County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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December 29, 2015

To: Supervisor Hilda L. Solis, Chair
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Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

Diane Ledesma for

CONCEPT 7 FOSTER FAMILY AGENCY FISCAL ASSESSMENT AND CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a fiscal compliance assessment of Concept 7 (the FFA) in August 2014, and a contract compliance review in September 2014. The FFA has three licensed sites: one located in the First Supervisorial District; one in Riverside County; and one in Orange County, and provides services to DCFS placed children, as well as children from other counties. According to the FFA's program statement, its mission is, "to provide foster homes for children in need of out-of-home care by training and certifying acceptable foster parents in the Counties of Los Angeles, Orange, Riverside, San Bernardino and San Diego; to provide social work services and ongoing education and training to Foster Parents. In addition, to design a treatment program for each Foster Child that focuses on family reunification. When family reunification is not possible, the FFA agency works with the County authorities to develop an alternative treatment/placement program."

At the time of the review, the FFA supervised 209 DCFS placed children in 114 Certified Foster Homes (CFHs). The placed children's average length of placement was six months and their average age was nine.

SUMMARY

CAD conducted a fiscal compliance assessment, which included an on-site review of the FFA's financial records such as financial statements, bank statements, check register, and personnel files to determine the FFA's compliance with the terms, conditions, and requirements of the Contract, the Auditor-Controller (A-C) Contract Accounting and Administration Handbook and other applicable federal, State, and County regulations and guidelines.

The FFA was in full compliance with 2 of 5 areas of the fiscal assessment: Loans, Advances and Investments; and Board of Directors and Business Influence.

CAD identified deficiencies in the areas of: Financial Overview, related to the audited financial statement showing an operational loss of $12,644 and non-submittal of the semi-annual expenditure reports; Cash Expenditures, related to the accountant who prepares the bank reconciliation also does the bookkeeping and the writing of checks, there were no agreements for the FFA's independent contractors, and the inventory list of fixed assets did not include all the required information; and Payroll and Personnel, related to timecards missing the supervisor's signature.

During CAD's contract compliance review, the interviewed children generally reported feeling safe in the FFA's CFHs; having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity. The Certified Foster Parents (CFPs) 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 the 11 areas of our contract compliance review: Health and Medical Needs; Psychotropic Medications; Personal Rights and Social Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Discharged Children.

CAD noted deficiencies in the areas of: Licensure/Contract Requirements, related to Community Care Licensing (CCL) citations; Certified Foster Homes, related to not having documentation of the annual vehicle maintenance; Facility and Environment, related to not maintaining adequate perishable and non-perishable foods; Maintenance of Required Documentation and Service Delivery, related to not obtaining the County Social Worker's authorization to implement the Needs and Services Plans (NSPs), FFA social workers not developing initial and updated NSPs with the child's participation and one updated NSP not being comprehensive; Education and Workforce Readiness, related to one child not progressing academically; and Personnel Records, related to not documenting completion of all required training.

Attached are the details of our review.

REVIEW OF REPORT

On October 16, 2014, Christopher Jarosz, DCFS CAD, held an Exit Conference with the FFA's representatives: John Peel, Chief Executive Officer; Susana Cortes, Director of Education; Susana Lopez, Accounting Manager; Dr. David Scorse, Regional Director for San Bernardino and Riverside Counties; Gabby Vidaurreta, Regional Director for Orange County; and Ana Zimmer, Regional Director for Los Angeles County. DCFS staff included Joe Jimenez, Jr., CAD Fiscal and Jui-Ling Ho, Out-of-Home Care Management Division (OHCMD). The FFA representatives were in agreement with the review findings and recommendations, were receptive to implementing systemic changes to improve compliance with regulatory standards, and to address the noted deficiencies in a compliance Corrective Action Plan (CAP) and a Fiscal Corrective Action Plan (FCAP).

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

The FFA provided the attached approved CAP and FCAP addressing the recommendations noted in this compliance report.

CAD conducted a follow-up visit to the FFA on April 14, 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:cj

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
John Peel, Chief Executive Officer, Concept 7
Lenora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

CONCEPT 7 FOSTER FAMILY AGENCY
FISCAL COMPLIANCE ASSESSMENT REVIEW
FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The fiscal compliance assessment included a review of Concept 7's (the FFA) financial records for the period of July 1, 2012 through June 30, 2014. Contracts Administration Division (CAD) reviewed the financial statements, bank statements, check register, and personnel files to determine the FFA's compliance with the terms, conditions, and requirements of the FFA contract, the Auditor-Controller Contract Accounting and Administration Handbook (A-C Handbook) and other applicable federal, State, and County regulations and guidelines.

The on-site fiscal compliance assessment review focused on five key areas of internal controls:

- Financial Overview,
- Loans, Advances and Investments,
- Board of Directors and Business Influence,
- Cash/Expenditures, and
- Payroll and Personnel.

The FFA was in full compliance with 2 of 5 areas of the fiscal assessment: Loans, Advances and Investments; and Board of Directors and Business Influence.

FISCAL COMPLIANCE

CAD found the following areas out of compliance:

Financial Overview

- During the review, it was noted that the FFA's Audited Financial Statements for its Fiscal Year that ended June 30, 2013, showed an operational loss of $12,644.

The FFA is looking at how to reduce its fixed costs when its child census fluctuates and is too low. The rental lease agreements have been re-negotiated to further reduce costs, effective December 31, 2014.

- Non submittal of the Semi-Annual Expenditure Reports.

The FFA did not submit the Semi-Annual Expenditure Reports for the following periods: July 1, 2011-December 31, 2011; January 1, 2012-June 30, 2012; July 1, 2012-December 31, 2012; January 1, 2013-June 30, 2013; July 1, 2013-December 31, 2013; and January 1, 2014-June 30, 2014.

All outstanding Semi-Annual Expenditure Reports beginning with July 1, 2011 were completed and submitted before the end of CAD's fiscal compliance assessment.

Recommendations:

The FFA's Board of Directors shall ensure that:

1. Management prepares and implements a plan to operate without incurring any operational losses.

2. Semi-Annual Expenditure Reports are submitted timely.

Cash/Expenditures:

- The accountant who prepares the bank reconciliations also does the bookkeeping and writes checks for the FFA's expenditures.

The FFA contract, A-C Handbook states bank statements should be received and reconciled by someone with no cash handling, check writing, or bookkeeping roles. The FFA's Chief Executive Officer (CEO) reviews and approves the bank reconciliations and expenditures prior to signing checks.

- There are no agreements for the FFA's independent contractors.

- The inventory list of fixed assets did not include all the required information.

Recommendations:

The FFA's management shall ensure that:

3. An employee with no cash handling, check writing or bookkeeping responsibilities completes and signs the bank reconciliations.

4. It prepares and executes agreements with all of its independent contractors.

5. A fixed assets inventory list is maintained that includes item description, serial number, and date of purchase, acquisition cost, and funding source.

Payroll and Personnel:

- Two timecards were missing the supervisor's signature.

Recommendation:

6. All timecards are reviewed and approved by the employee's supervisor or manager.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

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

NEXT FISCAL ASSESSMENT

The next fiscal compliance assessment of the FFA will be conducted in County Fiscal Year 2015-2016.

CONCEPT 7 FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

625 N. Main Street
Orange, CA 92868 (primary address)
License Number: 306004156

13020 Bailey Street
Whittier, CA 90601
License Number: 197806457

2990 Inland Empire Boulevard
Ontario, CA 91764
License Number: 336412280

	Contract Compliance Monitoring Review	**Findings: September 2014**
I.	**Licensure/Contract Requirements** (7 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Timely, Cross-Reported SIRs	2. Full Compliance
	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. Full Compliance
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. 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. 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	1. Full Compliance
	2. Common Areas were Maintained	2. Full Compliance
	3. Children's Bedrooms/Interior Well Maintained	3. Full Compliance
	4. Sufficient and Appropriate Educational Resources	4. Full Compliance
	5. Adequate Perishable and Non-Perishable Food	5. Improvement Needed
	6. CFP Conducted Disaster Drills and Documentation Maintained	6. Full Compliance
	7. Money and Clothing Allowance Logs Maintained	7. Full Compliance
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	1. Improvement Needed
	2. CFPs Participated in Development of the NSPs	2. Full Compliance
	3. Children Progressing Towards Meeting NSP Goals	3. Full Compliance
	4. FFA Social Workers Develop Timely, Comprehensive Initial NSP with Child's Participation	4. Improvement Needed
	5. FFA Social Workers 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's Social Worker's Monthly Contacts Documented in Child's Case File	8. Full Compliance
	9. FFA Social Workers Develop Timely, Comprehensive Quarterly Reports	9. Full Compliance
	10. FFA Social Workers Conduct Required Visits	10. Full Compliance
V	**Education and Workforce Readiness** (5 Elements)	
	1. Children Enrolled in School Within Three School Days	1. Full Compliance
	2. Children Attend School as Required and FFA Facilitates in Meeting Children's Educational Goals	2. Full Compliance

	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	3. Full Compliance 4. Improvement Needed 5. Full Compliance
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	Full Compliance (All)

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	Full Compliance (All)
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 Exceed Total of 15 Children	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed 8. Full Compliance 9. Full Compliance

CONCEPT 7 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 September 2014 monitoring review. The purpose of this review was to assess Concept 7 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 review covered the following 11 areas:

- Licensure/Contract Requirements,
- Certified Foster Homes,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Education 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, twelve placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed seven of the twelve children. Five children were not interviewed as they were either preverbal 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 12 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, one child selected for the sample was prescribed psychotropic medication. The child's case file was reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed five CFH files and six staff files for compliance with Title 22 Regulations and County contract requirements. Interviews were conducted with five CFPs to assess the quality of care and supervision provided to the children.

CONTRACT COMPLIANCE

CAD found the following six areas out of compliance.

Licensure/Contract Requirements

- Community Care Licensing (CCL) cited the FFA.

CCL cited the FFA as a result of deficiencies and findings in a complaint received on February 26, 2013. According to the report dated December 12, 2013, CCL substantiated a personal

rights violation against a CFP that did not ensure the children arrived at school safely. The CFP stated she left the children in the care of her mother who is able to see them walk to school from the CFH. CCL requested a Plan of Correction (POC), which included the FFA having a meeting with the CFP to review and discuss the violation. The POC included the provision that an alternate adult, other than the foster mother's mother will supervise the children, including walking the children to school for the CFP in her absence. The FFA was also to provide training to the CFP on providing care and supervision. CCL cleared the POC on December 2, 2013, as the CFH was decertified on September 27, 2013. On March 31, 2015, Out-of-Home Care Investigation Services (OHCIS) placed this home on hold due to a pending investigation.

CCL cited the FFA on December 12, 2013 as a result of a complaint received on March 20, 2013 for a personal rights violation and a buildings and grounds violation against a CFP that tied a child in a high chair. This FFA had decertified the CFP on September 27, 2013, as a result of the violation and the remaining children were moved to another CFH within the FFA. This referral was investigated by a DCFS Emergency Response Children's Social Worker (ER CSW) and the allegations of general neglect and emotional abuse were unfounded. OHCIS placed this home on an indefinite hold and determined that the foster parent would no longer be used as a placement resource for DCFS supervised foster children.

CCL cited the FFA on January 10, 2014, during a facility evaluation. According to the report dated January 13, 2014, CCL substantiated a buildings and grounds violation against a CFH for a cluttered backyard full of hazards, and the den being used as a bedroom and as a passageway. CCL requested a POC, which included the FFA ensuring repairs are made and that the children do not have access to the backyard. The home was placed on hold until the FFA was able to decertify the home at the completion of the Non-Related Extended Family Member (NREFM) clearance process. CCL cleared the POC on January 30, 2014. On March 14, 2014, OHCIS placed this home on indefinite hold because of an inconclusive allegation of physical abuse for a referral dated October 7, 2013.

CCL cited the FFA on February 3, 2013. According to the report dated February 3, 2014, CCL substantiated a reporting requirements violation for not reporting that a child had ran away, and for a care and supervision violation when the CFPs went camping overnight without reporting that the child had run away. These CFPs were decertified on January 30, 2014. The remaining children were moved to another CFH within the FFA. On March 14, 2014, OHCIS placed this home on an indefinite hold and determined that the CFPs would no longer be used as a placement resource for DCFS supervised children.

CCL cited the FFA on February 4, 2014 for a complaint received on June 3, 2013. According to the report dated February 4, 2014, CCL substantiated a food service violation due to the home regularly running out of milk and rarely providing snack foods. CCL requested a POC, which included the FFA conducting unannounced home visits regularly and monitoring the home closely. The CFPs received training in the area of food service and the POC was cleared on February 4, 2014. This referral was investigated by a DCFS ER CSW and the allegation of general neglect was determined to be inconclusive. OHCIS approved the FFA's CAP on November 12, 2013. The FFA subsequently involuntarily decertified the home on April 28, 2014.

CCL cited the FFA on April 18, 2014 for a complaint received on October 9, 2013. According to the report dated April 18, 2014, CCL substantiated a personal rights violation against a CFP that locked a

placed child out in the cold. The CFP did not allow the child to be in the home when the CFP was not present. CCL requested a POC, which included requiring the CFP to provide adequate supervision. The POC was cleared on February 8, 2015. This referral was investigated by a DCFS ER CSW and the allegation of at risk was unfounded. OHCIS approved the FFA's CAP on April 17, 2014.

CCL cited the FFA on June 30, 2014 for a complaint received on February 3, 2014. According to the report dated June 30, 2014, CCL substantiated a care and supervision violation against a CFP that failed to take the children for timely medical and dental exams. CCL requested a POC that included training CFPs on their responsibility to provide timely medical, dental and psychological care to children placed under their care. The CFP was voluntarily decertified on July 7, 2014, and the POC was cleared on the same date. This referral was investigated by a DCFS ER CSW and the allegation of general neglect was determined to be inconclusive. OHCIS approved the FFA's CAP on June 24, 2014.

CCL cited the FFA on July 8, 2014. According to the report dated July 8, 2014, CCL substantiated a personal rights violation against a CFP that compared a foster child to a sibling and other children. This included treating the child differently. CCL requested a POC that included training the CFP on how to address personal rights, and assisting the CFPs with self-reflection in an attempt to properly meet the child's behavioral needs. The POC was cleared on July 25, 2014.

CCL cited the FFA on July 16, 2014. According to the report dated July 16, 2014, CCL substantiated three violations against one set of CFPs. One violation was for personal rights due to the placed child being hit as a form of corporal punishment. CCL requested a POC that included requiring the CFPs to be trained by August 15, 2014 in the area of personal rights, and requiring that the FFA social worker conduct unannounced visits at least twice a month for the next three months, to ensure the children's rights are protected. This referral was investigated by a DCFS ER CSW and the allegations of physical abuse were determined to be unfounded. On May 1, 2015, OHCIS informed CAD of their determination to not investigate the referral regarding the CFH because the home was identified as a Non Related Extended Family Member (NREFM) placement for children placed from out of state. The second violation in the citation was for storage space because medication was unlocked in the refrigerator and accessible to children. CCL requested a POC that included requiring the CFPs to purchase a lock box and provide the agency with a receipt of purchase by July 17, 2014. The third violation in the citation was for buildings and grounds, as furniture was blocking the windows in the children's bedroom. CCL requested a POC that included moving the furniture by July 17, 2014. The POC was cleared on August 15, 2014.

Recommendation

The FFA's management shall ensure that:

1. The FFA is in full compliance with Title 22 regulations and free from CCL complaints.

<u>Certified Foster Homes</u>

- Current annual vehicle maintenance documentation was not on file.

The FFA did not maintain documentation of annual vehicle inspections for any of the five CFHs selected for review.

Deficiencies were noted in two vehicles in two different CFHs. In CFH #1, there was a cracked windshield in one of the two vehicles owned by the family. This was immediately brought to the attention of the FFA, and the CFP was instructed not to transport placed children in this vehicle until the windshield was replaced. The CFPs used another vehicle to transport placed children.

In CFH #2, one seatbelt in the backseat of a vehicle was partially missing. This seatbelt was repaired on October 22, 2014.

On April 15, 2015, CAD conducted a follow-up visit and confirmed that the FFA modified and fully implemented its vehicle inspection tool to reflect maintenance and inspections performed annually by a certified mechanic, and semi-annually by FFA inspectors. This change took placed as of December 30, 2014.

Recommendation:

The FFA's management shall ensure that:

2. It maintains documentation of the annual vehicle maintenance for CFPs and designated drivers in its files.

Facility and Environment

- Adequate perishable and non-perishable food was not maintained.

In CFH #3 there were some cans of food beyond the best used by date in the cupboard. The CFP immediately discarded the cans of expired food.

During a follow-up visit on April 15, 2015, CAD compliance confirmed that the FFA updated and fully implemented its home inspection tool used by FFA social workers as of December 5, 2014.

Recommendation:

The FFA's management shall ensure that:

3. Adequate perishable and non-perishable food is maintained.

Maintenance of Required Documentation and Service Delivery

- FFA did not obtain or document efforts to obtain County Children's Social Worker's (CSW) authorization to implement Needs and Services Plans (NSPs).

Seven of twelve NSPs reviewed did not include the FFA's documentation of its efforts to obtain the County CSW's signature authorizing implementation of the NSP.

- FFA social workers did not develop initial NSPs with the child's participation.

Four initial NSPs were developed without the child's participation. Two NSPs were missing the signatures of one or more FFA team members.

- FFA social workers did not develop timely, comprehensive updated NSPs with child's participation.

One child's updated NSP was not comprehensive, as the goals were not measurable and the plan of service was vague. Another child's NSP was not developed timely or with the child's participation.

On April 14, 2015, during a follow-up visit CAD compliance confirmed the implementation of the FFA's new protocol whereby the FFA social workers are trained to submit completed NSPs to the site supervisor's seven calendar days before the due date, and document attempts to contact County CSWs to obtain authorization for implementation of the NSP.

On November 12, 2014, OHCMD provided onsite training to the FFA's staff regarding the development of timely, comprehensive initial and updated NSPs.

Recommendations:

The FFA's management shall ensure that:

4. The FFA obtains or documents efforts to obtain County Children's Social Worker's (CSWs) authorization to implement NSPs.

5. FFA social workers develop initial NSPs with child's participation.

6. FFA social workers develop timely, comprehensive updated NSPs with child's participation.

Education and Workforce Readiness

- Child's academic performance and/or attendance did not increase.

One child was not progressing academically, and there was no documentation of efforts to increase the child's academic progress.

On April 15, 2015, CAD compliance confirmed that the FFA social workers are attending monthly group and weekly individual supervision sessions. The FFA social workers have been directed to provide support to CFPs in monitoring the academic performance of placed children by reviewing grades, test scores and school attendance records.

Recommendation:

The FFA's management shall ensure that:

7. Children's academic performance and/or attendance increase.

Personnel Records

- FFA employees did not complete all required training.

Four of the personnel files selected for the sample did not include complete attendance records for initial or ongoing training. The FFA representatives stated some of the training records were lost or misplaced with the departure of a manager. More recently, the FFA hired a Director of Education. During a follow-up visit on April 14, 2015, CAD confirmed the FFA modified and fully implemented its social worker training tool, as of November 18, 2014 to reflect all required training modules, completion dates, module duration, and name of trainer.

Recommendation:

The FFA's management shall ensure that:

8. FFA employees complete all required training.

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

The OHCMD's last compliance report, dated November 13, 2014, identified 13 recommendations:

Results

Based on the results of the current review, the FFA has fully implemented 11 of 13 previous recommendations for which they were to ensure that:

- CFPs have current CPR and First-Aid certificates at all times.
- CFPs disclose to the FFA if a third party is transporting the placed children and that the third party is criminally cleared, and provided a copy of a valid California driver's license and automobile insurance.
- CFPs have automobile insurance at all times.
- Interior and grounds are well maintained, specifically that certified foster homes have ventilation.
- CFHs have reading materials and educational resources for all placed children.
- CFPs conduct disaster drills on a quarterly basis.
- CFPs are familiar with NSPs.
- Medical follow-up and initial and follow-up dental examinations are conducted in a timely manner.
- Children are provided with recreational activities.
- All children have a life book or photo album.
- Written declarations for part-time contract social workers are on file to confirm that their total caseload does not exceed 15 children.

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

- The FFA is in full compliance with Title 22 Regulations, free of CCL citations.
- FFA social workers develop comprehensive, initial NSPs and quarterly reports with goals that are specific, time limited, and measurable.

Recommendation:

The FFA's management shall ensure that:

9. The outstanding recommendations from the previous monitoring report dated November 13, 2014, which are noted in this report as recommendations 1 and 5 are fully implemented.

At the Exit Conference, the FFA's representatives expressed their desire to remain in compliance with Title 22 regulations and contract requirements. FFA representatives stated that the FFA will implement procedures to strive towards greater compliance.

CAD conducted a follow-up visit on April 14, 2015, and the FFA implemented eight of eight 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.

Concept 7
Family Support & Treatment Centers

Fiscal Corrective Action Plan (FCAP)
Fiscal Compliance Assessment: 8/21/14 – 8/27/14

1) Finding: Most recent audited financial statements for the fiscal year 7/1/12 – 6/30/13 showed a net loss of ($12,644).
   FCAP: The Agency is looking at reducing fixed costs to help when census fluctuations are low. Concept 7 has re-negotiated rental lease agreements to further reduce costs by December 31, 2014.

2) Finding: Semi-Annual expenditure reports have not been submitted since 2011.
   FCAP: SAER have been completed from 7/1/11 through 6/30/14.

3) Finding: Accountant who prepares bank reconciliations also does the bookkeeping and writes checks for the agency expenditures.
   FCAP: Due to insufficient funding in-house accountant is the only qualified person to perform the mentioned duties. However, the CEO review and signs off on bank reconciliations and reviews and approves expenditures before signing checks.

4) Finding: No contractor agreements for any Independent Contractors.
   FCAP: The Agency is in the process of creating contracts for independent contractors. Contracts should be finalized by 12/31/14.

5) Finding: Fixed assets listing does not include assets by serial number and sources funding.
   FCAP: Fixed asset listing will include sources of funding and have assets listed by serial number by the end of the current fiscal year 6/30/15.

6) Finding: Of six timecards reviewed two were missing supervisor signatures.
   FCAP: As of 9/1/14, twice a month, unapproved timesheets are returned to supervisors to sign within a week after a pay period ends.

Susana Lopez (Accounting Manager) will be responsible for ensuring that the FCAP is fully implemented.

Signature of Concept 7 Inc, FFA Representative

Susana Lopez — Printed Name
Accounting Manager — Title
Signature
11/21/14 — Date

Fostering Hope & Adopting Promise

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Concept 7
Family Support & Treatment Centers

December 4, 2014

Christopher J. Jarosz, PH.D.
Children Services Administrator I
County of Los Angeles
Department of Children and Family Services
Contracts Administration Division
3530 Wilshire Blvd., 4th Floor
Los Angeles, CA 90010

Dear Dr. Jarosz,

We welcome the Department's Contract Compliance Monitoring Pilot Review. Thank you for the exit conference and the Contract Compliance Review Summary for C7 FFA Program. We have received technical assistance/training from OHCMD geared to enhance and improve outcomes for the children under our care. Our Regional Directors and C7 Social Workers attended training on the subject of generating comprehensive Initial, Quarterly and NSP Reports on 11/12/14, conducted by Jui-Ling Ho, MSW, OHCMD Monitor.

Below please find Concept 7's plan on addressing the findings noted:

I. **Licensure/Contract Requirements (Item #4)**
FFA was free of CCLD citations and OHCMD safety reports.

The Site Supervisors and C7SWs will conduct monthly evaluations of generated SIRs, Investigation Findings log, and changes in the property sketches found in CFP files in an effort to reduce citations. C7SWs will conduct occasional un-announced home visits and home visual checks during regular home visits to assess for safety, physical plant issues and address them immediately. C7SWs will conduct quarterly home inspection. All C7 staff was trained regarding the 2014 Compliance Monitoring Review findings and plan of correction. The C7 Education/Recruitment Director and C7SWs will conduct CFP training regarding FC Personal Rights, and Title 22 Regulations regarding FC's safety, well-being, self-sufficiency and permanency needs. It will be C7's goal to have all certified foster parents trained by January 30, 2015, and to ensure CFPs and staff remain in compliance with CCLD & DCFS requirements, in an effort to be free of CCLD citations and OHCMD safety reports.(See attached training sign-in sheets)

II. Certified Foster Homes (Item 17)

Do the certified foster parent 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)?

C7FFA has developed a vehicle inspection check tool to assess FPs vehicle condition and to collection of vehicle maintenance records. C7SWs will conduct twice a year vehicle inspection checks and CFPs will submit annual invoices of vehicle checks, and repairs by a certified vehicle repair shop. (See attached Vehicle Inspection Check Form)

III. Facility and Environment (Item 24)

Does the certified foster home maintain adequate nutritious perishable foods and adhere to product "used or freeze by," "best by," "sell by," or expiration dates? (A minimum of three meals and between meal snacks).

C7SWs will ensure during the quarterly home inspections to properly check that CFP maintain adequate nutritious perishable and non-perishable foods and adhere to product "used or freeze by," "best by," or expiration dates. The C7 Home Inspection Sheets was modified to include this requirement. (See attached C7FFA Home Inspection Sheet, item 22)

IV. Maintenance of Required Documentation and Service Delivery (Items 27, 30, 31)

Did the FFA obtain or document efforts to obtain the County worker's authorization to implement the NSP?
Did the FFA social worker develop timely, initial (NSPs) with the participation of the developmentally age-appropriate child?
Did the FFA social worker develop timely, comprehensive, initial (NSPs) with the participation of the developmentally age–appropriate child?

The C7SW will submit completed NSPs to Site Supervisor 7 calendar days before they are due. The Site Supervisor will make sure goals are measurable and achievable. Site Supervisor will ensure that when a goal is modified, the steps required to make sure the goal is achievable are clear. C7SW will submit NSP to CSW by the due date in an effort obtain his/her authorization for implementation within the next five (5) calendar days. The C7SW will document at least 3 attempts to contact CSW in effort to obtain approval for implementation. The C7SW will write Contact Notes describing extent of involvement of the developmentally age-appropriate child during the development of timely, comprehensive and updated NSPs. The Site Supervisor and C7SW will ensure the signature page on all reports display the required signatures with dates on the report prior to placing in the FC file.

The Concept 7 foster care staff from each of the C7 offices was retrained regarding the development of timely, comprehensive and updated Initial and NSP Reports on

11/12/14. This training was received from Jui-Ling Ho, MSW from the OHCMD. (Please see attached sign-in sheet)

V. Education and Workforce Readiness (Item 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)?

The C7SW will provide CFP support in the monitoring of FC's academic performance. This support will be provided by the reviewing of grades, test scores and school attendance records. C7SW and CFP will monitor FC's academic standing by discussing progress reports when made available. C7SW will provide FP and FC support and identify effective steps to encourage FC to complete homework and seek homework assistance when needed by enrolling FC in after school homework support programs after school and/or seek tutoring services for the FC.

IX Personnel Records (74)

Have appropriate employees received the all required training (initial training, minimum of one-hour training in the area of child abuse identification and reporting, CPR, First-Aide, and on-going training?

C7 modified the Social Worker Training Checklist to include all required training items, indicating date and duration of training, with Trainee and Trainer initials. The Checklist will reflect a minimum of 20 hours of total initial social worker training required.

This concludes our recommended Corrective Action Plan for the deficiencies noted during the Los Angeles County Monitoring Review for 2014. We want to continue to make sure all the staff and certified families remain in compliance with DCFS Contract requirements and ensure the safety of the children under our care. We express appreciation for your feedback and guidance during this process. Please feel free to contact me at (562) 236-8200 ext. 311, if you have any questions.

Sincerely,

Ana R. Zimmer, MS
Regional Director
LA County Site Administrator

Attachments
CC: John Peel, Executive Director
Gabriela Vidaurrieta, MA, Regional Director

Dr. David Scorse, Psy. D., Regional Director
Susana Cortes, MSW, Director of Recruitment and Training