County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
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November 19, 2015

To: Supervisor Michael D. Antonovich, Mayor
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Supervisor Sheila Kuehl
Supervisor Don Knabe

From: Philip L. Browning
Director

ALPHA TREATMENT CENTERS FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a review of Alpha Treatment Centers Foster Family Agency (the FFA) in November 2014. The FFA has one licensed office located in the First Supervisorial District and provides services to DCFS placed children. According to the FFA's program statement, its mission is "to provide foster care and treatment for abused and neglected children while reunification services with their families are being explored and/or completed."

At the time of the review, the FFA supervised 56 DCFS placed children in 25 certified foster homes. The placed children's average length of placement was ten months and their average age was nine.

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 dignity and respect. 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; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medications; and Discharged Children.

CAD noted deficiencies in the following areas: Licensure/Contract Requirements, related to special incident reports not being submitted timely and Community Care Licensing (CCL) citations; Certified Foster Homes, related to the FFA not obtaining historical information verification from the Out-of-Home Care Management Division (OHCMD) prior to certification and one vehicle used to

transport the children not being well maintained; Maintenance of Required Documentation and Service Delivery, related to updated Needs and Service Plans not being developed timely and not submitting quarterly reports to County workers timely; Personal Rights and Social/Emotional Well-Being, related to one child reporting not feeling safe in the certified foster home; Personal Needs/Survival and Economic Well-Being, related to not providing sufficient supply of clean towels and adequate personal care items, one child reporting that she was not free to manage her allowance and four children not having a life book or photo album; and Personnel Records, related to two employees not signing a criminal background statement timely.

Attached are the details of our review.

REVIEW OF REPORT

On January 26, 2015, Linda Lai, DCFS CAD, held an Exit Conference with the FFA representative Rachel Dyer, Social Services Director. DCFS staff included Kong Ng, OHCMD. The FFA representative was in agreement with the review findings and recommendations; was 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 Compliance CAP addressing the recommendations noted in this compliance report. CAD conducted a follow-up visit to the FFA on April 30, 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:ll

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
Emmanuel Humphries, Chief Executive Officer, Alpha Treatment Centers
Lenora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

ALPHA TREATMENT CENTERS FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

1044 W. West Covina Parkway
West Covina, CA 91790
License Number: 197805881

	Contract Compliance Monitoring Review	**Findings: November 2014**
I.	**Licensure/Contract Requirements** (7 Elements)	
	1. Timely Notification for Child's Relocation	1. Not Applicable
	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. Not Applicable
	6. FFA Pays Certified Foster Parents (CFP) Whole Foster Family Home Payments	6. Not Applicable
	7. FFA Conducts an Assessment of CFP Prior to Placement of Two (2) or More Children	7. Not Applicable
II	**Certified Foster Homes (CFHs)** (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. Improvement Needed
	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. Full Compliance
	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. Improvement Needed
	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 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's 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. Full Compliance 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 Equivalent Services and Vocational Programs	Full Compliance (All)

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	Full Compliance (All)
VII	**Psychotropic Medications** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	Full Compliance (All)
VIII	**Personal Rights 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	1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance

IX	**Personal Needs/Survival and Economic Well-Being** (7 Elements) 1. Clothing Allowance Provided in Accordance with FFA Program Statement 2. Ongoing 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. Improvement Needed 5. Full Compliance 6. Improvement Needed 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	1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance

ALPHA TREATMENT CENTERS FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the November 2014 review. The purpose of this review was to assess Alpha Treatment Centers 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 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 the purpose of this review, ten placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed seven of the ten children. Three children were not interviewed as they were either pre-verbal or too young. During the home visits, the children were observed to be comfortable and well-cared for in the certified foster homes (CFHs) and their 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 they received. Additionally, four discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, two placed children selected for 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 four CFH files and four staff files for compliance with Title 22 regulations and County contract requirements. Site visits were conducted to the FFA and the CFP's homes to assess the quality of care and supervision provided to children.

CONTRACTUAL COMPLIANCE

CAD found the following areas out of compliance:

Licensure/Contract Requirements

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

Three of eleven SIRs reviewed were not timely submitted into the I-Track database. One SIR was submitted on March 13, 2014, for an incident that occurred on March 9, 2014. Another SIR was submitted on July 8, 2014, for an incident that occurred on July 4, 2014. The third SIR was submitted in the late evening on August 27, 2014, for an incident that occurred on August 26, 2014.

The FFA provided SIR and Suspected Child Abuse Report (SCAR) training to all staff on January 14, 2015 and to all CFPs on January 8, 2015. A copy of the agenda and signatures of the attendees was submitted. CAD confirmed the implementation of training during a follow-up visit on April 30, 2015.

- Community Care Licensing (CCL) cited the FFA.

CCL cited the FFA on April 24, 2014, as a result of deficiencies and findings in a complaint received March 4, 2014. According to the report dated April 24, 2014, CCL substantiated a complaint against CFP #1 who presumably did not feed the placed children and locked them in a room. CCL requested a Plan of Correction (POC) to re-train the CFP on Title 22 Personal Rights. The FFA provided training on April 30, 2014 and submitted the proof of training to CCL on May 6, 2014. The POC clearance is still pending as of August 25, 2015. CCL contacted the DCFS Children's Social Worker (CSW) on March 26, 2014, to advise her of the complaint. However, this complaint did not result in a child abuse report because reportedly the CSW assigned to the five children's case stated that she was aware that there was a history of the five sibling set making the same complaint against their respective caregivers. Additionally, one sibling admitted in therapy that their mother had coached the children to make the allegations to expedite their reunification with their mother.

CCL cited the FFA on April 28, 2014, as a result of deficiencies and findings in a complaint received April 14, 2014. According to the report dated April 28, 2014, CCL substantiated a complaint against CFP #2 who hit their biological children and the placed children witnessed the incident. As a result, this CFP was decertified by the FFA on April 28, 2014. The placed children were moved to another CFH within the FFA on April 17, 2014. The POC indicated that no further action is required by the FFA at this time. The POC was cleared on April 28, 2014. The related child abuse referral was investigated by San Bernardino County Child Protective Services Office.

CCL cited the FFA on May 13, 2014, as a result of deficiencies and findings based on a complaint received April 25, 2014. According to the report dated May 13, 2014, CCL substantiated a complaint against CFP #3 who let a placed child go to the restroom with his mother alone during a monitored visit. CCL requested a POC to re-train the CFP on Title 22 responsibility for providing care and supervision. The FFA provided training on May 27, 2014 and submitted proof of training to CCL on May 29, 2014. CCL cleared the POC on June 5, 2014. This referral was investigated by a DCFS Emergency Response (ER) CSW who deemed the allegations of Physical Abuse and At-Risk by the CFP to be inconclusive. Out-of-Home Care Investigation Section (OHCIS) requested a Corrective Action Plan (CAP) from the FFA to provide training and to remind the CFPs of the consequence for not cooperating with any ER investigations. OHCIS approved the CAP on February 20, 2015.

CCL cited the FFA on May 15, 2015, as a result of deficiencies and findings based on a complaint received on April 3, 2014. According to the report dated May 15, 2014, CCL substantiated a complaint of a placed child having bruises and not being well-groomed. The POC included the CFP being placed on hold and re-trained. The FFA provided training on May 14, 2015. The FFA later decertified the CFP effective June 12, 2014 and the POC was cleared on the same date. This referral was investigated by a DCFS ER CSW and the allegations of Physical Abuse, General Neglect, and At-Risk Sibling Abuse were deemed unfounded. OHCIS also investigated this referral and placed this CFH on an indefinite hold and it would no longer be used as a placement resource for DCFS children.

CCL cited the FFA on May 15, 2015, as a result of deficiencies and findings based on a complaint received on April 20, 2014. According to the report dated May 15, 2014, CCL substantiated a complaint of the placed children not being fed. The alleged perpetrator refused to be interviewed and the complaint was substantiated. CCL requested a POC where the CFH will be evaluated to determine the certification status. This CFH was decertified on June 12, 2014 and the POC was cleared on the same date. This referral was investigated by a DCFS ER CSW and the allegations of Physical Abuse, General Neglect, and At-Risk Sibling Abuse were deemed unfounded. OHCIS also investigated this referral and placed this CFH on an indefinite hold and that it would no longer be used as a placement resource for DCFS children.

On August 19, 2014, CCL noted deficiencies during visits to three CFHs on a facility evaluation report. For CFH #1, a mattress was observed on the floor of a bedroom, children were reportedly staying in the gated play yard in the family room for extended periods of time and adults were sharing a bedroom with a child over the age of two. CFH #1 was cited on March 14, 2014. For CFH #2, a storage area was being used as a bedroom by the CFP's sister-in-law and three children shared a bedroom. CFH #2 was cited on January 7, 2014. For CFH #3, the CFP did not have a key to one of the bedrooms. This was a repeat finding for the agency, but not the same home. The POC covered training to CFPs on Title 22 regulations and other physical adjustments. The FFA submitted a POC and supporting documents on September 4, 2014. CCL cleared all elements of the POC on August 19, 2014.

Recommendations:

The FFA management shall ensure that:

1. All SIRs are submitted timely and cross-reported to all required parties as per SIR reporting guidelines.

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

Certified Foster Homes

- Agency inquiries with OHCMD for historical information was not conducted prior to certification.

Two CFPs were initially certified in 2009 and 2013 respectively, but their files did not contain a record of inquiry with OHCMD for historical information.

On April 30, 2015, CAD Compliance sampled a new CFH file and confirmed that the FFA implemented the new procedures to ensure CFP files include required OHCMD information.

- One CFP did not maintain the vehicle used to transport placed children in a safe operating condition.

During the home visit on December 3, 2014, the CFP made several attempts but was unable to start the car. The CFP provided a repair receipt dated December 5, 2014. CAD conducted a follow up visit on December 9, 2014 and verified the vehicle was repaired.

Recommendations:

The FFA management shall ensure that:

3. It requests and obtains the historical information from OHCMD prior to certification.
4. All vehicles are maintained in good repair.

Maintenance of Required Documentation and Service Delivery

- Updated Need and Services Plans (NSPs) were not signed timely.

The FFA did not obtain required signatures timely on four of seventeen updated NSPs reviewed. One child had two updated NSPs that both the CFP and the FFA social worker signed more than five days past the due date. One updated NSP was due on May 4, 2014, the CFP and the FFA social worker did not sign until May 12, 2014. The other updated NSP was due on August 4, 2014, but the CFP and FFA social worker signed it on August 13, 2014. Two of the other children were siblings and their CFP signed the updated NSPs that were due on November 29, 2013, on January 15, 2014.

The FFA provided training to their social workers on January 14, 2015 and submitted a copy of the agenda and signatures to CAD. On April 30, 2015, CAD compliance conducted a follow-up visit and sampled two additional updated NSPs. These NSPs were updated timely.

- Quarterly reports were not developed timely.

The FFA did not submit two of seventeen quarterly reports to the CSW timely. The two quarterly reports were for the same child. One quarterly report was due on May 4, 2014 and the FFA submitted it to the CSW on May 12, 2014. The other quarterly report was due on August 4, 2014 and the FFA submitted it to the CSW on August 13, 2014.

The FFA provided training to their social workers on January 14, 2015, and submitted a copy of agenda and signatures to CAD. On April 30, 2015, CAD Compliance conducted a follow-up visit and sampled two additional quarterly reports and confirmed that they had been developed timely.

Recommendations:

The FFA management shall ensure that:

5. FFA social workers develop timely updated NSPs.

6. FFA social workers develop timely quarterly reports.

Personal Rights and Social/Emotional Well-Being

- A child did not feel safe in their CFH.

During an interview on November 21, 2014, one child reported that her infant brother placed at the same CFH was physically abused. A referral was immediately made to the Child Abuse Hot-Line on the same day. The assigned DCFS CSW replaced the children with relatives. This referral was investigated by a DCFS ER CSW who deemed the allegations of Physical Abuse and At-Risk Sibling Abuse to be unfounded. However, the CFP voluntarily decertified effective February 4, 2015 and the FFA re-trained all staff on January 14, 2015, regarding suspected child abuse reporting responsibilities and provided sign-in sheets of the training to CAD. On April 13, 2015, OHCIS placed this CFH on an indefinite hold and determined that it would no longer be used as a placement resource for DCFS. OHCIS also requested a Corrective Action Plan (CAP) from the FFA to address a plan of training to staff on documenting SIRS on the I-Track database. OHCIS approved the CAP on May 5, 2015.

Recommendation:

The FFA management shall ensure that:

7. Children feel safe in their CFHs.

Personal Needs/Survival and Economic Well-Being

- Provision of a sufficient supply of clean towels and personal care items that meet the ethnic needs of children was not provided.

Five children at two separate CFHs were not provided adequate personal care items. One child at CFH #1 stated during the interview that she was provided with only one towel and she does not have her own hair brush. Four other children at CFH # 2 disclosed that they share shampoo and conditioner kept in the bathroom for communal use.

During the Exit Conference, the FFA representative stated that each child will be given their own personal care items.

- One child was not free to manage an allowance.

One seven-year-old child reported while being interviewed that the CFP saved all her allowances towards the purchase of a pair of $65.00 gold earnings for her, but she was not in agreement. The

CFP provided a receipt dated November 14, 2014 and written authorization from the birth mother to pierce her ears. The FFA later decertified the CFP involved effective February 4, 2015.

- Children were not provided with Life Books/ Photo Albums.

Three children at two separate CFHs reported they were not provided with a Life Book. These children include two siblings at one home and another child at a second home.

At the Exit Conference, the FFA representative stated CFPs are provided a Life Book for each child placed with them. The FFA will verify with CFPs to ensure that Life Books are kept and updated. They will also ask CFPs to develop a written agreement when allowance is saved towards a purchase plan. The FFA provided training to all CFPs on January 8, 2015, regarding the provision of personal care items, allowance management, and Life Books. A copy of the agenda and signatures was provided to CAD on March 12, 2015.

Recommendations:

The FFA management shall ensure that:

8. Sufficient supply of clean towels and personal care items that meet the child's ethnic needs are provided.

9. Age appropriate children are allowed to manage their allowance and/or earnings.

10. All children are encouraged/assisted with maintaining a Life Book/Photo Album.

Personnel Records

- Two employees did not sign a criminal background statement timely.

Two employee files did not contain a criminal background statement at the time of Entrance Conference on November 18, 2014. One employee was hired on December 15, 2013, as new staff and another employee was rehired on March 10, 2014. The FFA representative provided a copy of the employees' criminal background statement that including their signatures dated November 18, 2014.

During a CAD follow-up visit conducted on April 30, 2015, a new employee's file was sampled and the criminal statement record was signed timely.

Recommendation:

The FFA management shall ensure that:

11. Employees complete and sign a criminal background statement timely.

PRIOR YEAR FOLLOW-UP FROM DCFS OUT-OF-HOME CARE MANAGEMENT DIVISION'S (OHCMD's) FFA CONTRACT COMPLIANCE MONITORING REVIEW

The OHCMD's last compliance report, dated March 13, 2014, identified ten recommendations.

Results:

Based on CAD's follow-up, the FFA fully implemented 8 of 10 previous recommendations for which they were to ensure that:

- The exterior and grounds of the certified foster home are well maintained.
- The common areas of the foster home are well maintained and contain no safety hazards.
- The certified foster parent provides fresh perishables for meals.
- The certified foster parent conducts and documents fire drills twice a year.
- FFA social workers have NSPs signed by the DCFS CSW or document their efforts to obtain the signature.
- FFA social workers include the certified foster parents in the development of NSPs.
- FFA social workers include all age appropriate children in the development of NSPs.
- FFA social workers complete a discharge summary after the child's placement is terminated.

Based on the results of the current review, two recommendations were not implemented:

- FFA social workers develop timely quarterly reports.
- All children are provided a Life Book/Photo Album by certified foster parents and encouraged and assisted in updating a Life Book/Photo Album.

12. The outstanding recommendations from the 2013-2014 monitoring report dated March 13, 2014, which are noted in this report as recommendations numbers 6 and 10 are fully implemented.

At the Exit Conference, the FFA representative expressed the desire to remain in compliance with all Title 22 regulations and contract requirements. A follow-up visit was conducted on April 30, 2015, by CAD and the FFA implemented all of the recommendations noted in this report. CAD will continue to assess implementation of the recommendations during our next monitoring review. The OHCMD will provide ongoing technical assistance prior to the next review.

ALPHA TREATMENT CENTERS
FOSTER FAMILY AGENCY
License #'s Riverside 330600001 - Los Angeles 197805881

Alpha Adoption Centers
One World, One Heart, One Family
License # 336424024

July 22, 2015,

ATTN: Linda Lai & CAD Team
CAD – Contracts Administration Division
3530 Wilshire Blvd, 4th Floor
Los Angeles, CA 90010

RE: FFA Monitoring Review 2014 Corrective Action Plan – Amended Per Request

Dear Ms. Lai,

Please see Corrective Action Plan below in response to the deficiencies reported during the 2014 Annual Foster Family Agency Monitoring Review Amended Exit Summary per your request to be submitted by July 22, 2015.

Corrective Action Plan Items Regarding Annual FFA Monitoring Review:

I. **LICENSURE/CONTRACT REQUIREMENTS**

a. 2) Are Special Incident Reports (SIRs) appropriately documented and cross-reported (SAFETY)

i. **Corrective Action Plan:** Agency staff members received re-training on SIR (Serious Incident Report) reporting and SCAR (Suspected Child Abuse Reporting) on January 14, 2015. **(Please See Attachment)**.

b. 4) Is the agency free of substantiated Community Care Licensing complaints' reports on safety and physical plan deficiencies since the last review? (SAFETY)

i. **Corrective Action Plan:** Two certified foster parents were decertified and two certified foster parents received re-training by an agency social worker. A Foster Home Coordinator has begun working for the agency effective February 17, 2015, whom provides additional surveillance of the certified foster homes and will also provide ongoing training regarding contract compliance and Title 22 Regulations. Agency staff members and foster parents received re-training on SIR (Serious Incident Report) reporting and SCAR (Suspected Child Abuse Reporting) on January 14, 2015. **(Please See Attachment)**.

ii. Please see attached LIC9099 and LIC809 regarding substantiated allegations from 4/24/14, 4/28/14, 5/13/14, 5/15/14, and 8/19/14, along with their associated Plans of Correction, logged training hours, Certificates of Approval, and Decertification documentation. **(Please See Attachment)**.

II. CERTIFIED FOSTER HOMES

a. 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)

   i. **Corrective Action Plan:** Agency staff will use OHCMD documentation including Release for Information ABCDM 228 for OHC to conduct search for historical CPS information prior to certification and agency will document results in the certified foster parent home file.

b. 17) Do the certified foster parents and/or designated drivers have a valid California driver's license, auto insurance, annual documentation of vehicle maintenance, and if applicable, car seat(s)? (SAFETY)

   i. **Corrective Action Plan:** It was reported to the agency on page 2 of the Foster Family Agency Monitoring Review Field Exit Summary Revised that the CAD Monitor was able to verify that the vehicle of the concerning Certified Foster Parent was repaired the next day with receipt dated 12/5/14 and was observed to be repaired by the CAD Monitor by the next follow-up visit which reportedly took place on 12/9/14. (**Please See Attachment**). In this agency's response to mitigate any further disruption or deficiency in this regard, agency social workers have been and will continue to be trained towards assessing the function, utility, and safety of vehicles and certified foster parents have been and will continue to be directed to repair all vehicle issues immediately and to report evidence of all repairs promptly to the agency.

III. MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

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

   i. **Corrective Action Plan:** On January 14, 2015, agency social workers were provided re-training regarding the need to ensure NSPs are submitted in a timely manner and no later than the fifth calendar day the report is due. (**Please See Attachment**).

b. 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)

   i. **Corrective Action Plan:** On January 14, 2015, agency social workers were provided re-training regarding the need to ensure NSPs are submitted in a timely manner and no later than the fifth calendar day the report is due. (**Please ee Attachment**).

IV. PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

a. 49) Do children feel safe in the certified foster home? (SAFETY)

i. **Corrective Action Plan:** The Certified Foster Parent regarding this allegation was decertified effective February 4, 2015. Referral Number: 1329-5295-76050025075. **(Please See Attachment)**. Further, agency social workers received re-training on SIR (Serious Incident Report) reporting and SCAR (Suspected Child Abuse Reporting) on January 14, 2015.

V. PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

a. 61) Are children provided with a sufficient supply of clean towels along with adequate personal care items appropriate to their ethnic needs, and are these items readily accessible? (WELL-BEING)

   i. **Corrective Action Plan:** One Certified Foster Parent with whom this deficiency is regarding has been decertified effective February 4, 2015. The other concerning Certified Foster Parent received re-training on each foster child needing to have his/her own hygiene products. The agency social worker will verify each foster child has his/her own hygiene products per staff training conducted on January 14, 2015. **(Please See Attachment)**.

b. 63) If applicable, are children free to manage their allowance and/or earnings as noted in the FYBR? (SELF-SUFFICIENCY)

   i. **Corrective Action Plan:** Re-training was provided to certified foster parents during the January Foster Parent Training. The Certified Foster Parent with whom this concern is presented has been decertified from the agency effective February 4, 2015. Certified foster parents were instructed to have a child or youth sign a written statement if the child wishes to save his/her allowance to purchase an item at a later date. Agency social workers were trained in January to review this with the foster children and certified foster parents. **(Please See Attachment)**.

c. 64) Does the certified foster parent encourage and assist children to update a life book or a phot album? (PERMANENCY)

   i. **Corrective Action Plan:** Re-training was provided to certified foster parents during the January Foster Parent Training instructing them to review and develop rapport with their foster child by encouraging the child and by providing assistance toward maintaining his/her Lifebook. Lifebooks were also distributed at this monthly meeting. Certified Foster Parents were encouraged to take additional Lifebooks so they would have them available for future placements. The Certified Foster Parent with whom this deficiency is regarding was present at the January Foster Parent Training.

VI. PERSONNEL RECORDS

a. 69) Did appropriate employees sign criminal background statements in a timely manner? (SAFETY)

i. **Corrective Action Plan:** The two employees who did not have signed criminal background statements in their files now have updated criminal background statements in their personnel files as observed by the CAD Monitor during the on-site review. This correction is noted on page 6 in the Foster Family Agency Monitoring Review Field Exit Summary Revised. **(Please See Attachment)**.

Alpha Treatment Centers FFA is committed to providing quality service to our foster youth, meeting the needs of our foster youth, and continues to provide ongoing training to our FFA Social Work Staff as well as our Certified Foster Parents to ensure that our agency continues to comply with all CCL Regulations and LA County Contract Requirements.

Should you have any questions or need any additional information, please do not hesitate to contact me at (626) 939-9100 ext. 113 and I will be happy to assist you.

Respectfully,

Rachel Dyer, MSW
Social Services Director
Alpha Treatment Centers FFA
Email: Rachel@alphaadopt.com
Phone: (626) 939-9100 ext. 113

CDSS
WILL LIGHTBOURNE
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
744 P Street • Sacramento, CA 95814 • *www.cdss.ca.gov*

EDMUND G. BROWN JR.
GOVERNOR

July 28, 2015

Certified Mail
Return Receipt Requested
7011 2000 0000 7008 2011

Emmanuel Humphries, Agent for Service of Process
ALPHA TREATMENT CENTERS
5053 LaMart Drive, Suite 107
Riverside, California 92507

SUBJECT: FOSTER CARE FOSTER FAMILY AGENCY FISCAL AUDIT AND OVERPAYMENT FISCAL YEAR (FY) JULY 1, 2012 THROUGH JUNE 30, 2013 - DEMAND FOR REPAYMENT PROGRAM NO. 0022.01.01

Dear Mr. Humphries:

This letter is a demand for full payment of a sustained overpayment or an opportunity to enter into a voluntary installment repayment agreement to repay a foster care foster family agency overpayment resulting from a fiscal audit, pursuant to Manual of Policies and Procedures (MPP) section 11-405.11 and 11-402.6.

The California Department of Social Services (CDSS) conducted a fiscal audit for FY July 1, 2012 through June 30, 2013, and issued a Final Management Decision Letter (FMDL) on February 27, 2015, in which an overpayment was assessed in the amount of $7,134.38. The Department of Health Care Services' Office of Administrative Hearings and Appeals (OAHA) confirmed that Alpha Treatment Centers submitted a letter dated March 24, 2015, which was construed as an appeal. OAHA subsequently received confirmation from Alpha Treatment Centers that the March 24, 2015 letter was not intended as an appeal and thus issued an Order of Dismissal Pursuant to Request for Withdrawal, dated April 24, 2014 which confirmed that Alpha Treatment Center had not actually filed an appeal. Therefore, the overpayment in the amount of $7,134.38 is now sustained and collectible.

Pursuant to CDSS MPP section 11-402.662(a)(1)(B), for overpayments of $100,000 or less that are repaid within six months from the date of the executed agreement, interest shall not be assessed on the overpayment.

Alpha Treatment Centers has the option of submitting a lump sum payment in the amount of $7,134.38 or entering into a voluntary repayment agreement as shown on the Schedule of Repayment, which is attached hereto. If Alpha Treatment Centers does not submit a lump sum payment, it may enter into the enclosed Corporate Installment Repayment Agreement, requiring 2 monthly payments of $3,567.19; due and payable every 1st of each month beginning September 1, 2015.

Please sign and date the Schedule of Repayment at the bottom, and sign and date the Foster Care Provider Repayment Agreement Contract.

Return the original signed copies of these documents within thirty (30) working days from the postmarked date of the letter to the following address:

California Department of Social Services
Foster Care Audits – Policy & Support Unit
Attention: Overpayment Collections
744 P Street, M.S. 8-13-23
Sacramento, California 95814

Please include the corporation provider name and group home program number on all payments, and indicate "Foster Care Monthly Installment" on your check. Attach a completed payment coupon to assure that payments are posted appropriately. **Payments are to be sent to the following address:**

California Department of Social Services
Attention: Cashier
744 P Street, M.S. 9-3-67
Sacramento, California 95814

Please do not send payments to the Foster Care Audits – Policy & Support Unit Collections Auditor.

If you do not submit a lump sum payment or enter into a voluntary repayment agreement, mandatory (involuntary) repayment procedures will be implemented according to Welfare and Institutions Code section 11466.22(d)(4) and MPP section 11-402.664. These procedures enable the CDSS to ensure that overpayments are repaid under a mandatory schedule which involves monthly adjustments to your paid rate until the outstanding overpayment is repaid. Adjustments can include 50 percent reductions to the California Necessities Index increases or any other increases to the Foster Family Agency (FFA) Schedule of Rates, and a reduction to the rate based on monthly income. Mandatory repayment procedures also apply to those FFA programs that have an approved, signed

repayment agreement, but have missed payment(s). Consequently, failing to submit payment in full, returning the signed voluntary repayment agreement, or missing monthly

payment(s) on an approved, signed agreement will result in immediate implementation of the involuntary repayment procedures.

If you have any questions, or would like to discuss your options further, please contact Mona Santos, Collections Auditor, at (916) 651-3964.

Sincerely,

B. RAY THOMAS, Chief
Program and Financial Audits Bureau
Foster Care Rates and Audits Branch

Enclosures

c: Darrel Hale, President, Board of Directors
901 Ford Street
Corona, California 92879

Emmanuel Humphries, Executive Director
5053 La Mart Drive, Suite 107
Riverside, California 92507

Dianna Flaggs, Administrative Services Manager III
County of Los Angeles – Department of Children and Family Services Contracts Administration Division
3530 Wilshire Boulevard, 5th Floor - #524
Los Angeles, California 90010

Maria Becerra, Principal Accountant – Auditor
Countrywide Contract Monitoring Division
Los Angeles County Department of Auditor-Controller
350 South Figueroa Street, 8th Floor
Los Angeles, California 90071-1101

Los Angeles County Department of Public Social Services
Los Angeles County Department of Probation

Riverside County Department of Public Social Services
Riverside County Department of Probation

San Bernardino County Human Services System
San Bernardino County Department of Probation

Orange County Social Services Agency
Orange County Department of Probation

Pacific Inland Regional Office (MS 29-26)
Los Angeles & Tri-Coastal Counties (MS 31-08)