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DEPARTMENT OF CHILDREN AND FAMILY SERVICES
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August 28, 2015

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

From: Philip L. Browning
Director

ASPIRANET FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a contract compliance review of Aspiranet Foster Family Agency (the FFA) in December 2014. The FFA has one site located in the Fourth Supervisorial District and provides services to DCFS foster children and youth. According to the FFA's program statement, its stated purpose is "to meet the need for quality human services for children, families and community and to provide those communities quality foster care services for referred children and their families."

At the time of the review, the FFA supervised 59 DCFS placed children in 30 Certified Foster Homes. The placed children's average length of placement was eight months, and their average age was eight.

SUMMARY

During CAD's contract compliance review, the interviewed children generally reported: feeling safe at the FFA certified 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 (CFPs) reported the FFA staff generally supported them 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 sections of our contract compliance review: Licensure/Contract Requirements; Facility and Environment; Health and Medical Needs; Psychotropic Medication; Personal Rights and Social Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Discharged Children.

CAD noted deficiencies in the areas of: Certified Foster Homes, related to the agency not submitting an inquiry to Out-of-Home Care Management Division (OHCMD) for historical information prior to certification; Maintenance of Required Documentation and Services Delivery, related to the FFA not obtaining the County's Children's Social Worker (CSW) authorization to implement the Needs and

Services Plans (NSPs), CFPs not participating in the development of NSPs, FFA Social Workers not developing initial and updated NSPs with the child's participation, updated NSP not being comprehensive, CSW monthly contacts not documented in child's case file and the FFA Social Workers did not complete comprehensive quarterly reports; Education and Workforce Readiness, related to the FFA not maintaining current copies of the children's report cards; and Personnel Records, related to one staff not receiving all required training.

Attached are the details of our review.

REVIEW OF REPORT

On February 12, 2015, CAD's Rosalind Arrington, held an Exit Conference with FFA representatives, Celia Anthony, Core Program Director and Jeannie Imelio, Chief Operating Officer. DCFS staff included: Kong Ng, 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 agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

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

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

CAD conducted a follow-up visit to the FFA in May 2015 to verify implementation of the compliance CAP.

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

PLB:EM
LTI:ra

Attachments

c: Sachi A. Hamai, Interim Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Celia Anthony, District Administrator, Aspiranet FFA
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Lenora Scott, Regional Manager, Community Care Licensing Division

ASPIRANET FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

4300 Pine Avenue
Long Beach, CA 90813
License Number: 197806097

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

	CONTRACT COMPLIANCE MONITORING REVIEW	FINDINGS: DEC 2014
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 the Development of 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. Needs Improvement 2. Needs Improvement 3. Full Compliance 4. Needs Improvement 5. Needs Improvement 6. Full Compliance 7. Full Compliance 8. Needs Improvement 9. Needs Improvement 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 Maintained 4. Children's Academic Performance and/or Attendance Increased 5. FFA Facilitates Child's Participation in YDS/Vocational Programs	1. Full Compliance 2. Full Compliance 3. Needs Improvement 4. Full Compliance 5. Full Compliance

	CONTRACT COMPLIANCE MONITORING REVIEW	FINDINGS: DEC 2014
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	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 Allowance 6. Management of Allowance/Earnings 7. Encouragement /Assistance with Life Book/Photo Album	Full Compliance (All)

	CONTRACT COMPLIANCE MONITORING REVIEW	FINDINGS: DEC 2014
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. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Needs Improvement 8. Full Compliance 9. Full Compliance

ASPIRANET 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 December 2014 monitoring review. The purpose of this review was to assess Aspiranet Foster Family Agency's (the FFA) 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 Medications,
- Personal Rights and Social/Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children; and
- Personnel Records.

For purposes of this review, 10 placed children were selected for the review. The Contracts Administration Division (CAD) interviewed six children. However, four children were not interviewed, due to their young age. During the home visits, the children were observed to be comfortable in the Certified Foster Homes (CFHs) and the Certified Foster Parents (CFPs) were observed to be attuned to the needs of the children. CAD reviewed all 10 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, three placed children were prescribed psychotropic medication. CAD reviewed their case files to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

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

CONTRACTUAL COMPLIANCE

CAD found the following areas to be out of compliance.

Certified Foster Homes

- The FFA did not inquire with Out-of-Home Care Management Division (OHCMD) for historical information prior to certification.

One CFP was certified on August 23, 2014 and the request to OHCMD was sent on November 10, 2014. The FFA representative stated that they would ensure that all OHCMD historical checks are completed prior to certification and the Program Director will provide the final review of the files to ensure that all requirements are met before a family is certified.

Recommendation:

The FFA's management shall ensure that:

1. Agency's inquiry with OHCMD for historical information will be conducted prior to certification.

Maintenance of Required Documentation and Service Delivery

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

Seven case files did not have documentation of the FFA's efforts to obtain the CSW's authorization to implement the NSPs.

- CFPs did not participate in the development of the NSPs.

Two CFPs did not participate in the development of the NSPs. The CFP did not sign the updated NSPs for two children.

- FFA Social Workers did not develop timely initial NSPs with child's participation.

Five initial NSPs were developed timely, but were not signed by the children within the required timeframes.

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

Three updated NSPs were not developed within the required timeframes and did not include the participation of the children. Three NSPs were not comprehensive. All sections of the NSP were not completed properly, language was copied and pasted, goals didn't properly address the children's needs and services and the same verbiage were on each report.

- CSW monthly contacts were not documented in the NSPs.

Three NSPs did not contain proper CSW monthly contact information. The NSPs didn't include dates or a summary of the contacts.

- The FFA social worker did not complete timely and comprehensive quarterly reports.

Although quarterly NSPs were developed, three were not timely or comprehensive. Some sections in the NSPs were not completed and/or not comprehensive and were not signed by a child or team member. There were no documented efforts to acquire CSWs signatures, no measurable "SMART" goals and information was repeated.

The FFA representative was made aware of the need to properly complete each section of the NSP and obtain signatures from all team members in a timely manner. The FFA representatives stated that the problem was an oversight. The Program Director will provide re-training to their social workers on how to appropriately complete the NSPs.

Recommendations:

The FFA's management shall ensure that:

2. The FFA obtains or documents efforts to obtain the CSW's authorization to implement the NSPs.

3. CFPs participate in the development of the NSPs.

4. FFA social workers develop timely, comprehensive initial NSPs with the child's participation.

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

6. All County CSW's monthly contacts are documented in each child's case file.

7. FFA Social Workers develop timely, comprehensive quarterly reports.

Education and Workforce Readiness

- The FFA did not maintain current report cards for two children.

During the Exit Conference, the FFA was made aware of the need to keep copies of all report cards to ensure that each child is attending school on a regular basis and is progressing toward meeting their educational goals.

Recommendation:

The FFA's management shall ensure that:

8. Current copies of the children's report cards are maintained in the case files.

Personnel Records

- Employees receive all required training and documentation is maintained.

One employee did not receive the child abuse identification and reporting training in a timely manner.

During the review, the FFA was informed of the need for all employees to receive all required trainings timely and to maintain documentation in their personnel files. The FFA provided documentation for the one employee who was hired on June 10, 2013, but did not complete the required child abuse reporting training until December 11, 2014.

Recommendation:

The FFA's management shall ensure that:

9. FFA employees complete all required training timely and documentation is maintained.

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

The OHCMD's last compliance report dated June 27, 2014, identified three recommendations.

Results:

Based on CAD's follow-up, the FFA fully implemented 1 of 3 recommendations for which they were to ensure that:

- All placed children/youth are enrolled in school within three school days of placement.

The FFA did not implement the following recommendations for which they were to ensure that:

- OHCMD is contacted for historical abuse/neglect background information regarding prospective CFPs prior to certification and documentation is maintained in their files.

- Initial NSPs, updated NSPs, and quarterly reports are developed timely.

The outstanding recommendations from the 2013-2014 monitoring report dated June 2014, which are noted in this report as recommendations 1, 4, 5, & 7 are fully implemented.

The FFA representatives expressed their desire to remain in compliance with Title 22 regulations and contract requirements. On May 19, 2015, CAD conducted a follow-up visit and reviewed one initial NSP and three updated NSPs. It was verified that the agency was in compliance with timely development of the initial and updated NSPs. However, although the NSPs were timely, they were not comprehensive and all the required signatures were not obtained. The agency was advised to implement their new protocol.

CAD found that the FFA implemented 5 of 9 recommendations. The FFA will continue to work on those recommendations not yet implemented so that they may be fully implemented by the next compliance review. CAD will assess implementation of the recommendations during the next review. The OHCMD will provide on-going technical assistance prior to the next review.

MOST RECENT FISCAL REVIEW CONDICTED BY THE AUDITOR-CONTROLLER

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

The FFA has an outstanding debt of $787.92 and is making payments in accordance with invoice dates.

ASPIRAnet
Strengthening Children, Youth, Families and Communities

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Re: Aspiranet CAP
May 15, 2015- revision date

Dear Ms. Arrington,

Per the field exit summary that occurred on February 12, 2015, regarding the Contract Compliance Review, the following Corrective Action Plan is being submitted for your approval.

There has been a change in Program Director and as a result, the process of ensuring staff are following both agency and contractual expectations is underway.

Section II. Certified Homes, #9

Finding #1 (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?

Response:

1. Currently, there is a staff person designated to making sure that these forms are collected, entered, and received prior to the family being approved for certification.
2. The current practice is for the Program Director to provide the final review of the file to ensure that all requirements are met before a family is certified.
3. No family will be certified without verification of this clearance.

Staff Responsible: Program Director, Trainer and Administrative Support staff, ongoing prior to a family being certified.

Section IV. Maintenance of Required Documentation and Service Delivery, #27, 28, 30, 31, 34, and 35

Finding #2 (27)- Did the FFA obtain or document efforts to obtain the County Worker's authorization to implement the NSP?

Response:

1. Aspiranet Social Workers will email/fax NSPs to the County Social Worker a minimum of 3 times and provide the attached email/fax receipt to the document being sent.
2. The Aspiranet Social Worker will provide these receipts to their Supervising Social Worker in order to ensure that the minimum number of attempts (3) is

met. The receipts will be attached to said document and placed into the office file.

Staff Responsible: Social Workers and Program Supervisor, ongoing with every NSP/Quarterly due.

Finding #3 (28)- Do the certified foster parents participate in the development of the NSPs?

Response:

1. The Supervising Social Worker will review upcoming NSPs with staff and to ensure that the agency's Service Planning Conference form is signed to indicate inclusion of all relevant parties occurred and/or was attempted (3 times minimum).

Staff Responsible: Social Workers, Foster Parent, and Supervisor, ongoing.

Finding #4 (30)- Did the social worker develop timely, comprehensive, initial (INSPs) with the participation of the developmentally age appropriate child?

Response:

1. The Aspiranet Program Director will be providing re-training to all social workers specific to required documentation and service delivery. This will include formulating goals, more comprehensive reports, and timelines.

Staff Responsible: Program Director, Social Workers by May 2015.

2. The Supervising Social Worker will be reviewing all upcoming documentation specific to INSPs and NSPs with Social Workers during weekly supervision and will review the expectations specific to having the Service Planning Conference form signed during the development of goals.

Staff Responsible: During weekly supervision with the Social Worker, the Supervisor will review upcoming reports, to ensure reports are comprehensive and timely.

3. Aspiranet Social Workers will utilize the existing Service Planning Conference Form that indicates goals were developed with the Foster Parent, the Foster Child, and other relevant participants, such as the County Social Worker.

Staff Responsible: Social workers, ongoing every 6 months or when new goals are developed.

Finding #5 (31)- Did the FFA social worker develop timely, comprehensive, updated NSPs with the participation of the developmentally age appropriate child?

Response:

1. The Program Supervisor will monitor this with staff during weekly supervision and will review all reports to ensure comprehensive information is included,

including obtaining the signatures of CFPs, Children, and documented attempts to obtain CSW signatures.

2. Social Workers will provide Service Planning Conference form indicating signatures of parties involved, which will be maintained in the child's file.

Staff Responsible: Program Supervisor and Social Workers, weekly during supervision and as reports are completed.

Finding #6 (34)- Are County workers contacted monthly and are the contacts appropriately documented in the case file?

Response:

1. The Social Workers have been informed of expectations on this matter and will utilize specific dates in the NSPs.
2. The Program Supervisor reviews reports to ensure that specific dates are included.
3. The Program Supervisor utilizes a form that indicates the frequency of contact between the Agency and County Social Workers.

Staff Responsible: Program Supervisor is monitoring this as notes are turned in for approval.

Finding #7 (35)-Does the FFA Social worker complete timely, comprehensive, quarterly reports?

Response:

1. The Program Director has reset expectations specific to reports including measurable goals, comprehensive information, timeliness, and obtaining all signatures required in a timely fashion.

2. Retraining of staff will occur in May 2015 to continue to improve this area. Additionally, the Program Supervisor works closely with the social workers on reports and reviews all reports for final approval.

3. Staff has been informed of the expectation regarding emails/fax receipts and their need to be attached to the report to indicate the attempts to obtain CSW signatures.

Staff Responsible: Social Workers, Program Supervisor, Program Director.
Retraining will be conducted in May 2015 and the Program Supervisor continues to provide ongoing feedback to social workers re: Steps 1-3 as reports are due and/or completed.

<u>Section V. Education and Workforce Readiness, #39</u>
Finding #8 (39)- Are current copies of the children's report cards or progress reports maintained?

Response:

1. Social Workers will collect report cards at each reporting interval.
2. The report card will be placed into the child's file.
3. The Program Supervisor will utilize existing systems to track these.

Staff Responsible: Social Workers, Foster Parents, and Program Supervisor
As the grading interval ends and report cards are provided.

Section XI. Personnel Records, #74

Finding #9 (74)- Have appropriate employees received all required training (initial training, minimum of one-hour training in the area of child abuse identification and reporting, CPR, First-Aid, and on-going training)?

Response:

1. A New Hire Check List is completed to reflect such training and a training certificate is kept on file.
2. The Program Director and Supervising Social Worker will work together to ensure that all training is completed per the New Hire Training and that any relevant training certificates are maintained at the district office.

Staff Responsible: Program Supervisor and Director, as new employees are hired.

Thank you for your time in this matter. Please feel free to contact me with any questions regarding this plan of correction. I can be reached at: 310-535-1500 x5786, or via email at: canthony@aspiranet.org

Thank you,

CeCe Anthony
Core Program Director II
Aspiranet FFA

Cc: Rosalind Arrington