County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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March 14, 2014

To: Supervisor Don Knabe, Chairman
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Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

FRED JEFFERSON MEMORIAL FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a review of Fred Jefferson Memorial Foster Family Agency (The FFA) in September 2013. The FFA has three licensed offices; one located in the Second Supervisorial District; one in Riverside County; and one in San Bernardino County and provides services to County of Los Angeles DCFS foster children and youth. According to the FFA's program statement, its mission is "to maintain minors placed in our homes within their existing support system. In doing so, we maintain the minors' existing attachments that they are familiar and comfortable with. We maintain attachments to birth parents when possible and when appropriate. When birth parents are not available our goal then becomes centered on developing and maintaining substitute parents. All children must be attached to an adult that is loving, nurturing, and consistently there for them. Without appropriate relationships with adults that are consistent, minors are unable to develop appropriately."

At the time of the review, the FFA supervised 165 DCFS placed children in 103 certified foster homes. The placed children's average length of placement was ten months, and their average age was 8.

SUMMARY

During OHCMD's review, the interviewed children generally reported: feeling safe at the FFA; having been provided with good care and appropriate services; being comfortable in their environment and being 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 7 of 11 applicable sections of our contract compliance review: Facility and Environment, Education and Workforce Readiness, Health and Medical Needs, Personal Rights and Emotional Well-Being, Personal Needs/Survival and Economic Well-Being, Discharged Children and Personnel Records. Psychotropic Medication was not applicable, as none of the placed children were prescribed psychotropic medication at the time of the review. OHCMD noted deficiencies in the areas of Licensure/Contract Requirements, related to failing to cross report a Special Incident Report via ITrack to OHCMD and the FFA was cited by Community Care Licensing (CCL) on two occasions as a result of deficiencies and findings; Certified Foster Homes, related to home studies for two certified foster parents not being completed prior to certification; and Maintenance of Required Documentation/Service Delivery, related to a certified foster parent not being included in the development of the NSPs and the NSP Quarterly Reports were not comprehensive.

Attached are the details of our review.

REVIEW OF REPORT

On November 1, 2013, the DCFS OHCMD Monitor, Greta Walters, held an Exit Conference with FFA representatives, Cecelia Jefferson-Freeman, Executive Director, Niquelle Burks, Chief Operations Officer, Alice McClain and Qiana Hubbard, Agency Supervising Social Workers. The FFA's representatives: agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve their compliance with regulatory standards; and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this 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. OCHMD will verify that these recommendations have been implemented and provide technical assistance during our next visit to the FFA in March, 2014.

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

PLB:EM:KR
RDS:gw

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy L. Watanabe, Auditor-Controller
Public Information Office
Audit Committee
Cecelia Jefferson-Freeman, Executive Director, Fred Jefferson Memorial FFA
Angelica Lopez, Acting Regional Manager, Community Care Licensing

FRED JEFFERSON MEMORIAL FOSTER FAMILY AGENCY
CONTRACT PROGRAM COMPLIANCE MONITORING REVIEW-SUMMARY

152 West Walnut St., Suite 150 Gardena, CA 90248 License Number: 197805297	12981 Perris Blvd., Suite 208 Perris, CA 92553 License Number: 336408474	14628 Main St. Hesperia, CA 92345 License Number: 366423518

	Contract Compliance Monitoring Review	Findings: September 2013
I	**Licensure/Contract Requirements** (7 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Serious Incident Report Documentation and Cross Reporting	2. Improvement Needed
	3. Runaway Procedures in Accordance with the Contract	3. Full Compliance
	4. Are there CCL Citations/OHCMD Safety Reports	4. Improvement Needed
	5. If Applicable, FFA Ensures Complete Required Whole Foster Family Home (WFFH) Training	5. Not Applicable
	6. FFA Pays Certified Foster Parents (CFP) WFFH Required Supplemental 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. Improvement Needed
	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 Inspections 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, if Applicable Car Seat(s)	10. Full Compliance
	11. Criminal Clearances and Health Screening/CDL/CPR/DOJ/FBI/CACI/Auto Insurance for Other Adults in the Home	11. Full Compliance
	12. FFA Assists CFPs in Providing Transportation	12. Full Compliance

III	**Facility and Environment** (7 Elements) 1. Exterior/Grounds Well Maintained 2. Common Areas/Interior 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. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 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 Medication** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	Not Applicable (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 Choices 7. Children's Chores Reasonable 8. Children Informed About Their Medication and Right to Refuse Medication 9. Children Aware of Right to Refuse or Received 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)	1. Full Compliance 2. Full Compliance 3. Not Applicable
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	Full Compliance (ALL)

FRED JEFFERSON MEMORIAL FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2013-2014

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the September 2013 monitoring review. The purpose of this review was to assess Fred Jefferson Memorial Foster Family Agency's (the FFA's) compliance with the County contract and State regulations and included a review of the FFA's program statement, as well as administrative internal policies and procedures. The monitoring review covered the following 11 areas:

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

For purposes of this review, 12 children were selected for the sample. The Out-of-Home Care Management Division (OHCMD) interviewed ten children. Two children were not interviewed due to their young ages. During the home visit, the children were observed to be comfortable in the certified foster homes and the certified foster parents were observed to be attuned to the needs of the children. OHCMD reviewed all 12 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, no placed children were prescribed psychotropic medication.

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

CONTRACTUAL COMPLIANCE

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

Licensure/Contract Requirements

- A Special Incident Report (SIR) submitted via ITrack regarding an 11 year old child who was poked in the eye by his 7 year old sibling at the certified foster home was not cross reported to OHCMD. The FFA provided OHCMD with verification that the child received medical attention timely.

- Community Care Licensing (CCL) cited the FFA as a result of deficiencies and findings during the investigation of a CCL complaint. According to a complaint report dated September 6, 2013, CCL cited the FFA for a Personal Rights violation when it was determined that the certified foster parent admitted to hitting her biological grandchild in the presence of a 16 month old foster child. The FFA submitted a Plan of Correction (POC) to CCL, which included retraining of the certified foster parent in the areas of Personal Rights and reporting requirements, which was approved by CCL. A referral was made to the Child Protection Hotline (CPHL) and cross reported to Out-of-Home Care Investigations Section (OHCIS). The allegation of Physical Abuse was deemed unfounded by Department of Children and Family Services (DCFS) Emergency Response (ER) Children's Social Worker (CSW) and OHCIS, as it was determined that none of the foster children have reported ever been hit by the certified foster parent. OHCIS requested that the FFA provide a Corrective Action Plan (CAP), which included retraining on Personal Rights and appropriate discipline techniques. The FFA submitted the CAP, which was approved by OHCIS on October 10, 2013.

- According to a CCL complaint report dated October 10, 2013, CCL cited the FFA for a Criminal Clearance violation. It was determined that the certified foster parent had admitted to a DCFS CSW that she had allowed her nephew to reside in the home without having a criminal clearance. A referral was made to the CPHL and cross reported to OHCIS. The allegation of General Neglect was substantiated by the ER CSW and OHCIS, which resulted in the children being removed from the certified foster home. The certified foster home was placed on Indefinite Hold by OHCIS and will no longer be used as a placement resource for DCFS children and youth. The FFA decertified the foster parents prior to CCL's completion of their investigation. No POC was required by CCL.

During the Exit Conference, the FFA Chief Operations Officer stated that training would be provided on Special Incident reporting and that the FFA will continue to train the certified foster parents on Title 22 requirements. The FFA will provide a quarterly newsletter on Title 22 requirements to the certified foster parents and the FFA has begun in-house Team Decision Making meetings with the certified foster parents to discuss issues and concerns before they get out of hand.

Recommendations

The FFA's management shall ensure that:

1. All SIRs are cross reported to all required parties via ITrack and documentation is maintained.

2. All certified foster homes are in compliance with Title 22 Regulations.

Certified Foster Homes

A total of 3 certified foster homes were reviewed and the following deficiencies were noted for two of the three homes.

- The home studies for two certified foster parents were not completed prior to certification. It should be noted these certified foster parents have been certified with the FFA for 12 and 10 years, respectively. During the Exit Conference, the FFA's Chief Operations Officer stated that the FFA will continue to meet this compliance requirement.

Recommendation

The FFA's management shall ensure that:

3. All certified foster parents' home studies are completed prior to certification.

Maintenance of Required Documentation/Service Delivery

- For five children, there was no documentation that the certified foster parents participated in the development of the Needs and Services Plans (NSPs).

- The NSP Quarterly Reports for the 12 reviewed children were not comprehensive; goals were duplicated and not modified, there were no permanency planning for three of the children and monthly dates of contact with the DCFS CSWs were missing.

During the course of the compliance review, the OHCMD monitor met with the FFA Executive Director, the Chief Operations Officer and the Social Worker Supervisor and went over the problematic NSPs. During the Exit Conference, the FFA's Chief Operations Officer stated that the FFA would provide retraining to the FFA social work staff and that the FFA would continue efforts in training to reach full compliance. The FFA submitted documentation that a NSP in-service training had been provided to staff responsible for developing the NSPs on November 4, 2013.

It should be noted that the FFA's representatives did attend the OHCMD's NSP training for providers on January 20, 2012 and did not attend the NSP refresher training on August 1, 2013. Some of the NSPs reviewed were developed prior to the training and some subsequent.

Recommendations

The FFA's management shall ensure that:

4. Certified foster parents are included in the development of the NSPs.

5. NSP Quarterly Reports are comprehensive and include all elements in accordance with the NSP template.

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

The OHCMD's last compliance report dated July 5, 2013, identified 12 recommendations.

Results

Based on our follow-up, the FFA fully implemented 10 of 12 previous recommendations for which they were to ensure that:

- All required vehicle maintenance documentation is maintained in the certified foster parents' files and in accordance with the County contract and the FFA's Program Statement.
- Children's progress towards NSP goals is documented.
- Initial NSPs are comprehensive and include all elements.
- Updated NSPs are comprehensive and include all elements.
- All required assessments are implemented and documented in case files and NSPs.
- Monthly contact with the DCFS CSWs is documented in case files.
- NSP Quarterly Reports are completed in a timely manner.
- They facilitate meeting educational goals of each child.
- Services are provided to improve the children's academic performance.
- All children are treated with respect and dignity and free from corporal punishment.

Two recommendations were not fully implemented:

- The FFA is in full compliance with Title 22 Regulations, free of CCL citations.
- Certified foster parents are included in the development of the NSPs.

The FFA's management shall ensure that:

The outstanding recommendations from the 2012–2013 monitoring report dated July 5. 2013, which are noted in this report as Recommendations 1 and 4, are fully implemented. At the Exit Conference, the FFA representatives stated the FFA would work to remain in compliance with all Title 22 Regulations and Contract requirements. To ensure compliance the FFA would continue to focus on the on-going training of the certified foster parents and the FFA social worker staff. OHCMD will visit the FFA in March 2014 to provide the FFA with technical assistance and follow-up on the implementation of the recommendations.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of the FFA was posted on March 13, 2013. The Auditor-Controller (A-C) identified $48,138 in unallowable costs and $1,648 in unsupported/inadequately supported expenditures. Also, identified were potential overpayments, which DCFS and the FFA needed to work together to resolve. The A-C recommended that DCFS resolve the questioned costs and if appropriate, collect all disallowed amounts. Also noted was that DCFS is to ensure that the FFA's management take the appropriate corrective action to address the recommendations in the A-C's report and monitor to ensure that the corrective action taken results in permanent improvement. The FFA submitted a fiscal CAP, which is being monitored by DCFS Fiscal Monitoring Section. DCFS Fiscal Monitoring Section reported that the FFA is current with their repayment plan.

However, the FFA owes the IRS $857,369.04 in payroll taxes. In December 2013, the FFA submitted an offer in compromise to the IRS to settle the tax debt. The IRS is investigating the offer and will respond to the FFA by April 16, 2014. DCFS will continue to monitor the FFA's efforts to settle its tax debt to determine if any corrective action is warranted.

Fred Jefferson Memorial Homes For Boys
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Gardena, Ca 90248

Phone # (310) 763-1660 Fax # (310) 763-0357

December 2, 2013

Department of Children and Family Services
Out of Home Care Management Division
Gretta Walters
9320 Telestar Avenue Suite #216
El Monte, CA 91731

Regarding: Audit Findings Completed November 5, 2013

Fred Jefferson FFA has provided a Corrective Action Plan to the compliance review conducted November 2013.

I. Licensure/ Contract Requirements

Finding
During the audit it was noted that Special Incident Reports were not appropriately documented and cross reported.

Action Taken
The administrator and Social Worker Supervisor for the Moreno Valley office was trained by the Chief Operations Officer and the Social Worker Assistant on how to properly report incidents for all children by Los Angeles County. Attached you will find the sign in sheet for the training.

Finding
During the audit it was noted that the agency was not free from substantiated Community Care Licensing complaint reports on safety and physical plant deficiencies since the last review.

Action Taken
The agency will continue to train the certified parents on Title 22 regulation to ensure that we make every effort possible to be free from substantiated reports. The agency has created a user friendly newsletter with Title 22 regulations for their understanding. The agency has distributed the newsletter to each certified parent on October 18th. Attached you will find and example of the newsletter that was given.

II. Certified Foster Homes

Finding
During the audit it was noted that all the certified parents did not have a completed home study prior to certification.

Action Taken
The FFA has adopted the Department's procedure of certifying homes that was implemented in October 2009. With this new procedure homes are not able to be certified prior to completion of the S.A.F.E. home study. Since operating under this regulation the agency has not and will not certify any home prior to completion.

IV. Maintenance of Required Documentation and Service Delivery

Finding
During the audit it was noted that the certified parent is not participating in the development of the NSP reports.

Action Taken
The agency social worker will ensure that the certified parent is involved with creating and implementing the goals set for the NSP. The agency's administrator will inform all the certified parents that they are to actively participate and agree with the goals that are set in the NSP. They will also be informed that their signature indicates that they participated in the creation as well as they agree.

Finding
During the audit it was noted that FFA social workers were not completing timely, comprehensive quarterly reports.

Action Taken
The FFA Social Worker Supervisor and Social Workers were all trained how to properly complete the NSP reports by the Administrator. The Administrator created and distributed a "quick top ten" list of do's and don'ts for writing Quarterly Reports and NSPs. Attached you will find a copy of this list that was given at the monthly meeting on November 20th.

If further information is needed regarding the items addressed above please feel free to contact me. I can be reached at (310) 763-1660 ext 118 or (714) 767-5494.

Respectfully submitted,

Niquelle Burks

Niquelle Burks
Administrator