# County of Los Angeles
# DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

PHILIP L. BROWNING
Director

FESIA A. DAVENPORT
Chief Deputy Director



Board of Supervisors
GLORIA MOLINA
First District
MARK RIDLEY-THOMAS
Second District
ZEV YAROSLAVSKY
Third District
DON KNABE
Fourth District
MICHAEL D. ANTONOVICH
Fifth District


September 19, 2014

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

From: Philip L. Browning
Director

**SOUTH BAY BRIGHT FUTURE 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 South Bay Bright Future Foster Family Agency (the FFA) in January 2014. The FFA has one licensed office located in the Fourth Supervisorial District and provides services to County of Los Angeles foster children and youth. According to the FFA's program statement, its mission is "to ensure the safety of each child, support and strengthen biological/certified families and promote the healthy development of all children."

At the time of the review, the FFA supervised 31 DCFS placed children in 26 certified foster homes. The placed children's average length of placement was 18 months and their average age was 9.

## SUMMARY

During OHCMD's review, the interviewed children generally reported: feeling safe at the FFA; having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity. The certified foster parents reported they were supported by the FFA staff in their efforts to provide care, supervision and service delivery to the children placed in their homes.

The FFA was in full compliance with 3 of 11 sections of our program compliance review: Psychotropic Medication, Personal Rights and Social/Emotional Well-Being, and Discharged Children.

OHCMD noted deficiencies in the following areas: Licensure/Contract Requirements, related to Special Incident Reports (SIRs) not being reported per SIR reporting guidelines; Community Care Licensing (CCL) citations as a result of deficiencies and findings during the course of CCL investigations and the FFA's failure to conduct required assessments of certified foster parents prior to placing more than two children in a certified foster home; Certified Foster Homes, related to a safety inspection conducted prior to certification not being dated, the FFA failed to submit an inquiry to OHCMD for historical abuse/neglect background information for a prospective certified foster parent prior to certification, one foster parent's criminal background statement was missing, one certified foster parent did not have a TB Test prior to certification, one certified foster parent did not have the initial certificate of approval in the file and safety inspections were not completed at least every six months; Facility and Environment, related to the exterior grounds of a foster home not being well maintained, the common area of one certified foster home and two children's bedrooms not being well maintained; one certified foster home did not conduct disaster drills at least every six months and four certified foster homes did not maintain appropriate and comprehensive monetary and clothing allowance logs; Maintenance of Required Documentation and Service Delivery, related to the FFA's failure to obtain a DCFS Children's Social Workers signature authorizing implementation of children Needs and Services Plans (NSPs), children were not progressing toward meeting their NSP goals, Initial, Updated NSPs and Quarterly Reports were not comprehensive as they did not include all of the elements in accordance with the NSP template, for one child, there was no documentation of monthly contacts with the child's DCFS Children's Social Worker in the child's case file and for two children, the FFA social worker did not conduct visits as required; Education and Workforce Readiness, related to one child that not enrolled in school within three school days of placement, one child did not attend school as required, the FFA failed to assist two children in meeting their educational goals and there was no documentation that the FFA provided assistance to two children with poor grades and attendance and for two youth there was no documentation that the FFA provided assistance in obtaining Youth Development Services or equivalent services; Health and Medical Needs, related to untimely initial medical and dental exams; Personal Needs/Survival and Economic Well-Being, related to three children that were not assisted in the development and maintenance of their Life Books/Photo Albums; and Personnel Records, related to one FFA staff that did not have a valid California driver's license and three part-time FFA social workers did not have a declaration on file indicating that their caseloads will not exceed a total of 15 children.

OHCMD instructed the FFA supervisory staff to enhance monitoring in order to eliminate documentation issues and ensure compliance with service requirements and all regulatory standards.

## REVIEW OF REPORT

On March, 21, 2014 the DCFS OHCMD Monitor, Gladys Hidayat, held an Exit Conference with the FFA's representative, Marvett Black, Administrator. The FFA's representative: agreed with the review findings and recommendations; was receptive to implementing systemic changes to improve their compliance with regulatory standards; and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this compliance report has been sent to the Auditor-Controller and CCL.

The FFA provided the attached approved CAP addressing the recommendations noted in this compliance report. OHCMD will verify implementation of the recommendations and will provide technical assistance and training during our next visit to the FFA in September, 2014.

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

PLB:EM:KR
RDS:gh

Attachments

c: William T Fujioka, Chief Executive Officer
John Naimo, Acting Auditor-Controller
Public Information Office
Audit Committee
William Hill, Executive Director, South Bay Bright Future FFA
Marvett Black, Administrator, Executive Director, South Bay Bright Future FFA
Lajuannah Hills, Regional Manager, Community Care Licensing

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

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

| | Contract Compliance Monitoring Review | Findings: January 2014 |
|---|---|---|
| I | **Licensure/Contract Requirements** (7 Elements) | |
| | 1. Timely Notification for Child's Relocation | 1. Full Compliance |
| | 2. Serious Incident Report Documentation and Cross Reporting | 2. Improvement Needed |
| | 3. Runaway Procedures in Accordance with the Contract | 3. Full Compliance |
| | 4. Are there CCL Citations/OHCMD Safety Reports | 4. Improvement Needed |
| | 5. If Applicable, FFA Ensures Complete Required Whole Foster Family Home (WFFH) Training | 5. Full Compliance |
| | 6. FFA Pays Certified Foster Parents (CFP) WFFH Required Payments | 6. Full Compliance |
| | 7. FFA Conducts an Assessment of CFP Prior to Placement of Two (2) or More Children | 7. Improvement Needed |
| II | **Certified Foster Homes (CFHs)** (12 Elements) | |
| | 1. Home Study and Safety Inspection Prior to Certification | 1. Improvement Needed |
| | 2. Agency's Inquiry with OHCMD for Historical Information Prior to Certification | 2. Improvement Needed |
| | 3. Timely Criminal Clearances (DOJ, FBI, CACI) Prior to Certification | 3. Full Compliance |
| | 4. Timely, Completed, Signed Criminal Background Statement | 4. Improvement Needed |
| | 5. Health Screening & TB Test Prior to Certification | 5. Improvement Needed |
| | 6. All Required Training Prior to Certification | 6. Full Compliance |
| | 7. Certificate of Approval on File/Including Capacity | 7. Improvement Needed |
| | 8. Safety Inspections Completed At Least Every Six Months or Per Approved Program Statement | 8. Improvement Needed |
| | 9. Completed Annual Training Hours for Re-certification and Current CPR/First-Aid/Water Safety Certificates | 9. Full Compliance |
| | 10. Current CDL/Auto Insurance/Annual Vehicle Maintenance Documentation for CFPs and Designated Drivers, if Applicable Car Seat(s) | 10. Full Compliance |
| | 11. Criminal Clearances and Health Screening/CDL/CPR/DOJ/FBI/CACI/Auto Insurance for Other Adults in the Home | 11. Full Compliance |

| | | |
|---|---|---|
| | 12. FFA Assists CFPs in Providing Transportation Needs | 12. Full Compliance |
| III | **Facility and Environment** (7 Elements) | |
| | 1. Exterior/Grounds Well Maintained | 1. Improvement Needed |
| | 2. Common Areas/Interior Well Maintained | 2. Improvement Needed |
| | 3. Children's Bedrooms/Interior Well Maintained | 3. Improvement Needed |
| | 4. Sufficient and Appropriate Educational Resources | 4. Full Compliance |
| | 5. Adequate Perishable and Non-Perishable Food | 5. Full Compliance |
| | 6. Disaster Drills Conducted and Documentation Maintained | 6. Improvement Needed |
| | 7. Money and Clothing Allowance Logs Maintained | 7. Improvement Needed |
| IV | **Maintenance of Required Documentation/Service Delivery** (10 Elements) | |
| | 1. FFA Obtains or Documents Efforts to Obtain County Children's Social Worker (CSW) Authorization to Implement NSPs | 1. Improvement Needed |
| | 2. CFPs Participated in Development of NSPs | 2. Full Compliance |
| | 3. Children Progressing Towards Meeting NSP Goals | 3. Improvement Needed |
| | 4. FFA Social Workers Develop Timely, Comprehensive Initial NSP with Child's Participation | 4. Improvement Needed |
| | 5. Develop Timely, Comprehensive Updated NSPs with Child's Participation | 5. Improvement Needed |
| | 6. Therapeutic Services Received | 6. Full Compliance |
| | 7. Recommended Assessments/Evaluations Implemented | 7. Full Compliance |
| | 8. County Children Social Workers Monthly Contacts Documented in Child's Case File | 8. Improvement Needed |
| | 9. Develop Timely, Comprehensive Quarterly Reports | 9. Improvement Needed |
| | 10. FFA Social Workers Conduct Required Visits | 10. Improvement Needed |
| V | **Education and Workforce Readiness** (5 Elements) | |
| | 1. Children Enrolled in School Within Three School Days | 1. Improvement Needed |
| | 2. Children Attend School as Required and FFA Facilitates in Meeting Children's Educational Goals | 2. Improvement Needed |
| | 3. Current Children's Report Cards/Progress Reports Maintained | 3. Full Compliance |
| | 4. Children's Academic Performance and/or Attendance Increased | 4. Improvement Needed |
| | 5. FFA Facilitates Child's Participation in YDS or Equivalent Services and Vocational Programs | 5. Improvement Needed |

| | | |
|---|---|---|
| VI | **Health and Medical Needs** (4 Elements)<br><br>1. Initial Medical Exams Conducted Timely<br>2. Follow-Up Medical Exams Conducted Timely<br>3. Initial Dental Exams Conducted Timely<br>4. Follow-Up Dental Exams Conducted Timely | 1. Improvement Needed<br>2. Full Compliance<br>3. Improvement Needed<br>4. Full Compliance |
| VII | **Psychotropic Medication** (2 Elements)<br><br>1. Current Court Authorization for Administration of Psychotropic Medication<br>2. Current Psychiatric Evaluation Review | Full Compliance (ALL) |
| VIII | **Personal Rights and Social Emotional Well-Being** (10 Elements)<br><br>1. Children Informed of Agency's Policies and Procedures<br>2. Children Feel Safe in the CFP Home<br>3. CFPs' Efforts to Provide Nutritious Meals and Snacks<br>4. CFPs Treat Children with Respect and Dignity<br>5. Children Allowed Private Visits, Calls and to Receive Correspondence<br>6. Children Free to Attend or Not Attend Religious Services/Activities of Their Choice<br>7. Children's Chores Reasonable<br>8. Children Informed About Their Medication and Right to Refuse Medication<br>9. Children Aware of Right to Refuse Medical, Dental and Psychiatric Care<br>10. Children Given Opportunities to Participate in Extra-Curricular Activities, Enrichment and Social Activities | Full Compliance (ALL) |
| IX | **Personal Needs/Survival and Economic Well-Being** (7 Elements)<br><br>1. $50 Clothing Allowance in Accordance with FFA Program Statement<br>2. Ongoing Clothing Inventories of Adequate Quantity and Quality<br>3. Children's Involvement in Selection of Their Clothing<br>4. Provision of Sufficient Supply of Clean Towels and Personal Care Items Meeting Ethnic Needs<br>5. Minimum Weekly Monetary Allowances<br>6. Management of Allowance/Earnings<br>7. Encouragement/Assistance with Life Book/Photo Album | 1. Full Compliance<br>2. Full Compliance<br>3. Full Compliance<br>4. Full Compliance<br>5. Full Compliance<br>6. Full Compliance<br>7. Improvement Needed |

| | | |
|---|---|---|
| X | **Discharged Children** (3 Elements)<br><br>1. Completed Discharge Summary<br>2. Attempts to Stabilize Children's Placement<br>3. Child Completed High School (if applicable) | Full Compliance (ALL) |
| XI | **Personnel Records** (9 Elements) | |
| | 1. Criminal Clearances (DOJ, FBI, CACI) Signed and Submitted Timely | 1. Full Compliance |
| | 2. Timely, Completed, Signed Criminal Background Statement | 2. Full Compliance |
| | 3. FFA Social Workers Met Education/Experience Requirements | 3. Full Compliance |
| | 4. Timely Employee Health Screening/TB Clearances | 4. Full Compliance |
| | 5. Valid CDL and Auto Insurance | 5. Improvement Needed |
| | 6. FFA Employees Signed Copies of FFA Policies and Procedures | 6. Full Compliance |
| | 7. FFA Employees Completed All Required Training and Documentation Maintained | 7. Full Compliance |
| | 8. FFA Social Workers Have Appropriate Caseload Ratio | 8. Full Compliance |
| | 9. FFA Maintained Written Declarations for Part-time Contracted FFA Social Workers Caseloads Not Exceed Total of 15 Children | 9. Improvement Needed |

**SOUTH BAY BRIGHT FUTURE FOSTER FAMILY AGENCY**
**CONTRACT COMPLIANCE MONITORING REVIEW**
**FISCAL YEAR 2013-2014**

## SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the January 2014 review. The purpose of this review was to assess South Bay Bright Future Foster Family Agency's (the FFA's) compliance with the County contract and State regulations and included a review of the FFA's program statement, as well as administrative internal policies and procedures. The monitoring review covered the following 11 areas:

- Licensure/Contract Requirements,
- Certified Foster Homes,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Educational and Workforce Readiness,
- Health and Medical Needs,
- Psychotropic Medication,
- Personal Rights and Social Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For purposes of this review, six children were selected for the sample. Out-of-Home Care Management Division (OHCMD) interviewed all six children. During the home visits, the children were observed to be comfortable in the certified foster homes and the certified foster parents were observed to be attuned to the needs of the children. OHCMD reviewed all six case files to assess the care and services they received. Additionally, five discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, five placed children were prescribed psychotropic medication. We reviewed their case files to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

OHCMD reviewed four certified foster parents' files and five staff files for compliance with Title 22 Regulations and County contract requirements. Interviews were conducted with four certified foster parents to assess the quality of care and supervision provided to children.

## CONTRACTUAL COMPLIANCE

OHCMD found the following eight areas to be out of compliance.

### Licensure/Contract Requirements

- A review of Serious Incident Reports (SIRs) revealed that the FFA did not consistently follow SIR reporting guidelines by failing to submit four SIRs into the ITrack system in a timely manner. Further, the SIRs were not cross reported to all required parties.

Additionally, the SIRs that were submitted lacked detailed information regarding the incidents that occurred.

OHCMD received verification that the FFA social worker staff were re-trained on SIR reporting during the period of April 1, 2014 to April 4, 2014 and the certified foster parents were re-trained on SIR reporting guidelines during the period of April 1, 2014 to April 16, 2014.

- Community Care Licensing (CCL) cited the FFA as a result of deficiencies and findings during the investigation of a CCL complaint. According to a CCL Complaint Investigation report dated September 25, 2013, CCL substantiated a Personal Rights Violation when it was discovered that a certified foster parent's partner put his hands on a foster child, which resulted in the child being removed. Further, the FFA failed to report the incident to CCL.

CCL requested a Plan of Correction (POC), which included re-training of FFA and certified foster parents on Children's Personal Rights. The POC was approved by CCL on October 18, 2013. This incident was reported to CCL by Children's Court.

- On September 25, 2013, CCL cited the FFA as a result of deficiencies and findings during the course of an unannounced case management visit to follow up on a SIR regarding placed children smoking marijuana in their bedroom. According to the report, the certified foster parent had a medical problem that limited her ability to walk up and down the stairs in her two-story home and was unable to properly supervise the placed children.

CCL requested a POC, which required the FFA to reduce the certified foster home's capacity from six to three children and no additional children over the age of 15 years old are to be placed in this home. The POC also required that the certified foster parent have someone monitor the second floor during the day when certified parent is downstairs. The POC was approved by CCL on October 18, 2013.

- On November 5, 2013, CCL cited the FFA as a result of deficiencies and findings during a review of a certified foster parent's file. According to the report, CCL discovered that a certified foster parent's First Aid and CPR card had expired.

CCL requested a POC, which required the FFA to submit verification that the certified foster parent had a current First Aid/CPR certificate and a copy to be placed in the certified foster parent's file. The FFA provided CCL with verification that the deficiency was corrected. The POC was approved by CCL on November 17, 2013.

- On January 14, 2014, CCL cited the FFA as a result of deficiencies and findings during a visit to a certified foster home. According to CCL's report, during their visit to a certified foster home, it was observed that the temperature in the home was cool; that the certified foster parent used a portable heater in the downstairs bedroom and in the hallway upstairs outside of her bedroom. The certified foster parent reported she did not use the central heating because of the high cost of heating the home. Additionally, CCL discovered that the bathroom downstairs had strong urine smell, no toilet paper, soap, paper towels or hot running water and the floor, toilet and sink were dirty. Additionally, the handrails and bedroom window sills were dirty.

CCL requested a POC, which required the FFA to ensure that the entire home is cleaned and sanitized; the bathroom have hot running water and that the home have adequate heating and cooling at all times. The FFA was also required to inspect their entire foster homes and ensure they are all operating as required by Title 22 regulations. The FFA provided CCL with verification that the deficiencies were corrected. The POC was approved by CCL on February 18, 2014.

- CCL cited the FFA for a confidentiality violation when it was discovered that the FFA social worker contacted certified foster parent mentioned above to discuss complaint allegations. CCL requested a POC, which required the FFA to re-train their social worker staff on confidentiality of pending investigations. The FFA provided CCL with verification that the FFA social worker staff completed the required training. The POC was approved by CCL on February 3, 2014.

- The FFA failed to follow contractual requirements by placing more than two children in a certified foster home prior to conducting an assessment, which would justify the certified foster parent's ability to provide quality care and meet the needs of additional placed children.

This was brought to the attention of the FFA Administration during the review process. The FFA Administrator stated that they will ensure that an assessment on all certified foster parents prior to placing two or more children in the home is conducted and that the assessment be placed in the certified foster parent's file. The FFA provided OHCMD with verification that the certified foster parent was assessed for the placement of two or more children on February 14, 2014.

**Recommendations**

The FFA's management shall ensure:

1. All SIRs are reported via ITrack system in a timely manner to all required parties.

2. The FFA is in full compliance with Title 22 Regulations, free of CCL citations.

3. An assessment of the certified foster parent's ability to provide quality care for more than two children is conducted prior to placing additional children in a certified foster home.

During the Exit Conference, the FFA's representative stated that they will ensure that SIRs are submitted timely and cross reported to all required parties, certified homes will be assessed and evaluated prior to placing more than two children in the home and will comply with Title 22 regulations and County contract.

**Certified Foster Homes**

Four certified foster homes were selected for the sample.

- In certified foster home #3, certified in 2001, the initial safety inspections was not dated; therefore, OHCMD could not determine if it was completed prior to certification.

- In certified foster home #4, certified in 2009, OHCMD found no documentation in the certified foster parent's case file indicating that OHCMD was contacted for historical abuse/neglect background information prior to certification.

Subsequently, OHCMD conducted a historical background check on the certified foster parent and found no record that would prevent the home from being used as a placement resource for DCFS children.

- In certified foster home #4, the certified foster parent's file did not contain a signed criminal background statement.

- In certified foster home #4, the certified foster parent's initial TB test was missing from the file.

- In certified foster home #3, the initial certificate of approval was missing from the certified foster parent's file.

- In certified foster home #3 and #4, safety inspections were not conducted at least every six months.

During the Exit Conference, the FFA's representative stated she will ensure that all necessary requirements are met prior to certifying a foster home and that required documents are obtained timely.

**Recommendations**

The FFA's management shall ensure that:

4. Safety inspections are conducted prior to certification and documentation is maintained in the certified foster parent's file.
5. The FFA contacts the OHCMD for abuse/neglect background information on all applicants prior to certification.
6. Certified Foster Parents' criminal background statement is completed prior to certification.
7. All required documents, including TB test is completed prior to certification.
8. Certified Home's Certificate of Approval is kept in the certified foster parents' files.
9. Safety inspections are completed at least every six months per the FFA's Program Statement.

**Facility and Environment**

- In certified foster home #4, the exterior grounds were not well maintained. OHCMD noted two bottles of lighter fluid were easily accessible to children, which posed a safety hazard. OHCMD immediately requested that the certified foster parent store the items in an area not accessible to children.

- In certified foster homes #2 and #4, the common areas were not well maintained. During a walkthrough of the homes, OHCMD noted that in both two story homes the escape ladders were not easily accessible. In certified foster home #2, the escape ladder was placed under a large, heavy chair in the certified foster parents' bedroom. In certified home #4, the escape ladder was stored in the downstairs closet. Further, in certified home #4, a large sofa was partially obstructing the rear door exiting to the backyard. During the review process, the FFA provided OHCMD with proof that the deficiencies had been corrected.

- In certified foster home #1, OHCMD observed that in the children's bedroom the bunk bed was too close to the blades of the ceiling fan, which posed a safety hazard. Further, the placed child and the adopted child were observed to be playing with scissors. The certified foster parent immediately took the scissors away from the children. She stated that she was unaware as to how the children got a hold of the scissors, as they are normally stored locked in a cabinet. Additionally, in certified foster home #3, the child's bedroom did not have any lighting.

During the review process the FFA provided OHCMD with pictures as verification that the fan blades were removed from the ceiling and reported that the child's bedroom now has appropriate lighting.

- In certified foster homes #1 and #4, certified foster parents reported they did not conduct disaster drills.

- Four of six children case files reviewed revealed that the FFA did not maintain accurate and complete monetary and clothing allowance logs. The placed children received a $50.00 monthly clothing allowance gift card, however, either the receipts for the items purchased were missing from the files or items purchased were not properly documented.

During the Exit Conference, the FFA's representative stated the FFA will re-train their social worker staff to ensure all necessary requirements in regard to facility and environment are followed according to County contract and Title 22 Regulations. OHCMD received verification that the FFA social worker staff were re-trained on Home Evaluation and Disaster Drills on April 1, 3 and 4, 2014.

**Recommendations**

The FFA's management shall ensure:

10. Certified foster home's exterior grounds are well maintained and free of safety hazards.

11. Certified foster home's common areas and interior are well maintained and free from safety hazards.

12. Children's bedrooms are well maintained.

13. Disaster drills are conducted at least every 6 months and documentation of drills is placed in the certified foster parent's files.

14. Children's monetary and clothing allowance logs are maintained as required by the County contract.

**Maintenance of Required Documentation and Service Delivery**

Six children were selected for the sample.

- For two children, the FFA did not obtain or document efforts to obtain the DCFS CSW's signatures authorizing implementation of Needs and Services Plans (NSPs).

- Three children were not progressing towards meeting their NSPs goals and their NSPs did not specify the task/services being provided by the FFA to assist the children in achieving their goals.

- Three children's Initial NSPs were not comprehensive, as they did not include all elements in accordance with the NSP template. Specifically, goals were not specific and measurable. In addition, none were timely. Further, one child's Initial NSP was missing from the child's file.

- Four children's Updated NSPs were not comprehensive, as they did not include all elements in accordance with the NSP template. Specifically, goals were not child specific, measurable and time limited. Further, progress towards meeting NSP goals was not documented for all four children and for one child who was receiving therapeutic services there were no therapeutic goals developed.

- For one child, there was no document in the case file that the DCFS CSW was contacted monthly for a period of two months.

- Four children's Quarterly Reports were not comprehensive, as they did not include all of the elements in accordance with the NSP template. Specifically, information regarding children's visitation with families, overall adjustment to their foster home and progress towards meeting their NSP goals was not documented.

- For two children, OHCMD did not find documentation in their case files indicating that they were visited by their FFA social workers a minimum of twice per month as required. For one child, the FFA social worker visited the child only once for the month of December 2013. For the other child, the FFA social worker did not visit the child for the months of February, March and May of 2013.

During the Exit Conference, the FFA Administrator stated that the FFA staff will be re-trained on the development of NSPs/Quarterly Reports. The FFA will also ensure that contact with DCFS CSWs and FFA social worker staff visits with placed children are conducted as required. OHCMD received verification that the FFA social worker staff was re-trained on the development of NSPs/Quarterly Reports on April 1, 3 and 4, 2014.

It should be noted that a representative from the FFA attended OHCMD NSP refresher training in August 2013 and were made aware of the NSP requirements.

**Recommendations**

The FFA's management shall ensure:

15. CSW's signatures authorizing implementation of the NSPs are obtained in a timely manner and efforts to obtain the signatures are documented.

16. Children are assisted in meeting their NSP goals and all efforts by the FFA are documented in the children's case files.

17. Children's Initial NSPs are comprehensive and completed in accordance with the NSP template.

18. Children's Updated NSPs are comprehensive and completed in accordance with the NSP template.

19. CSWs are contacted monthly and documentation of the contacts are placed in the case files.

20. Children's Quarterly Reports are comprehensive and include documentation of children's overall progress, services received and all other pertinent information.

21. FFA social workers conducted required visits with placed children in accordance with the contract.

**Education and Workforce Readiness**

- For two children, OHCMD did not find documentation in the their case file indicating that the children were enrolled in school within three school days of certified foster parents relocating.

- For one child with poor school attendance, there were no documentations in the respective case file indicating that the FFA assisted the child in meeting educational goals.

- For two children, academic performance and attendance did not improve.

- For two youth, there was no documentation in their case file indicating that the FFA encouraged them or facilitated their participation in YDS or equivalent services to assist the youth in achieving their independence.

At the Exit Conference, the FFA's representative stated that the FFA will ensure that all children's educational progress is monitored closely.

**Recommendations**

The FFA's management shall ensure that:

22. All children are enrolled within three school days after placement and are assisted to ensure timely school enrollment.

23. All children's educational needs are closely monitored and necessary assistance is provided to assist them to reach their educational goals.

24. All school-aged children receive assistance to improve their academic performance.

25. All age-appropriate children are encouraged to participate in YDS or equivalent services and receive support/assistance from the FFA as necessary.

**Health and Medical Needs**

- For one child, OHCMD observed that the initial medical exam was conducted two months late and there was no documentation in the case file indicating the reason for the delay.

- Three children's initial dental exams were not conducted timely. One child's initial dental exam was conducted one month late and two children's initial dental exams were conducted two months late and there was no documentation in their respective case file indicating the reason for the delay.

During the Exit Conference, the FFA's representative stated that the FFA staff will monitor timeliness of children's Medical and dental exams. OHCMD received verification that the FFA social worker staff were re-trained on the topic of timely Medical and Dental exams during the period of April 1, 3 and 4, 2014.

**Recommendations**

The FFA's management shall ensure that:

26. All children's Initial medical examinations are conducted timely.

27. All children's Initial dental examinations are conducted timely.

**Personal Needs/Survival and Economic Well-Being**

- Three children reported they were not encouraged or assisted in maintaining Life Books and/or Photo Albums.

During the Exit Conference, the FFA's representative stated that all placed children were given a Life Book/Photo Album; however, the children were not receptive and refused to maintain them. OHCMD received verification that the FFA social worker staff was re-trained on assisting children in developing Life Books/Photo Albums during the period of April 1, 3, and 4, 2014.

**Recommendation:**

The FFA's management shall ensure that:

28. The certified foster parents encouraged and assisted all placed children in creating and updating Photo Albums/Life Books.

**Personnel Record**

- One FFA social worker staff did not have a current copy of their California driver's license in their personnel file. During the review process, OHCMD verified that a copy of the current California driver's license was obtained and placed in the personnel file.

- The files of three part-time FFA Social Workers did not have a written declaration that as a part-time employee, their caseload will not exceed a total of 15 children.

**Recommendations**

The FFA's management shall ensure that:

29. All employees' driver's licenses are updated and filed in the employees files.

30. All part-time, contracted social workers sign their declarations regarding their collective caseloads not to exceed 15 children maintained in their files.

**PRIOR YEAR FOLLOW-UP FROM DCFS OHCMD's FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW**

The OHCMD's last compliance report dated October 9, 2013, identified 16 recommendations.

**Results**

Based on OHCMD's follow-up, the FFA fully implemented 4 of 16 previous recommendations for which they were to ensure that:

- Certified foster parents complete the required number of annual training in accordance with the County contract.

- Training is provided to all certified foster parents on the importance of maintaining nutritious and fresh food for the placed children and ensure they have adequate supply of perishable and non-perishable food that adhere to product expiration dates.

- All placed children's follow-up dental examinations are timely and documentation is maintained in the children's files.

- Psychiatric evaluation reviews are obtained for children prescribed psychotropic medications and placed in the children's case files.

Based on OHCMD's follow-up, the FFA did not fully implement 12 of 16 previous recommendations for which they were to ensure that:

- SIRs are submitted for all reportable incidents via ITrack; that submitted SIRs contain detailed information about the incident and are reported to OHCMD and all appropriate parties in a timely manner.

- The FFA establishes an oversight plan to ensure all certified foster homes comply with the County contract and CCL regulations regarding Licensure/Contract Requirements.

- NSPs are sent to the children's respective DCFS CSWs for their approval; that attempts to obtain the signatures are documented and placed in the children's case files.

- NSPs contain documentation that the certified foster parents were offered the opportunity to participate in the development of the children's NSPs.

- Children's NSPs include an assessment of their unmet goals and FFA's efforts made to assist them in reaching the goals.

- Initial NSPs comply with County contract requirements and are comprehensive.

- Updated NSPs comply with County contract requirements and are comprehensive.

- Quarterly Reports are completed in a timely manner and proof of mailing is documented and placed in the children's case files.

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

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

- All part-time FFA contracted social workers have a declaration stating their caseloads are not to exceed 15 children.

- The outstanding recommendations from the 2012-2013 monitoring report dated November 16, 2012, which are noted in this report as Recommendations 1, 2, 15, 16, 17, 18, 26, 27 and 30 are fully implemented.

During the Exit conference OHCMD went over all of the findings with the FFA representatives and discussed the need for the FFA to enhance monitoring in order to eliminate documentation issues and be in compliance with Title 22 Regulations and Contract requirements. OHCMD stressed to the FFA that they must show improvement in the areas of SIRs reporting, documentation maintenance and the need for the FFA to hold FFA social worker staff accountable for monitoring certified foster homes. The FFA representatives also indicated that they would be hiring a Quality Assurance staff person to ensure overall agency compliance.

On July 31, 2014, OHCMD provided the FFA with training on SIR reporting and NSP guidelines and oversight of certified foster homes. OHCMD will verify implementation of the recommendations and will provide technical assistance during our next visit to the FFA in September, 2014. The FFA was informed that failure to show improvement may lead to the FFA being placed on a Hold status.

## MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER (A-C)

A fiscal review of the FFA has not been posted by the A-C.

# SOUTH BAY BRIGHT FUTURE, INC.

24404 South Vermont Avenue, Suite 201 • Harbor City, CA 90710
Phone: (310) 891-0096 • FAX (310) 891-0195


**July 10, 2014**

**DCFS Out of Home Care Management Division**
**Attn: Korliss Robinson, Manager**
**FAX: 626.572.2368**
**RE: Corrective Action Plan (CAP)**

**Dear Ms. Robinson,**

**CORRECTIONS RE: CHANGES DATED JULY 3, 2014**

**II. CERTIFIED FOSTER HOMES**

**ITEM #14: Do the certified foster parent files contain current Certificates of Approval and do the Certificates have all of the information required by Title 22 including compliance with capacity? (SAFETY)**

**CAP:** South Bay Bright Future (SBBF) shall ensure that all certified foster parents files contain current Certificates of Approval and that the Certificates contain all of the information required by Title 22 including compliance with capacity. The agency's Foster Parent Coordinator shall be the primary person responsible for implementing the aforementioned. The agency's Administrator shall ensure that the agency is in compliance with the Title 22 requirement.

**III. FACILITY AND ENVIRONMENT**

**ITEM #20: Are the exterior and the grounds of the certified foster home well maintained? (Front and back yards clean, and adequately manicured lawns yards, condition of home exterior, drives, walkways and fences, window screens) (SAFETY)**

**CAP:** SBBF shall monitor for compliance that all common area/exterior areas are well maintained at all times. The agency's social worker shall make monthly home evaluation safety inspections of the exterior of the homes. In addition, the agency's social worker shall make unannounced visits to monitor for compliance. Further,




05/18/2014 14:32 FAX 13108810185 SOUTH BAY BRIGHT FUTURE 002/003

the agency's Foster Parent Coordinator shall make quarterly home inspections, which includes exterior areas. Certified foster parent shall be informed of the non-compliance and the corrections shall be made. The social workers and foster parent coordinator are the persons responsible for implementing the CAP. The home inspections shall be contained in the certified foster parent's file.

**ITEM #22: Are children's bedroom well maintained? (adequate lighting)**

**CAP:** SBBF shall monitor for compliance that placed children bedrooms are well maintained which includes adequate lighting in all bedrooms. SBBF monitors for compliance by the following: weekly visits to the home by agency social worker, month home evaluations made by social workers, unannounced visits by social workers, quarterly in-service training for certified foster parents, and quarterly inspections via quality assurance. The agency social worker and foster parent coordinator shall be the primary person responsible for compliance. The agency'sadministrator shall monitor for compliance.

**NOTE: All children's bedrooms in the Jackson home are equipped with adequate lighting.**

**ITEM #36: Do social workers conduct required visits with placed children in accordance with the contract? (SAFETY)**

**NOTE: Changes noted.**

**ITEM #39: Are current copies of the children's report cards or progress reports maintained/ (WELL-BEING)**

**NOTE: Changes noted.**

**Sincerely,**

**Marvett Black**
**Program Administrator**

# SOUTH BAY BRIGHT FUTURE, INC.

24404 South Vermont Avenue, Suite 201 • Harbor City, CA 90710
Phone: (310) 891-0096 • FAX (310) 891-0195


**May 30, 2014**

**DCFS Out of Home Care Management Division**
**Attn: Korliss Robinson, Manager**
**FAX: 626.572.2368**
**RE: Corrective Action Plan (CAP)**

**Dear Ms. Robinson,**

**ADDENDUM FOR SBBF CAP DATED APRIL 21, 2014.**

**LICENSURE/CONTRACT REQUIREMENTS**

**SIR –not appropriately documented and cross reported**

SBBF shall monitor for compliance that all SIRs are submitted within the guidelines of SIRs regulations. In addition, a SIR training for social workers and certified parent was conducted at separate times. (Please find attached the sign in-log, topics covered, specific dates and hand-outs.) Further, the training also focused on **REPORTING ALL INCIDENTS TO ADMINISTRATOR** , allowing administrator to make the decision whether the incident is reportable.

**PLEASE NOTE:** Social workers and certified foster parents have been informed there will be consequences for not reporting timely incidents.

The administrator shall insure that all information shall be collected from social workers and certified foster parents and a detailed incident report is submitted timely to CSW, CCL, OHCM, DMH and Probation. (The special incident shall be reported the same day to the CSW by telephone and submitted by ITRACK within 24 hours to the above departments.)

In addition, the agency shall continue to provide on-going training in the area of reporting Special Incident Reporting.

**NOTE : The dates for the SIR Training is on the sign-in log.**

## CCL COMPLAINTS

SBBF shall monitor for compliance for the prevention of further citations by continuing to provide additional training to social workers and certified foster parents, conducting more effective and appropriate home evaluations. The agency's social workers, certified foster parents, foster parent coordinator and social worker's assistant are the primary persons responsible for the aforementioned implementation. The agency has informed **everyone** that consequences shall be implemented if further citations are issued. The agency's administrator is the responsible person for the prevention of further CCL citations.

**NOTE: Please find attached all requested documents for CCL citations.**

## II. CERTIFIED FOSTER HOMES

**#6.** SBBF has a history of having several documents missing from the CFP and children's files. Please specify how the FFA will track documents to ensure they are filed. (Is the FFA paying WFFH CFP's required supplemental payments? (PERMANENCY)

**CAP:** SBBF shall ensure that all appropriate documents are contained in CFPs file. SBBF's Foster Parent Coordinator shall audit **All** CFPs files be-weekly. (Audit form is attached.) In addition, the administrator shall audit the files monthly to ensure that the bi-weekly audits have been conducted, that all appropriate documents are in the file and there are no missing/misfiled documents.

SBBF shall also ensure that all appropriate documents are contained in Children's files. The same procedure shall apply to the audit with the except that the audit shall be conducted by the Social Worker's Assistant.

**#9.** Please specify how the FFA Administrator will ensure this procedure is implemented. (If applicable, did the foster parent case record include the agency's inquiry with OHCMD for historical information prior to certification (Effective November 1, 2008) and reference check? (SAFETY)

**CAP:** SBBF shall ensure that all CFPs case record include the agency's inquiry with OHCMD for historical information. In addition, before certification the inquiry from OHCMD must be received from the department and reveals an appropriate background clearance for certification. The administrator shall be the responsible person for implementing the aforementioned.

**#11:** Were criminal background statements completed and signed by certified foster parents in a timely manner? (SAFETY)

**CAP:** SBBF shall ensure that all criminal background statements are completed and signed by **ALL** certified foster parents prior to certification. The foster parent coordinator shall be the primary person responsible for the CAP.

**#12**: Did certified foster parents obtain health screenings/TB clearances prior to certification? (SAFETY)

**CAP:** SBBF shall insure that prior to certification all prospective foster parents have health screenings/TB clearances in the CFPs case record.

The foster parent coordinator shall be the primary person responsible for the implementing the aforementioned CAP.

**#18**: Does the certified foster parent's file include all of the necessary information (criminal clearances, CDL, auto insurances, etc.,)

**CAP:** SBBF shall ensure that all of the necessary information is available prior to certification and is updated appropriately. The foster parent coordinator is responsible for the implementation of this Cap #11, #12 and #18.

**IMPLEMENTATION OF #11, #12 and #18.**

SBBF shall ensure all required documents are contained in all certified foster files as stated above. The foster parent coordinator shall obtain these documents prior to certification by collecting them during MAPP training or shortly thereafter. As stated above t he CFPs files are audited bi-weekly and the foster parent coordinator shall update appropriate documents (CDL, auto insurance, etc.) at that time.

**NOTE: Please note attached forms to implement above CAP.**

III. **Facility and Environment**

Please specify what the FFA social work will do during their weekly visit.

**#21:** Are common areas/interior well maintained?

**CAP:** SBBF shall monitor for compliance that during weekly visits social workers conducted wellness checks with the children, conduct a home evaluation which includes all safety areas in the home ( such as cleanliness of the home, proper lightening, home-like environment, adequate food, furniture, lighting, etc.)

The FFA social worker shall complete the safety home evaluation and notes any deficiencies and submits to foster parent coordinator and Administrator. In addition, any deficiencies shall be corrected at that time.

In addition, foster parent coordinator conducts quarterly home inspection to monitor for compliance that the certified home remains safe. The FFA social worker and foster parent coordinator are the primary persons responsible for the aforementioned.

**#22:** Are children's bedrooms well maintained?

**CAP:** SBBF shall monitor for compliance that **ALL** bedrooms are safe and well maintained. As stated above FFA social workers and certified foster parent coordinator inspect the home for safety. In addition, CFP are reminded during in-service and individual session the important of maintaining a safe home (well maintained bedroom, no hazard materials, etc.) The FFA social worker, foster parent coordinator and certified foster parent are the responsible persons for implementation of the CAP.

**#25:** Please specify CFPs participation in conducting the drills and how they are being tracked.

**CAP:** SBBF shall monitor for compliance that **ALL** CFPs participation in required disaster drills. The agency requires that disaster drills are conducted every six months as well as when a new child comes into the home.

The agency social worker shall conduct the drill with participation of all in the home, including the CFP. An agency disaster drill is completed and maintained in appropriate case records, both the child's and certified foster parent file. In

addition, during in-service training CFPs are reminded to review the disaster drills in the home.

SBBF social workers and CFPs are the primary persons responsible for implementation.

**#26:** Please include CFPs responsibility to ensure compliance in this area.

**CAP:** SBBF monitor for compliance that **All** CFPs participate in the disaster drill. CFPs are trained on the safety of the home during MAPP training and on-going safety training during in-service trainings. In addition, CFP are trained and reviewed on their responsibility on the safety of the home, including conducting disaster drills on a regular basis.

**NOTE: Please see attached forms to be completed during home visits.**

**Maintenance of required Documentation and Service Delivery**

**#27:** Did the FFA obtain or document efforts to obtain the County's worker's authorization to implement the NSP? (WELL-BEING)

**CAP:** SBBF shall track the efforts to obtain the County's worker's authorization to implement the NSP by logging the efforts. SBBF has modified the NSP log for efforts to County worker. (Log is attached) SBBF social worker assistant is the primary responsible for making the efforts for authorization by faxing, e-mail and telephone calls. All efforts shall be documented accordingly.

**#29:** Please specify how the administrator will be the person responsible for implementation of the CAP.

**CAP:** SBBF administrator shall be the person responsible for implementation of the CAP, in that during weekly supervision with the social worker assistant the administrator shall review the **NSP Effort Log** weekly with the social worker assistant to track the required efforts.

**#31:** Please include the date the NSP Training was provided to the staff on the (The hand-out for the training is attached.)

**CAP:** The training was conducted April 4, 2014. (Sign-in log attached)

**#35:** Please specify how the FFA will ensure that the Quarterly Reports are comprehensive.

**CAP:** SBBF shall ensure that Quarterly Reports are comprehensive by continuing the NSP during social worker's meeting and during weekly supervision. In addition, the administrator continues to conduct individual training on developing comprehensive Quarterly Reports with social workers. (A sign-in log copy of the NSP Training that was given has been distributed to social workers and well as portions of the NSP Training is used during weekly supervision.

SBBF administrator is the person responsible for the implementation of the CAP.

**NOTE: Please see attached hand-outs during NSP Training.**

**If additional information is needed, please contact me at (310) 891-0096.**

**Sincerely,**

**Marvett Black**
**Program Administrator**

# SOUTH BAY BRIGHT FUTURE, INC.

24404 South Vermont Avenue, Suite 201 • Harbor City, CA 90710
Phone: (310) 891-0096 • FAX (310) 891-0195


**April 21, 2014**

**DCFS Out of Home Care Management Division**
**Attn: Korliss Robinson, Manager**
**FAX: 626.572.2368**
**RE: Corrective Action Plan (CAP)**

**Dear Ms. Robinson,**

**Please find attached the following CAP for the South Bay Bright Future Foster Family Agency (SBBFFFA) as requested by the agency monitor Gladys Hidayat on March 21, 2014 related to SBBFFFA Monitoring Review Exit Summary.**

**LICENSURE/CONTRACT REQUIREMENTS**

**#2: Are special incidents reports (SIRs) appropriately documented and cross-reported? (SAFETY)**

CAP: SBBFFFA has conducted additional training to each and every certified foster parent individually on reporting all incidents to social workers and to the agency, allowing the agency to determine whether it is reportable. The training focused very heavily on reporting all incidents as soon as the incident occurs.

In addition, all agency social workers were trained individually on reporting incidents/special incidents and that these incidents must be reported as soon as possible. (During weekly supervision social workers are requested to report any incident that might have occurred.)

Further, the training focused on consequences for not meeting the requirements of Special Incident Reporting for certified parents and social workers. The training focused on reporting special incidents to CSW by telephone, documenting on contact notes and followed by ITRACK.

SBBFFFA shall monitor for compliance that all Special Incident Reports are appropriately documented and cross reported in the timely manner. The Administrator shall be the person responsible for documenting all the information from agency social workers and certified foster parents and reporting Special Incidents/cross reports to all appropriate parties (CSW, CCL, OHCM, Probation and DMH.)

NOTE: The log for Special Incident Reporting for certified parent and social workers are attached. A copy of the Special Incident Reporting document was given to each certified parent and social worker for quick reference.

**#4: Is the agency free of substantiated Community Care Licensing complaints' reports on safety and physical plant deficiencies since the last review? (SAFETY)**

**CAP:** SBBFFFA has incurred two substantiated complaints from Community Care Licensing since the last review. A Cap was submitted timely and approved.

**#7: If applicable, did the FFA conduct an assessment of certified foster parents prior to placing more than two (2) children in the home in accordance with the contract? (SAFETY)**

**CAP:** The agency shall ensure that all home are assessed and evaluated for SAFETY prior to placing more than two (2) children in the home in accordance with the contract. The assessment/evaluation shall be contained in the certified parent's file within the agency. The administrator shall be the person responsible for implementing the aforementioned.

**CERTIFIED FOSTER HOMES**

**#8: Were home studies and safety inspections conducted prior to initial certification? (SAFETY)**

**CAP:** SBBFFFA shall ensure home studies and safety inspections are conducted prior to **ALL** certifications. All safety inspections shall show the **date of inspection.** The home studies and safety inspections shall be filed in certified parent's file in the office. The agency's social worker is the primary person responsible for the aforementioned. The agency certified foster parent coordinator performs quarterly inspections, or when necessary. The administrator shall monitor

for compliance during weekly supervision with social workers and certified foster parent coordinator.

**# 9: If applicable, does the foster parent case record include the agency's inquiry with OHCMD for historical information prior to certification (effective November 1, 2008) and reference check? (SAFETY)**

**CAP:** SBBFFFA shall ensure that all foster parent case record include the agency's inquiry with OHCMD for historical information prior to certification. In addition, no home shall be certified before clearance from OHCMD. A copy of the inquiry shall be filed in the certified foster parent file. The agency's administrator shall be the person responsible for implementation of the aforementioned.

**#11: Were all criminal clearances (CACI, DOJ, FBI) obtained prior to the foster parents being certified? (SAFETY)**

**CAP:** SBBFFFA shall ensure that prior to certification **ALL prospective** certified parents have criminal clearances and documentation is kept in the respective file. The certified foster parent coordinator is the primary person responsible for the above requirement. The administrator shall monitor for compliance.

**#12: Did certified foster parents obtain health screenings/TB clearances prior to being certification (SAFETY)**

**CAP:** SBBFFFA shall ensure that prior to certification **ALL** prospective parents shall have a health screening/TB on file in the agency's office. The certified foster parent coordinator shall be the primary person responsible for implementing the aforementioned. The administrator shall monitor for compliance during weekly supervision with certified foster parent coordinator.

**#18: Does the certified foster parent's file include all of the necessary information (criminal clearances, CDL, auto insurance, etc.) for additional adults who reside in the home (adult children or foster parents, other family members) and baby-sitters who care for the child on a regular basis or for periods exceeding 24 hours? (SAFETY)**

**CAP:** SBBFFFA shall ensure that **ALL** certified parent's files contained all necessary information which includes the following: criminal clearances, CDL, auto insurances, etc., this information is required for **ALL** additional adults residing in the home. In addition, this required information is extended to baby-

sitters who care for the child(ren) on a regular basis or for periods exceeding 24 hours (SAFETY). In addition, the agency shall ensure that all documentation pertaining to the above shall be maintained in appropriate files. The agency's certified foster parent coordinator shall be the primary person responsible for implementation. The agency's administrator shall monitor for compliance during weekly supervision with certified foster parent coordinator.

## FACILITY AND ENVIRONMENT

**#21: Are common areas/interior well maintained. (Clean/sanitary; neat; adequate furniture and lighting; home-like environment, no safety hazards) (SAFETY)**

**CAP:** SBBFFFA shall ensure that all common area/interior are well maintained at all times. The agency's social worker shall make unannounced visit at least once a month to ensure that these requirements are being met at all times. The agency's social worker is the primary person responsible for the aforementioned. The agency's administrator shall monitor for compliance during weekly supervision with social workers.

**#22: Are children's bedrooms well maintained? (Adequate lighting)**

**CAP:** SBBFFFA shall monitor for compliance that all children bedrooms are well maintained by the agency's social worker weekly visits to the home, home evaluations, quality assurance inspections and the requirement (s) being addressed during quarterly in-service training. The agency's social worker shall be the primary person responsible for implementation. In addition, the requirement (s) shall be addressed during weekly supervision with social workers by the agency's administrator.

**#25: Has the certified foster parent conducted disaster drills at least every six (6) months and maintained completed disaster drill logs? (SAFETY)**

**CAP:** SBBFFFA shall monitor for compliance that disaster drills are conducted upon initial placement and six (6) months thereafter, unless there is a new placement and at time a new disaster drill is conducted.

Agency's social worker is the primary person responsible for conducting the disaster drills. The requirement shall be addressed during weekly supervision with

social workers. In addition, prospective certified foster parents shall be trained on disaster drill requirement during MAPP and follow-ups during in-service training.

**ARE APPROPRIATE AND COMPREHENSIVE MONETARY AND CLOTHING ALLOWANCE LOGS MAINTAINED? (WELL-BEING)**

**#26: Are appropriate and comprehensive monetary and clothing allowance logs maintained? (WWELL-BEING)**

**CAP:** SBBFFFA shall ensure that **ALL** placed children continue to receive the appropriate clothing and spending allowances. The agency shall also ensure that appropriate and comprehensive monetary and clothing allowance logs are maintained. (WELL-BEING)

Agency social workers have been refreshed on keep appropriate and comprehensive logs for the children. The agency social workers are the persons responsible for implementation of the aforementioned. The agency's administrator shall monitor for compliance during weekly supervision with social workers.

**MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY**

**#27: Did the FFA obtain or document efforts to obtain the County's worker authorization to implement the NSP? (WELL-BEING)**

**CAP:** SBBFFFA shall ensure that three (3) documented efforts are made to County social workers for authorization to implement NSP. The first effort for authorization shall be by fax, the second and third efforts shall be telephone, fax or e-mail. All inquiries requesting CSW's signatures shall be documented and filed in the child's file. The agency's social worker assistant's shall be the primary person responsible for the aforementioned. The administrator shall monitor for compliance during weekly supervision.

**#29: Are the placed children progressing toward meeting the NSP's case goals (initial and updated)? (Review agency's documentation of their efforts) (WELL-BEING)**

**CAP:** SBBFFFA shall ensure that the NSP's shall reveal that the placed children are progressing toward the listed goals in the initial NSP. The progression toward meeting the goals shall be addressed in the updated NSP's. These efforts shall be

clearly documented in the case plan. The social workers shall review their goals and progression during weekly supervision. The administrator shall be the person responsible for implementation of the CAP.

**#30: Did the FFA social worker develop timely, comprehensive, initial (NSP's) with the participation of the developmentally age-appropriate child? (WELL-BEING)**

**CAP:** SBBFFFA shall ensure that **ALL** social workers develop time, comprehensive initial NSP and that age-appropriate children participate in the development of the NSP. During weekly supervision goals, modification and progress, etc shall be discussed. In addition, participation by the child, certified foster parent and ASW shall be addressed during supervision sessions. Further, no NSP's shall have pre-typed dates for signatures and no NSP shall be submitted to County social workers without all required signatures. The agency's administrator shall monitor for compliance that the above CAP is implemented.

**#31: Did the FFA social worker develop timely, comprehensive, updated (NSPs) with the participation of the developmentally age-appropriate child? (WELL-BEING)**

**CAP:** SBBFFFA has provided additional training to all agency social workers on developing timely, comprehensive updated NSP(s) and that all developmentally age-appropriate children shall participate in creating the goals in the NSP(s).

During weekly supervision social workers are required to provide all NSP(s) that are due and the participation of the child is addressed at that time. SBBFFFA has informed all social workers that omission of this continuous requirement will lead to warrant consequences. The agency's social workers are the primarily responsible for meeting the above requirement.

**#34: Are County workers contacted monthly and are the contacts notes appropriately documented in the case file? (WELL-BEING)**

**CAP:** SBBFFFA shall ensure that County social workers are contacted monthly and appropriate documentation is case filed. The agency's social worker shall be responsible for implementing the above requirement. The agency's administrator shall monitor for compliance during weekly supervision with social workers.

**#35: Does the FFA social worker complete timely, comprehensive, quarterly reports? (To county workers by 10th business days following the end of each quarter from the date the child was placed.) (WELL-BEING)**

**CAP:** SBBFFFA shall ensure that agency's social workers shall develop timely, comprehensive quarterly NSP(s) and submit them to county social workers no later that the 10th business day following the due date. The agency's social workers shall be the primary person responsible for timely submission of the NSP(s) to the administrator. In addition, the social workers' assistant shall be responsible for submitting the NSP **Timely** to the appropriate County social worker to obtain authorization (as stated in an above CAP.) The administrator shall monitor for compliance during weekly supervision with social workers and social worker's assistant.

**#36: Do FFA social workers conduct required visits with placed children in accordance with the contract? (SAFETY)**

**CAP:** SBBFFFA shall monitor for compliance that FFA social workers are conducted required visits with placed children in accordance with the contract. FFA social workers are required to visit weekly with children who have been in placement less than 90 days. Thereafter, the required visits can be bi-weekly depending on the stability of the placement. The FFA social workers shall be responsible for meeting the required visits and the administrator shall be responsible for supervising the social workers on meeting the required visits requirements.

**EDUCATION AND WORKFORCE READINESS**

**#37: Was the child enrolled in school within three days school days after placement or did the FFA document efforts? (WELL-BEING).**

**CAP:** SBBBFFA shall monitor for compliance that all children are enrolled in school within three school days after placement and documented efforts are in case files. During weekly supervision FFA social workers shall addressed initial placements and school enrollment is one of the areas to be addressed. The FFA certified foster parent shall be the primary person, in conjunction with the FFA social worker in enrolling the child in school within three (3) school days after placement.

**#38: Does the FFA ensure the child attend school as required and facilitate in meeting the child's educational goals (e.g. IEP, conference, tutoring, parent/teacher conference, homework, etc.), If applicable for children placed over 90 days? (WELL-BEING)**

**CAP:** SBBFFFA does ensure that all efforts are made that all school age children attend school as required and that the agency facilitate in the child meeting the educational goals. In addition, the FFA ensures that the agency will also facilitate in the aforementioned goals. The certified foster parent and the FFA social worker shall be the primary persons responsible for implementing the above requirements and the Administrator shall follow the progress during weekly supervision with FFA social workers.

**#39: Are current copies of the children's report cards or progress reports maintained? (WELL-BEING)**

**CAP:** SBBBFFA shall ensure that current report card/progress reports are maintained in all placed children's files. The agency's certified foster parents shall be the primary person responsible for providing the information to the agency's social worker, whereas the social worker is terms is responsible for maintaining current information in the case files. The administrator shall follow progress during weekly supervision with agency's social workers.

**#40: Based on the services provided by the FFA, has the child's academic performance and/or attendance increased (e.g. improved grades, test scores, promotion to the next level, H.S. grad, IEP goals)?**

**CAP:** SBBFFFA shall ensure that all efforts shall be made to improve academic performance progress in the above listed areas. The agency shall make required referrals for needed services that are not provided within the agency to accomplish the required needs. The certified parent and the agency social worker shall work in conjunction with each other to provide the needed services to meet the academic needs of the child. These efforts shall be documented in weekly progress notes and in quarterly (NSP's). The certified parent and the FFA social worker shall be the primary persons responsible for making necessary efforts to provide the academic support to get the need met. The agency's administrator shall monitor for compliance during weekly social worker's supervision.

**#41: Does the FFA facilitate (encourage) the age-appropriate children's participate in YDS or equivalent services, and vocational training programs or document barriers to obtaining such services and efforts to resolve issues, when applicable? (SELF-SUFFICIENCY)**

**CAP:** SBBFFFA shall monitor for compliance that all age-appropriate children participate in YDS or equivalent programs. The agency's certified foster parents and agency's social workers shall encourage as well as provide all needed resources/services to meet the required goal. The certified foster parent and agency social worker shall work in partnership in assisting the in meeting their needs.

## HEALTH AND MEDIACAL NEEDS

**#42: Are initial medical examinations conducted timely? (WELL-BEING)**

**CAP:** SBBFFFA shall monitor for compliance that all initial medical exams conducted timely. The agency shall document all efforts when the timely exams were not conducted timely. The certified foster parent and the social worker shall be the responsible persons for meeting the above requirement. The administrator shall monitor the progress during weekly supervision with social workers.

**#44: Are initial dental examinations conducted timely? (Well-BEING)**

**CAP:** SBBFFFA shall monitor for compliance that all initial dental exams are conducted timely. The agency shall document all efforts when the timely exams were not conducted timely. The certified foster parent and the social worker shall be the responsible persons for meeting the above requirement. The administrator shall monitor the progress and the documentation during weekly supervision with the social workers.

## PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

**#64: Does the certified foster parent encourage and assist children to update a book or a photo album? (PERMANENCY)**

**CAP:** SBBFFFA shall ensure that all certified foster parents encourage and assist placed children in updating a life book or a photo album. The certified foster parent shall be the primary person responsible for meeting updating the life book/photo album. In addition, during home visits agency's social workers shall monitor for progress and the agency's administrator shall follow up during weekly supervision

with social workers. All children's files shall contain current information on updated life books.

**DO REQUIRED EMPLOYEES WHO TRANSPORT CHILDREN, HAVE A VALID CA DRIVER'S LICENSE AND AUTO INSURANCE? (SAFETY)**

**#72: Do required employees who transport children, have a valid CA driver's license and auto insurance? (SAFETY)**

**CAP:** SBBFFFA shall ensure that all required employees who transport children, have a valid CA driver's license and auto insurance? (SAFETY). The quality assurance person shall be the primary person responsible for implementing the above requirement and maintaining current information in the employee's file.

**#76: Does the FFA maintain written declarations for part-time contract social workers' collective caseloads not to exceed fifteen (15) children.**

**CAP:** SBBFFFA shall ensure that all part-time contract social workers have a written declaration stating their collective caseload does not exceed fifteen (15) children. The administrator shall be the primary person responsible for implementation. The declaration shall be kept in the employee's personnel file.

**ATTACHMENT: TRAINING FOR SOCIAL WORKERS AND CFP(S)**

**THE EFFECTIVE DATE FOR THECAP IS MARCH 21, 2014.**

# SOUTH BAY BRIGHT FUTURE, INC.

24404 South Vermont Avenue, Suite 201 • Harbor City, CA 90710
Phone: (310) 891-0096 • FAX (310) 891-0195


**April 21, 2014**

**South Bay Foster Family Agency provided training to the agency's social workers included but not limited to the following:**

- **Special Incident Reporting**
- **Needs and Service Plans ( Timely initial and updated, comprehensive NSP(s), Medical/Dental exams, Home evaluations, disaster drills, life book, etc.)**
- **Required signatures on NSP (s)**
- **Participation with creation of NSP with Child and certified child**
- **Timely home evaluations**
- **Timely disaster drills**

**Attachments:** **Training: Agency Social Workers**

**Certified Foster Parents**

**Photo of Clara Johnson Home showing removable of sofa from obstructing doorway to patio**

**Thanks**

**Marvett Black**

012/017
SOUTH BAY BRIGHT FUTURE
04/21/2014 16:51 FAX 13108910195

***South Bay Bright Future***
***Training Class Sign-In Sheet***

**Trainer:** Marvett Black

**Class Title:** S.I.R. (Special Incident Reporting); NSP's (Needs & Service Plans); Medical/Dental; Home Evaluations; Disaster Drills; Life Books

| Attendee | Date | Time | Email | Home Phone | Cell Phone |
|---|---|---|---|---|---|
| STAFF & SOCIALWORKERS | | | | | |
| Kai Green | 4/4/14 | 4 PM | MsKaigreen@aol.com | | |
| Vichey Pich | 4/3/14 | 1 am | vichey.p@yahoo.com | | |
| Gwen Cermak | 4/3/14 | 3 PM | NA | 562-552-5863 | |
| Deatra Handy | 4/1/14 | 1 30 | deedee.handy@aol.com | | |
| Tracy Peeples | 4/3/14 | 4 30 | tracypeples@aol.com | | |
| Leah Ojinna | 4/1/14 | 4 PM | Leahginna@yahoo.com | | |

013/017
SOUTH BAY BRIGHT FUTURE
04/21/2014 16:51 FAX 13108910185

## *South Bay Bright Future*
## *Training Class Sign-In Sheet*

**Class Title:** Special Incident Reporting (SIR) Training

**Instructor:** Marvett Black

| Attendee | Date | Signature | Home Phone | Cell Phone |
|---|---|---|---|---|
| Ronnie Blaylock | 4-9-14 | Ronnie Blaylock | | |
| Donna Blaylock | 4-9-14 | Donna Blaylock | | |
| Anita Brown | on-leave - no placements | | | |
| Jeraleen Brown | 4/1/14 | Jeraleen Brown | | |
| Edith Evans | 4-14-14 | Edith Evans | | |
| Cesareo Guzman | 4-4-14 | [illegible] | | |
| Natalia Guzman | 4-4-14 | Natalia Guzman | | |
| Traci Harder | on-leave - no placements | | | |
| Renee Henderson | 4-16-14 | Renee Henderson | | |
| Jose Hernandez | relocating to Utah - | | no placement | |
| Marisol Hernandez | relocating to Utah - | | no placements | |
| Gloria Jackson | 4-14-14 | Gloria Jackson | | |
| Martha Jackson | 4-7-14 | Martha Jackson Jones | | |
| Clara Johnson | 4-4-14 | Clara L. Johnson | | |
| Burnadean Lindsey | 4/05/14 | Burnadean Lindsey | | |
| Mae Miller | 4/01/14 | Mae Miller | | |
| Leonardo Morales (MR. Padilla) | 4-7-14 | not certified | | |
| Flor Padilla | 4-7-14 | Flor Padilla | | |
| Jesus Rangel | 4-4-14 | Jesus Rangel | | |
| Veronica Rangel | 4/9/14 | Veronica Rangel | | |
| Tedra Jackson | 4/7/14 | Tedra Jackson | | |

***South Bay Bright Future***
***Training Class Sign-In Sheet***

| Attendee | Date | Signature | Home Phone | Cell Phone |
|---|---|---|---|---|
| Kristina Royce | | On-leave / No placement | | |
| Anyetta Smith | 4/2/14 | Anyetta Smith | | |
| Candace Smith | 4-14-14 | Candace M Smith | | |
| Carol Harper | | No placement | | |
| Felicia Bernoudy | 4/14/14 | Felicia Bernoudy | | |
| Cherelle Hartley | 4-14-14 | Cherelle Hartley | | |