator

Cc: Kar Green, Marvett Black, Gladys Hidayat

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