County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

PHILIP L. BROWNING
Director

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October 14, 2015

To: Supervisor Michael D. Antonovich, Mayor
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Don Knabe

From: Philip L. Browning
Director

OLIVE CREST TREATMENT CENTERS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contract Administration Division (CAD) conducted a contract compliance review of Olive Crest Foster Family Agency (the FFA) in February 2015. The FFA has four offices, one in the Fourth Supervisorial District, one in the Fifth Supervisorial District, one in Orange County, and one in Riverside County. All four offices provide services to the County of Los Angeles DCFS placed children, as well as children from other counties. According to the FFA's program statement, its mission is "to provide stability and belonging in the lives of the most needy children in our society while making every effort to reunify the placed children with their natural family."

At the time of the review, the FFA supervised 95 DCFS placed children in 160 certified foster homes. The placed children's average length of placement was ten months, and their average age was six.

SUMMARY

During CAD's contract compliance review, the interviewed children generally reported feeling safe in the FFA certified foster homes; 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 5 of 11 areas of our contract compliance review: Facility and Environment, Psychotropic Medications, Personal Rights and Social Emotional Well-Being, Discharged Children, and Personnel Records.

CAD noted deficiencies in areas of: Licensure/Contract Requirements, related to Special Incident Reports (SIRs) not being submitted timely and Community Care Licensing (CCL) citations; Certified Foster Homes, related to safety inspections not being completed every six months;

Maintenance of Required Documentation and Service Delivery, related to the FFA not obtaining or documenting efforts to obtain DCFS Children's Social Worker's authorization to implement the Needs and Service Plan (NSP), the FFA Social Worker not developing timely updated NSP's, and the FFA Social Worker not developing timely quarterly reports; Education and Workforce Readiness, related to one child not being enrolled in school within three school days; Health and Medical Needs, related to initial medical exams not being completed timely; and Personal Needs/Survival and Economic Well-being, related to children not being encouraged or assisted with Life Books or Photo Albums.

Attached are the details of our review.

REVIEW OF REPORT

On April 27, 2015, Matthew St. John, DCFS CAD, held an Exit Conference with FFA representatives: Jessica Valdez, Program Director of the Los Angeles sites; Karl Stenske, Program Director of the Orange County site; Lisa Aguilar, Foster Family Specialist; Cara Baker, FFA Supervisor; Cyndi Bemis, Case Manager Supervisor; Michelle Valdiva, FFA Supervisor; and Lauren Bowlby, FFA Administrator. DCFS staff included Sonya Noil, Out-of-Home Care Management Division (OHCMD). The FFA representatives were in agreement with the review findings and recommendations; receptive to implementing systemic changes to improve compliance with regulatory standards; and to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this 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.

CAD conducted follow-up visits to the FFA on July 15 and 21, 2015, to verify implementation of the CAP.

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

PLB:EM
LTI:ms

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Donald A. Verluer, Chief Executive Officer, Olive Crest Treatment Centers
Leonora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

OLIVE CREST TREATMENT CENTERS, FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE REVIEW SUMMARY

17800 Woodruff Avenue, Suite F
Bellflower, CA 90706
License # 197805185

2130 East 4th Street
Santa Ana, CA 92705
License # 300600003

805 North Central Avenue, Suite 200
Glendale, CA 91203
License # 197806398

555 Technology Court, Suite 300
Riverside, CA 92507
License # 336425183

	Contract Compliance Review	**Findings: February 2015**
I.	**Licensure/Contract Requirements** (7 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Timely, Cross-Reported SIRs	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 Training	5. Full Compliance
	6. FFA Pays Certified Foster Parents (CFP) Whole Foster Family Home Payments	6. Full Compliance
	7. FFA Conducts an Assessment of CFP Prior to Placement of Two (2) or More Children	7. Full Compliance
II	**Certified Foster Homes** (12 Elements)	
	1. Home Study and Safety Inspection Conducted Prior to Certification	1. Full Compliance
	2. Agency's Inquiry with OHCMD for Historical Information Prior to Certification	2. Full Compliance
	3. Timely, Criminal Clearances (DOJ, FBI, CACI) Prior to Certification	3. Full Compliance
	4. Timely, Completed, Signed Criminal Background Statement	4. Full Compliance
	5. Health Screening & TB Test Prior to Certification	5. Full Compliance
	6. All Required Training Prior to Certification	6. Full Compliance
	7. Certificate of Approval on File/Including Capacity	7. Full Compliance
	8. Safety Inspection 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	10. Full Compliance
	11. Criminal Clearances and Health Screening/CDL/CPR/ DOJ/FBI/CACI/Auto	11. Full Compliance

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

	Equivalent Services and Vocational Programs	
VI	**Health and Medical Needs** (4 Elements) 1. Initial Medical Exams Conducted Timely 2. Follow-Up Medical Exams Conducted Timely 3. Initial Dental Exams Conducted Timely 4. Follow-Up Dental Exams Conducted Timely	1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Full Compliance
VII	**Psychotropic Medications** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	Full Compliance (All)
VIII	**Personal Rights and Social Emotional Well-Being** (10 Elements) 1. Children Informed of Agency's Policies and Procedures 2. Children Feel Safe in the CFP Home 3. CFPs' Efforts to Provide Nutritious Meals and Snacks 4. CFPs Treat Children with Respect and Dignity 5. Children Allowed Private Visits, Calls and to Receive Correspondence 6. Children Free to Attend or Not Attend Religious Services/Activities of Their Choice 7. Children's Chores Reasonable 8. Children Informed About Their Medication and Right to Refuse Medication 9. Children Aware of Right to Refuse or Receive Medical, Dental and Psychiatric Care 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) 1. Clothing Allowance Provided in Accordance with FFA Program Statement 2. On-going Clothing Inventories of Adequate Quantity and Quality 3. Children's Involvement in Selection of Their Clothing 4. Provision of Sufficient Supply of Clean Towels and Personal Care Items Meeting Ethnic Needs 5. Minimum Weekly Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement/Assistance with Life Book or Photo Album	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed
X	**Discharged Children** (3 Elements) 1. Completed Discharge Summary 2. Attempts to Stabilize Children's Placement 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 2. Timely, Completed, Signed Criminal Background Statement 3. FFA Social Workers Met Education/Experience Requirements 4. Timely Employee Health Screening/TB Clearances 5. Valid CDL and Auto Insurance 6. FFA Employees Signed Copies of FFA Policies and Procedures 7. FFA Employees Completed All Required Training and Documentation Maintained 8. FFA Social Workers Have Appropriate Caseload Ratio 9. FFA Maintained Written Declarations for Part-Time Contracted FFA Social Workers Caseloads Not to Exceed a Total of 15 Children	Full Compliance (All)

OLIVE CREST TREATMENT CENTERS FOSTER FAMILY AGENCY
CONTARCT COMPLIANCE MONTORING REVIEW
FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The following report is based on a "point in time" review. This compliance report addresses findings noted during the February 2015 review. The purpose of this review was to assess Olive Crest Foster Family Agency's (the FFA's) compliance with its County contract and State regulations and included a review of the FFA's program statement, as well as internal administrative policies and procedures. The 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 the purpose of this review, ten placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed six children. Four children were not interviewed due to their young age. During the home visits, the children were observed to be comfortable in the certified foster homes (CFHs) and the certified foster parents (CFPs) were observed to be attuned to the needs of the children. CAD reviewed all ten case files to assess the care and services the children received. Additionally, five discharged children's files were also reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, two children selected from the sample were prescribed psychotropic medication. Their case files were reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed five CFP files and five staff files for compliance with Title 22 regulations and County contact requirements. Interviews were conducted with five CFPs to assess the quality of care and supervision provided to the children.

CONTRACTUAL COMPLIANCE

CAD found the following areas to be out of compliance:

Licensure/Contract Requirements

- Special Incident Reports (SIRs) were not submitted timely.

Seven SIRs were not submitted timely. One incident was reported to the FFA three days later and the SIR submitted by the FFA two days after the notification. Another incident was reported to the FFA the next evening and the SIR was submitted by the FFA approximately 24 hours after the notification. Three SIRs were submitted two days late and one was submitted four days late. Also, another incident was reported to the FFA seven days late; however the FFA submitted the SIR on the eighth day.

- Community Care Licensing (CCL) cited the FFA.

CCL cited the FFA as a result of deficiencies and findings noted during a CCL investigation initiated by a complaint received on October 10, 2014. According to the report dated January 7, 2015, the allegation was due to a lack of supervision in a CFP's home when a non-minor dependent (NMD) and a placed child were left home alone. The NMD had prior incidents of touching others inappropriately and had allegedly attempted to choke and touch another placed child inappropriately. The NMD denied the allegation and the child did not want to talk about it. The CFP did not witness the incident, but during the investigation the NMD and placed child were left in the home alone together, despite the allegations and prior incidents involving the NMD touching others. Therefore, the allegation of Lack of Supervision was substantiated. CCL requested a Plan of Correction (POC), which required that the CFP never leave the two children alone together, especially behind closed doors. A safety plan was initiated for the CFP's adult biological son, who resided in the back house and had a clear background check. He would be allowed as a babysitter when the CFP was not present. No further action was taken by CCL. The deficiency was cleared by CCL on January 7, 2015. This was investigated by the Department of Children and Family Services (DCFS) Emergency Response (ER) Children's Social Worker (CSW) and the referral was concluded as inconclusive. Out-of-Home Care Investigation Section (OHCIS) completed an investigation and confirmed the CCL finding and requested a CAP for the FFA to discuss with the CFP the incident regarding the two children, review the certified babysitter requirements, and SIR protocols. The FFA submitted the CAP to OHCIS on July 17, 2015. OHCIS approved the CAP on July 17, 2015.

CCL cited the FFA as a result of deficiencies and findings noted during a CCL investigation initiated by a complaint received on July 17, 2014. According to the report dated September 10, 2014, there was an allegation of "children were not properly transported". The CFP admitted to the mistake of allowing another adult to transport six children to the FFA in a compact vehicle where there was a lack of proper seating equipment for all six passengers. The allegation was substantiated and CCL requested a POC requiring the CFH to be de-certified and the FFA was to provide a copy of the de-certification to CCL. The home was de-certified on July 21, 2014 and verification was provided to CCL. The POC was cleared on September 10, 2014. This incident was investigated by the DCFS OHCIS and the referral was concluded as unfounded. After the investigation was completed, an "indefinite hold" on the CFH was placed and it will no longer be used as a placement resource for DCFS children.

CCL cited the FFA as a result of deficiencies and findings resulting from a complaint received on March 19, 2015. According to the report dated March 27, 2014, one child was using a futon in place of a bed and another child had a mattress with no bed frame. CCL requested a POC that the FFA would ensure that each placed child had a bed in their room. The FFA would also provide a refresher course to all social workers, supervisors and foster family specialists to ensure that appropriate furniture is present in each room of their CFHs according to Title 22. The FFA was to

ensure that the CFPs replace the inappropriate beds with bunk beds and provided photographic evidence to CCL. Training was provided to the FFA staff on April 8, 2014, entitled the "Foster Treatment Team - Title XXII Review". A photograph copy of the sign-in sheet was provided to CCL. The CCL cleared the POC on April 11, 2014. This did not result in a Child Abuse Hotline (CAHL) referral.

CCL cited the FFA as a result of deficiencies and findings noted during a CCL investigation initiated by a complaint received on March 4, 2014. According to the report dated March 10, 2014, a CFP tied an elastic canvas belt to a baby's ankle and tied the belt to the crib in an attempt to keep the child from crawling out of the crib. The allegation of a personal rights violation was substantiated. This incident was investigated by the Orange County Department of Children Services. The allegations of Physical Abuse were unfounded, At Risk Sibling Abuse was substantiated and General Neglect was substantiated. CCL requested a POC, which required that the CFH be de-certified. The home was de-certified on April 11, 2014 and the POC was cleared by CCL on April 11, 2014.

Recommendations:

The FFA's management shall ensure that:

1. SIR's are submitted timely.

2. The FFA is in compliance with Title 22 regulations and free of CCL citations.

Certified Foster Homes

- Safety Inspections were not completed at least every six months.

For CFH #1, safety inspections were conducted in August and September in the years of 2013 and 2014. For CFH #2, only one safety inspection took place in February 2014. There was no other form of documentation provided.

An Exit Conference was held on April 27, 2015, the FFA representative stated that this issue was found during last year's compliance review. In response, the FFA began using an email notification system and safety inspections now occur every six months.

CAD completed follow-up visits with the FFA on July 15, and July 21, 2015. The FFA is now tracking when safety inspections are due for all of their CFHs and providing each case manager with monthly e-mail notifications regarding the CFHs that are due for a six month inspection. CAD reviewed the files of the CFHs originally missing safety inspections and found that each family is now on a six month scheduled cycle which begins at certification/re-certification. CAD reviewed two additional CFH files and confirmed the safety inspections are being completed according to the agencies process. An FFA representative provided CAD with a copy of the e-mail notification that is sent out to notify the case managers of which family's inspections have to be completed for that month.

Recommendation:

The FFA's management shall ensure that:

3. Safety inspections are completed at least every six months or pre-approved per program statement.

Maintenance of Required Documentation/Service Delivery

- The FFA did not document efforts to obtain the County CSW's authorization to implement Needs and Service Plans (NSPs).

In reviewing twenty-five NSPs, it was found that eight did not have the required CSW signature, or did not have appropriate documentation of at least three attempts to contact the CSW for authorization timely.

CAD completed follow-up visits with the FFA on July 15 and 21, 2015. An additional eight NSPs were reviewed and the CSW's signature was obtained timely or at least three attempts to obtain the CSW's signature were completed for each.

- The FFA social worker did not develop timely updated NSPs.

In reviewing twenty updated NSPs, it was found that four NSPs dated May 28, 2014, were not signed by the FFA social worker until June 4, 2014.

CAD completed follow-up visits with the FFA on July 15 and 21, 2015. Four additional updated NSPs were reviewed and confirmed that they were developed timely.

- The FFA social worker did not develop timely quarterly reports.

In reviewing twenty updated quarterly reports, it was found that four quarterly reports dated May 28, 2014, were not signed by the FFA social worker until June 4, 2014.

CAD completed follow-up visits with the FFA on July 15 and 21, 2015. Four additional updated quarterly reports were reviewed and confirmed that they were developed timely.

Recommendations:

The FFA's management shall ensure that:

4. The FFA will obtain or document efforts to obtain the County CSW's authorization to implement NSPs.

5. The FFA social worker develops timely updated NSPs.

6. The FFA social worker develops timely quarterly reports.

Education and Workforce Readiness

- A child was not enrolled in school within three school days.

One child's file reflected the child was enrolled on the fourth day of placement. A note in the NSP reflected that there was a delay in enrolling the child, due to not having received the Health and Education Passport timely.

CAD completed a follow-up to the FFA's Riverside office on July 21, 2015. CAD reviewed the files of the two most recently placed DCFS children. One of the placed children was not of school age. The second child was enrolled in school within three days of placement.

Recommendation:

The FFA's management shall ensure that:

7. Children are enrolled in school within three school days.

Health and Medical Needs

- Initial Medical Exams were not conducted timely.

Four children's initial medical exams were not completed timely. The records reflected that the CFP was told the Medical Hub would be calling with an appointment date. The CFP did not receive a telephone call from the Hub and no further efforts were documented by the FFA to ensure the initial medical exams took place within the first 30 days of placement.

CAD completed a follow-up visit at the FFA's Santa Ana office on July 15, 2015. The files of three newly placed DCFS children were reviewed and it was confirmed that each child's initial medical exam was completed timely.

Recommendation:

The FFA's management shall ensure that:

8. Initial Medical Exams are conducted timely.

Personal Needs/Survival and Economic Well-Being

- Children are not encouraged/assisted with a Life Book or Photo Album.

Two children stated they were not encouraged or assisted with the development or maintenance of a Life Book or Photo Album. CAD completed follow-up visits at the FFA on July 15 and 21, 2015. CAD confirmed that one of the two children that did not have a Life Book was provided a Life Book. The FFA provided CAD photographic evidence of some of the pages/drawings completed from the Life Book on July 17, 2015. The FFA representative stated that an update has been

made to the FFA's "Case Manager Contact Record," which has included a check box for "Life Book".

The County of Los Angeles children who are placed out of the county will also be provided Life Books. Training was provided on August 22, 2015, to the Riverside County CFPs on the provision of Life Books.

Recommendations:

The FFA's management shall ensure that:

9. Children are encouraged/assisted with a Life Book or Photo Album.

PRIOR YEAR FOLLOW-UP FROM DCFS CAD'S FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The CAD's last compliance report, dated January 16, 2015, identified 18 recommendations.

Results

Based on our review, the FFA fully implemented 14 of 18 recommendations for which they were to ensure that:

- All Certified Foster Parent's complete the required annual trainings timely.
- Common Areas are well maintained.
- Bedrooms are well maintained.
- Sufficient and appropriate educational resources are maintained.
- Appropriate monetary and clothing allowances logs are maintained.
- All Initial NSP's are timely and comprehensive.
- County CSW monthly contacts are documented.
- Follow-up medical exams are timely.
- Follow-up dental exams are timely.
- Assigned chores are age-appropriate.
- Weekly monetary allowances are provided.
- Age-appropriate children are allowed to manage their allowance/earnings, unless it is specified in the NSP.
- All proper criminal clearances are obtained before a person starts work.
- All employees complete the required annual trainings, as described in the FFA's program statement.

The FFA did not implement 4 of 18 recommendations for which they were to ensure that:

- Safety inspections are conducted every six months.
- All updated NSPs are timely and comprehensive with child's participation.
- Quarterly reports are timely and comprehensive.
- Encouragement/assistance with Life Books/Photo Albums is provided.

Recommendation:

The FFA management shall ensure that:

10. The outstanding recommendations from the 2013-2014 compliance review report dated January 16, 2015, which are noted as Recommendations 3, 5, 6 and 9, are fully implemented.

At the Exit Conference, the FFA representatives expressed their desire to remain in compliance with all Title 22 regulations and contract requirements. The FFA representatives stated that they will implement procedures to strive towards greater compliance. Follow-up visits were conducted on July 15 and 21, 2015, by CAD and the FFA had implemented 7 of 9 recommendations noted in this report. An additional fourteen SIRs were reviewed for follow-up. CAD found that one SIR was not cross reported to CCL and three were submitted late. CAD contacted CCL and spoke with the FFA duty worker, who confirmed there was a new citation issued on June 17, 2015, for findings and deficiencies. The FFA was advised to fully implement all protocols. CAD will continue to assess the full implementation of the recommendations during our next monitoring review. Out-of-Home Care Management Division will provide on-going technical assistance prior to the next review.

OLIVE CREST
Strong Families, Safe Kids

1.800.550.CHILD (2445)
www.olivecrest.org

May 28, 2015

Matthew St. John, CSA I
Contract Compliance Section
Metroplex Wilshire
3530 Wilshire Blvd.
Los Angeles, CA, 90010 .

RE: Corrective Action Plan for Foster Family Agency Monitoring Review(Revised 6/2/15 per DCFS request)

Dear Mr. John,

Per your request, we submit the following as our Corrective Action Plan (CAP) consequent to the finding of our Foster Family Agency Monitoring Review you conducted on February 6th 2015.

The following CAP is therefore submitted for the Departments review:

Item/Area not found in compliance:
Section I: Licensure/Contract Requirements
Question 2: Are Special Incident Reports (SIRs) appropriately documented and cross reported? (SAFETY)

Agency's Response:
The FFA, Bellflower office was cited during the review for not submitting SIR's on time. The FFA has updated their policy and procedures to ensure that SIR's are submitted on time (Please see attachment). The FFA, Bellflower will review the in house SIR policy and procedures with case mangers and the importance of reporting on time and cross-reporting SIR's with County Social Worker, CCL and OHC on June 2nd 2015. In attendance will be the following staff:

[redacted]- Case Manager
[redacted]- Case Manager
[redacted]- Case Manager
[redacted]- Case Manager
[redacted]- Assistant Supervisor
[redacted]- Supervising Case Manager (Santa Ana Office)
[redacted]- Supervising Case Manager (Santa Ana Office)
[redacted]-Case Manager (Santa Ana Office)

Item/Area not found in compliance:

Section I: Licensure / Contract Requirements

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

Agency's Response:

During the review there were 4 CCL findings, one from the FFA Santa Ana office and 3 from the Bellflower office.

The FFA, Santa Ana office had a CCL finding for Certified Foster Home that was restraining a child to a crib (See Complaint number [redacted]). The foster family removed the belt used to keep the child from crawling out of the crib before FFA Case Manager arrived for regularly scheduled home visits. Due to the foster family's intentional removal, the FFA Case Manager, was unaware of the practice. Once FFA was notified the certified foster home was decertified immediately on April 11, 2014.

The FFA, Bellflower office had 3 CCL findings for 3 Certified Foster Homes. The first Certified Foster Home was cited for Lack of Supervision (See Complaint number [redacted]). The Case Manager visits the home on a weekly basis and regularly talks with Foster Mother regarding proper supervision and better communication with certified babysitter. In addition, on 5/27/15, the Case Manager reviewed FFA guidelines on foster child supervision, not leaving a foster child alone and how to utilize certified babysitter.

The second Certified Foster Home was cited for children not being properly transported (See Complaint number [redacted]). During a monitored visit the FFA discovered that the children were improperly transported and reported the incident to Child Abuse Hotline. The FFA then removed the children from the home and placed them in respite care and the Certified Foster Home was decertified immediately on July 21, 2014.

The third Certified Foster Home was cited for not having appropriate beds for the children. Once the FFA was informed the family was contacted and asked to replace the inappropriate beds with appropriate bunk beds. The Certified Foster Home purchased appropriate bunk beds and provided pictures to submit to CCL. On 4/8/2014, the FFA supervisor reviewed the Title XXII regulations with all staff.

Item/Area not found in compliance:

Section II: Certified Foster Homes

Question 15: Were safety inspections completed at least every six months or per the timelines approved in the agency's Program Statement? (SAFETY)

Agency's Response:

Both FFA Bellflower and Riverside offices were cited during the review for not completing home inspections every six months. All staff have been reminded to conduct bi-annual safety inspections and to promptly document these inspections. FFA case managers will complete safety inspections at re-certification and 6 months thereafter. The FFA program supervisor will conduct quarterly audits to verify completion of the inspections and ensure that the appropriate documentation is on file.

Item/Area not found in compliance:

Section IV: Maintenance of Required Documentation and Service Delivery

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

Agency's Response:

Both FFA Santa Ana and Riverside offices were cited during the review for not obtaining CSW signatures on time and/or having proper documentation for 3 attempts to obtain CSW signature.

The FFA Santa Ana office had a two hour NSP training on 10/27/14. On 12/1/14, there was an additional training regarding the need to document three attempts, to record the attempts on the NSPs and to save copies of emails requesting attempts. The FFA will continue to provide ongoing training reinforcing the best practices for obtaining timely signatures and documenting attempts made to receive the signature of the CSW. The Santa Ana supervisor is requesting that NSPs be submitted on or prior to due date. Supervisor has been and will continue to request on each report, that each Case Manager alerts her when all signatures have been received, and/or when three requests have been made to the CSW for signatures within a five day period following the due date of the report.

FFA Riverside supervisor has reviewed practices with all staff. FFA case managers will make 3 attempts to obtain county worker's signature within 5-business days and document all efforts made to obtain county worker's signature. These attempts will be document in the NSP and the form of the request (email, or fax) will be attached to the NSP.

Overall all FFA supervisors will continue to conduct quarterly audits to verify completion of the NSP's and ensure that the all signatures have been obtained or three attempts have been completed and are appropriately documented on file.

Item/Area not found in compliance:

Section IV: Maintenance of Required Documentation and Service Delivery

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

Agency's Response:

The FFA Santa Ana office was cited during the review for not having all FFA signatures on the NSP. Santa Ana supervisor has reviewed practices with all staff. In addition all staff was reminded of the contract requirement of timely signatures and ensuring that FFA staff completes and signs all NSPs on or before the due date. The FFA will continue to provide ongoing training reinforcing the best practices for obtaining timely signatures and requiring all staff to sign the NSP on or prior to the due date.

Item/Area not found in compliance:

Section V. Education and Workforce Readiness

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

Agency's Response:

The FFA Riverside office was cited during the review for not enrolling a child in school within the 3 day time frame. The child was enrolled on the 4th day and a note on the NSP reflects there was a delay in enrolling the child due to a delay in receiving the Health and Education Passport. The FFA supervisor has reviewed policy and practices with all staff. FFA case managers will verify that any school aged children have the required paperwork at intake

and contact county workers if paperwork is missing immediately. These attempts will be document in the correspondence log.

Item/Area not found in compliance:
Section VI: Health and Medical Needs
Question 42: Are initial medical examinations conducted timely? (WELL-BEING)

Agency's Response:
The FFA Santa Ana office was cited during the review for not completing the initial health screening for a sibling set of four during the required time frame. The foster mother was informed by the CSW that the HUB would be contacting her to set an appointment. The foster mother was never called and no other efforts were made to schedule the initial health examination.

On 10/27/14 Santa Ana supervisor conducted a two hour training on requirements and protocol for timeline of initial health screening and methods to monitor compliance from the Foster Families. The FFA Case Managers have also been provided with training as to how to navigate cross county Medi-cal issues, which can tend to delay Medi-cal approvals in the case of initial medical appointments. They have been provided with the supervisor's phone number to the Medi-cal Expectations Unit/ DCFS, and they are required to document all efforts to make certain that the child is approved through Medi-cal in the appropriate county. They have been told that medical appointments must be made within the proper time frames, regardless of when the initial HUB appointments are scheduled.

Item/Area not found in compliance:
Section IX: Personal Needs/Survival and Economic Well-Being:
Question 64: Does the certified foster parent encourage and assist children to update a life book or a photo album? (PERMANENCY)

Agency's Response:
The FFA Bellflower and Riverside office were cited during the review for child not being encouraged or helped with a life book or scrapbook of pictures.

FFA Bellflower supervisor has reviewed policy regarding life books with all staff. FFA case managers were instructed to inform their families upon placement that if child did not come with a life book they need to start one and encourage child to update. If an infant is placed foster parents are encouraged to start one and update photos for infant. The FFA program supervisor will conduct quarterly audits to verify that case manager's have addressed life book at intake and ongoing via their contact notes.

If any additional information is needed, you may contact me at (562)977-6912 or our LA Director, Jessica Valdez at (562) 977-6970.

Respectfully,

Michelle Valdivia
Foster and Adoption Supervisor LA Region