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August 4, 2008

TO: Supervisor Yvonne B. Burke, Chair
Supervisor Gloria Molina
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: Wendy L. Watanabe
Acting Auditor-Controller

SUBJECT: **WINGS OF REFUGE FOSTER FAMILY AGENCY CONTRACT REVIEW - A DEPARTMENT OF CHILDREN AND FAMILY SERVICES PROVIDER**

We have completed a contract compliance review of Wings of Refuge Foster Family Agency (Wings or Agency), a Department of Children and Family Services (DCFS) Foster Family Agency service provider.

Background

DCFS contracts with Wings, a private non-profit community-based organization to recruit, train and certify foster care parents for the supervision of children placed in foster care by DCFS. Once the Agency places a child, it is required to monitor the placement until the child is discharged from the program.

Wings is required to hire qualified social workers to provide case management and act as a liaison between DCFS and foster parents. The Agency oversees a total of 46 certified foster homes in which 118 DCFS children were placed at the time of our review. Wings' offices are located in the Second and Fifth Districts.

DCFS paid Wings a negotiated monthly rate, per child placement, established by the California Department of Social Services' (CDSS) Foster Care Rates Bureau. Based on the child's age, the Agency received between $1,589 and $1,865 per month, per child. Out of these funds, the Agency pays the foster parents between $624 and $790 per month, per child. Wings was paid approximately $2,863,000 during Fiscal Year 2006-07.

Purpose/Methodology

The purpose of the review was to determine whether Wings was providing the services outlined in their Program Statement and the County contract. We reviewed certified foster parent files, children's case files, personnel files and interviewed the Agency's staff. We also visited a number of certified foster homes and interviewed several children and foster parents.

Results of Review

Wings needs to ensure that foster homes, case files, and staff are in compliance with the County contract and CDSS Title 22 regulations. Specifically:

- One of the five homes visited did not have baby formula for a four month old infant diagnosed as a "failure to thrive" infant. A "failure to thrive" diagnosis results from a child not receiving the necessary nutrition to maintain physical growth and development. We notified the County's Child Abuse Hotline and CDSS' Community Care Licensing Division. Both agencies conducted investigations and the home was decertified. The four foster children living in the home at the time of our review were removed and placed with different foster parents.

- Three of the five homes visited did not adequately secure items that could pose a potential safety hazard to children.

- Six of the ten children's initial dental and medical examinations were not conducted timely. For two of the six children, the initial examinations were approximately five months past due at the time of our review. For the remaining four, the initial examinations were conducted an average of 35 days late.

- Seven of the thirteen children taking psychotropic medication did not have monthly evaluations by the prescribing physician documented in the children's case files.

- None of the ten Needs and Services Plans (NSPs) reviewed contained goals that were specific, measurable, and time limited.

- One of the ten NSPs reviewed did not address the identified needs of the child. In addition, the child's foster parent indicated that she was not receiving adequate support from Wings in addressing the child's identified needs.

- Six of the ten NSPs were not approved by the children's DCFS social worker.

- Five of the ten case files reviewed did not contain documentation that the children were visited the required number of times by Wings' social workers.

- Four of the five homes reviewed were not assessed by Wings to determine the foster parents' ability to effectively care for more than two children prior to placing more than two children in the home.

- Four Agency social workers carried more cases than allowed by the County contract.

- Two Agency social workers did not have Child Abuse Index clearances on file with the Agency. One Agency social worker did not have a criminal clearance on file. Subsequent to our review, one of the social workers was terminated and the other two social workers received the appropriate clearances.

The details of our review along with recommendations for corrective action are attached.

Review of Report

We discussed our report with Wings and DCFS management. Wings response to our report is included in Attachment 1 and indicates the actions the Agency has taken to implement the recommendations. DCFS' response to our report is included in Attachment 2. In their response, DCFS indicates that effective July 18, 2008, DCFS placed the Agency on "hold" status, stopping all new placements. In accordance with the contract, DCFS will be meeting with Wings to grant the Agency due process regarding the "hold" status.

We thank Wings and DCFS for their cooperation and assistance during this review. Please call me if you have any questions or your staff may contact Don Chadwick at (626) 293-1102.

WLW:MMO:DC

Attachment

c: William T Fujioka, Chief Executive Officer
Patricia S. Ploehn, Director, Department of Children and Family Services
Susan Kerr, Senior Deputy Director, Department of Children and Family Services
James Smith, Chair, Board of Directors, Wings of Refuge FFA
Rene Moncito, President and CEO, Wings of Refuge FFA
Jean Chen, Community Care Licensing
Public Information Office
Audit Committee

FOSTER FAMILY AGENCY PROGRAM
WINGS OF REFUGE FOSTER FAMILY AGENCY
FISCAL YEAR 2007-2008

BILLED SERVICES

Objective

Determine whether Wings of Refuge Foster Family Agency (Wings or Agency) provided program services in accordance with their County contract and California Department of Social Services (CDSS) Title 22 regulations.

Verification

We visited five of the 46 Los Angeles County certified foster homes that Wings billed the Department of Children and Family Services (DCFS) in March and April 2007, and interviewed five foster parents and eight of the 19 children placed in the five homes. We also reviewed the case files for five foster parents and ten children. In addition, we reviewed the Agency's monitoring activity.

Results

Wings needs to ensure that foster homes are in compliance with the County contract and CDSS Title 22 regulations. For example, Wings needs to ensure that foster parents maintain and provide the quantity and quality of food necessary to meet the daily needs of the children and that items that could pose a potential safety hazard to children are adequately secured. Wings also needs to ensure that children receive dental and medical examinations within the required timeframes and that children taking psychotropic medications have current court authorizations for the administration of the medications and are seen monthly by the prescribing physician. In addition, Wings needs to ensure that Needs and Services Plans (NSPs) and Quarterly Reports contain all the required information and are prepared within the timeframes specified in the County contract. We specifically noted the following:

Foster Home Visitation

Two of the five foster homes visited were well maintained and in compliance with CDSS Title 22 safety regulations. However, we noted the following at the remaining three homes visited:

- One (20%) of the five homes visited did not have baby formula for a four month old infant diagnosed as a "failure to thrive" infant. A "failure to thrive" diagnosis results from a child not receiving the necessary nutrition to maintain physical growth and development. We notified the County's Child Abuse Hotline and CDSS' Community Care Licensing Division. Both agencies conducted investigations and

the home was decertified. The four foster children living in the home at the time of our review were removed and placed with different foster parents.

- Three (60%) of the five homes visited did not adequately secure items that could pose a potential safety hazard to children. One of the homes did not adequately secure detergents, cleaning solutions and alcoholic beverages. The second home did not adequately secure detergents, cleaning solutions, kitchen knives, sharp gardening tools and gasoline. The third home did not adequately secure prescription medications, sharp gardening tools, gasoline, cleaning solutions, had an unsecured cactus garden and a trampoline with an unsecured safety net.

- One (20%) of the five homes visited did not have an adequate means of escape from the second story of the home in case of an emergency.

- One (20%) of the five homes visited had a window safety device in the children's bedroom that was obstructed by the bedroom dresser. The placement of the dresser made it difficult to release the window safety device in an emergency. In addition, the foster parent did not know how to release the safety device and did not conduct a disaster drill with the children upon placement as required.

- One (20%) of the five homes visited did not have lighting in two bedrooms where four children slept.

- One (20%) of the five homes visited had a ceiling fan/light in the children's bedroom that appeared to pose a potential safety hazard. The fan/light shook when it was in use and the children stated that they feared it would fall from the ceiling.

- One (20%) of the five homes visited did not have window screens in the children's bedrooms.

- One (20%) of the five homes visited had a garage that needed to be cleaned. It was filled waist high with clothes, boxes, shoes, and two old inoperable cars were parked inside.

Medical Services

- Six (60%) of the ten children's initial dental and medical examinations were not conducted timely. For two of the six children, the initial examinations were approximately five months past due at the time of our review. For the remaining four, the initial examinations were conducted an average of 35 days late.

- One (20%) of the ten children's annual medical examination was conducted approximately three months late.

- One (8%) of the 13 children taking psychotropic medication did not have a current court authorization for the administration of the medication.

- Seven (54%) of the 13 children taking psychotropic medication did not have monthly evaluations by the prescribing physician documented in the children's case files as required by the County contract.

- Nine (69%) of the 13 children taking psychotropic medication did not have the medication incorporated into their NSPs.

- The foster parents for seven (54%) of the thirteen children taking psychotropic medication were not maintaining daily medication logs.

Needs and Services Plans

- Four (40%) of the ten initial NSPs reviewed were not prepared within 30 days from the date of the children's placement. The four initial NSPs were completed an average of 6.5 months late. In addition, the four NSPs did not include the date they were completed.

- Two (20%) of the ten NSPs reviewed were not updated timely and four (40%) NSPS were not appropriately updated. The two NSPs were updated approximately two months late and the four NSPs contained the same information as the previous NSPs with little or no modification.

- None of the ten NSPs reviewed contained goals that were specific, measurable, and time limited.

- Five (50%) of the ten NSPs reviewed did not contain documentation that the children or the foster parents had been offered the opportunity to participate in the development of the NSPs.

- One (10%) of the ten NSPs reviewed did not address the identified needs of the child. Specifically, the NSP did not address the child's developmental delays in speech, toilet training, self care, attention deficit, and hyperactivity. In addition, the child's foster parent indicated that she was not receiving adequate support from Wings in addressing the child's identified needs.

- Eight (80%) of the ten NSPs reviewed did not indicate the reason the child was in placement.

- Six (60%) of the ten NSPs reviewed were not approved by the children's DCFS social worker as required.

Children's Case Files

- Five (50%) of the ten case files reviewed did not contain documentation that the children were visited weekly by Wings social workers during their first three months of placement as required by the County contract. During this period, 33 required visits were not documented for these five children.

- Three (30%) of the ten case files reviewed did not contain documentation that the children were visited by Wings social workers at least twice a month after their first three months of placement as required by the County contract. During a four month period, 13 required visits were not documented for these three children.

- Two (20%) of the ten children's required home visits were not made within the timeframes required by the County contract. The County contract requires Wings social workers to visit children twice a month, approximately 14 days apart after the child has been placed in the home over three months. We noted two instances where the visits were 30 and 25 days apart, respectively.

- Five (50%) of the ten case files reviewed did not contain documentation that the children's DCFS social workers were provided with monthly phone updates on the children's progress.

- Four (40%) of the ten progress notes reviewed did not contain sufficient detail to permit an evaluation of services provided to the children as required by the County contract.

- Three of the ten case files reviewed contained documentation of incidents that would require the Agency to prepare a Special Incident Report. For example, one child was diagnosed by her physician as a "failure to thrive" infant and the other two children were transferred to different foster homes because they were not receiving adequate care. However, the Agency did not prepare the three required Special Incident Reports.

- None of the twenty Termination Reports reviewed contained closing summaries of the Agency's records relating to the children's placement.

Foster Parent Certification

- Four (80%) of the five foster homes reviewed were not assessed by Wings to determine the foster parents' ability to effectively care for more than two children prior to placing more than two children in the homes. An average of four children were placed in each of the homes at the time of our review.

- One (20%) of the five foster parent certification files reviewed did not contain documentation that the foster parent completed Wings' foster parent orientation or

attended 18 hours of initial training prior to certification as required by the County contract.

Quarterly Reports

- Three (30%) of the ten case files reviewed did not contain an initial Quarterly Report. At the time of our review, the three children had been in placement approximately six months.

- Two (20%) of ten case files did not contain a current Quarterly Report. At the time of our review, both Quarterly Reports were approximately two months past due.

- None of the seven initial Quarterly Reports available for review contained the date they were sent to the DCFS social worker. As a result, we could not determine if they had been sent to the DCFS social worker timely.

- None of the seven initial Quarterly Reports available for review addressed all the information required by the County contract such as the children's progress in achieving short-term and long-term goals.

Recommendations

Wings management ensure:

1. **Staff adequately monitor foster homes to ensure they comply with the County contract and CDSS Title 22 regulations.**

2. **Foster parents maintain and provide the quantity and quality of food necessary to meet the daily needs of the children.**

3. **Foster parents adequately secure knives, detergents, cleaning solutions, medications, alcoholic beverages, gasoline and other items that could pose a potential safety hazard to children.**

4. **Foster homes with a second story have an adequate means of escape from the second story in case of an emergency.**

5. **Window safety devices are not obstructed by furniture or other items and foster parents know how to operate window safety devices.**

6. **Foster parents conduct and document disaster drills with children upon placement and every six months thereafter.**

7. **Foster homes have adequate safe lighting and window screens for the children's bedrooms.**

8. Foster homes are maintained in accordance with the County contract and CDSS Title 22 regulations.

9. Children's initial and annual dental and medical examinations are conducted within the timeframes specified in the County contract.

10. Children taking psychotropic medication have a current court authorization for the administration of the medication, are seen monthly by the prescribing physician, and have the psychotropic medication incorporated into their NSPs.

11. Foster parents maintain daily medication logs indicating all the prescription and non-prescription medications administered to children.

12. NSPs are prepared within the required timeframes, are appropriately updated, and contain goals that are specific, measurable, and time limited.

13. Children and foster parents are offered the opportunity to participate in the development of the NSPs.

14. NSPs address the identified needs of the children, indicate the reason the children are in placement, and are approved by the children's DCFS social worker.

15. Children are visited weekly during the first three months of placement and twice a month, approximately 14 days apart, after the first three months of placement by the Agency's social workers.

16. DCFS social workers are updated monthly regarding the children's progress and progress notes contain sufficient detail to permit an evaluation of services provided to the children.

17. Special Incident Reports are completed when required and Termination Reports contain all the required information.

18. Foster home assessments are completed for homes where more than two children are placed.

19. Foster parents complete Wings' foster parent orientation and receive the required number of initial training hours.

20. Quarterly Reports contain all the required information and are prepared within the timeframes required by the County contract.

CLIENT VERIFICATION

Objective

Determine whether the program participants received the services that Wings billed to DCFS.

Verification

We interviewed eight children placed in three Wings certified foster homes and five foster parents to confirm the services Wings billed to DCFS.

Results

The foster children indicated they enjoyed living with their foster parents. Four of the five foster parents interviewed stated they were generally happy with the services they received from the Agency. However, as previously noted, one foster parent indicated she was not receiving adequate support from the Agency in dealing with a developmentally delayed child's identified needs.

Recommendation

21. Wings management ensure that foster parents receive adequate support from the Agency's social workers.

STAFFING/CASELOAD LEVELS

Objective

Determine whether Wings social workers' caseloads do not exceed fifteen placements and whether the supervising social worker does not supervise more than six social workers as required by the County contract and CDSS Title 22 regulations.

Verification

We interviewed Wings' administrator and reviewed caseload statistics and payroll records for the Agency's social workers and supervising social workers.

Results

The Agency's supervising social workers supervised an average of five social workers. However, four of Wings' social workers carried more cases than allowed by the County contract and CDSS Title 22 regulations. The four social workers carried an average caseload of 18 cases during a two month period.

Recommendations

Wings management:

22. **Ensure that social workers do not maintain more cases than allowed by CDSS Title 22 regulations.**

23. **Hire additional social workers if the number of cases exceeds the maximum number allowed by CDSS Title 22 regulations.**

STAFFING QUALIFICATIONS

Objective

Determine whether Wings staff possess the education and work experience qualifications required by their County contract and CDSS Title 22 regulations. In addition, determine whether the Agency conducted hiring clearances prior to hiring their staff and provided ongoing training and performance evaluations to staff.

Verification

We interviewed Wings' administrator and reviewed each staff's personnel file for documentation to confirm their education and work experience qualifications, hiring clearances, ongoing training and performance evaluations.

Results

Wings' administrator, supervising social worker, and social workers possessed the education and work experience required. Wings also provided performance evaluations for staff working on the County contract. However, two social workers did not have Child Abuse Index clearances and one social worker did not have a criminal clearance on file with the Agency. Subsequent to our review, one of the social workers was terminated and the other two social workers received the appropriate clearances. In addition, Wings could not provide documentation that five staff completed Wings' initial orientation and yearly in-service training.

Recommendation

24. **Wings management ensure staff working on the County contract have Child Abuse Index and criminal clearances on file and attend Wings' initial orientation and annual in-service training.**

Wings of Refuge
FAMILY SERVICES AGENCY

HEALING
FAMILIES
CHILDREN
COMMUNITIES

June 13, 2008

TO: Supervisor Yvonne B. Burke, Chair
Supervisor Gloria Molina
Supervisor Zev Yaroslavsky
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: Paulette Buchanan, Administrator-LA
Jontae Watkins, Administrator-Palmdale

SUBJECT: Wings of Refuge (WOR) Corrective Action Plans

In response to your contract compliance review, the following is WOR corrective action plan for your review/approval. Please note, during this audit, there was one administrator responsible for the Los Angeles Office and the Palmdale Office. There were several different social workers in the Palmdale office who where assigned to those selected cases in which items were not filed in the cases and they were not closely monitored as they should have been by those social workers. Those social workers are no longer with the agency. As of this writing, many things have changed in these offices. The LA office has 4 full time social workers and more social workers will be hired as needed.. There is one Administrator for the Palmdale Office and one Administrator for the Los Angeles Office. The Palmdale office has 3 full time social workers and two more social workers are being hired.

The following are the Corrective Action Plans that address the County review recommendations:

CORRECTIVE ACTION PLANS:

1. Since the changes have been made in both offices, The Social workers staff will continue to closely monitor foster homes to make sure that they comply with the County contract and CDSS Title 22 regulations. This requirement will be monitored through the regular FFA supervision process.

2. CFP have been trained regarding Title 22 regulations to include, but not limited to the quality and quantity of food necessary to meet the daily needs of the children. Social workers will reinforce these regulations.

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3. CFP have been trained on certified parents responsibilities regarding adequately securing knives, detergents, cleaning solutions, medications, etc that could pose a potential safety hazard to children. We monitor this during the weekly/biweekly visits from the social workers.

4. The social workers have been instructed by the supervisors to inspect the home for the safety ladder of foster homes to ensure that homes with a second story have adequate means of escape from the second story in case of an emergency.

5. As a routine, safety inspections are completed to ensure window safety devices are not obstructed by furniture or other devices. The CFP demonstrate how to operate the window devices.

6. The social worker ensures that the CFP conduct and document fire and disaster drills with the children upon placement and every six months thereafter.

7. During the social worker home visits, they will monitor to ensure that CFP homes have adequate safe lightning and window screens for the children bedrooms.

8. WOR continues to monitor foster homes to ensure compliance with the county contract and CDSS Title 22 regulations. This is reviewed with the social workers during the supervision process.

9. The new social worker staff with the assistance of the DCFS CSW continue to make every attempt to ensure that proper referral and the appropriate paperwork is provided in a timely manner to ensure that the children's initial medical and dental and annual exams are completed for the county contract. Social workers follow up and document the progress of ensuring that these medical and dental needs are met.

10. Each social worker who has a child or children on their caseload who takes psychotropic medication is responsible to follow up with documentation that the children are being monitored by the prescribing psychiatrist. The new NSP will address the psychotropic medication for each child. This will also be monitored through the supervision process.

11. The social worker provides the monthly medication log for the CFP to document all prescription and non prescription medications administered to children. This is monitored through the supervision process.

12. The supervision process provides monitoring the NSPs (new format) are prepared within the required timeframes and are appropriately updated and the goals are specific, measurable, and time limited.

13. We mandate that CFP and foster children participate in the NSP.

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14. The supervision process ensures that the social worker address the identified needs of the children and the reason for placement on the NSP and 3 attempts are made to get the DCFS CSW approval and signature.

15. The supervision process ensures that the social worker visits and document that children are visited weekly during the first 3 months of placements and bi monthly thereafter.

16. The supervision process ensures that agency social workers contact DCFS CSWs monthly and document the details of the children's progress to ensure that sufficient detail is provided to permit an evaluation of services provided to the children.

17. The new social worker staff have been trained to complete SIR promptly and comprehensive Termination reports when children leave the agency.

18. Administrative staff is mandated to complete foster home assessments where more than two children are placed.
    a- CFP are able to provide quality care and adequate supervision.
    b- CFP is able to provide age appropriate of all the children placed in their homes.
    c- CFP are required to have at least 12 months experience before more than two children are placed in their homes.

19. All foster parents are required to complete MAPP, Orientation and Foster parent training. Periodic chart audits are done for the Foster parents to ensure that the CFP orientation and initial training (MAPP hours) has been documented and file.

20. The supervision process ensures that the new quarterly format along with the NSP contain all the required information including but not limited to short and long term goals and are prepared within the required timeframes per the county contract.

21. Wings management continues to ensure that the social workers are providing adequate support and training to the CFP to meet ALL the children's needs.

22. Wings of Refuge management continue to monitor and ensure that social workers case loads meet Title 22 regulations.

23. Wings of Refuge management continue to hire additional social workers if the number of cases exceeds the maximum number allowed by CDSS Title 22 regulations.

24. Wings of Refuge management will continue to follow up with HR to ensure that all staff working with WOR have child abuse index and criminal clearances on file and attend all initial orientation and annual in service training. All supporting documentation must placed in each employee file.

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We thank you for the opportunity to address the Wings of Refuge contract review recommendations. If you have any questions, please do not hesitate to let us know.

Cc: Wendy L. Watanabe, Acting Auditor-Controller
Brian Henricks, CIA
Cassandra Youngblood, Contract Monitor
Rnee Moncito, CEO

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July 28, 2008

To: Aggie Alonso, Chief Accountant-Auditor
Department of Auditor Controller

From: Marilynne Garrison, Division Chief
Out of Home Care Management Division

WINGS OF REFUGE FFA CHRONOLOGY OF EVENTS

The following is a chronology of events regarding Out of Home Care Management Division (OHCMD) FFA Performance Management Section's monitoring reviews of Wings of Refuge FFA.

June 2006 Review: 5 children's files and 12 certified foster parent's files were reviewed.

Findings: Numerous visit/contact notes were missing in the files for 13 children from both the Palmdale and Los Angeles offices. There were expired psychotropic authorizations for two children; two children did not have current medical examinations; two children did not have current dental examinations. Two certified foster parents did not have Home Studies or initial certification documents in their files and there was no CAI clearance on file for one certified foster father. There were no findings which presented as abuse concerns.

In accordance with the monitoring protocol, a Corrective Action Plan (CAP) was requested. An addendum was necessary and it was approved on October 31, 2006.

November 2006 Review: 12 children's files and seven certified foster parent's files were reviewed.

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Findings: For one certified foster parent, there were no criminal clearances for foster mother's adult son who resided in the home. We also noted numerous missing visit/contact notes for four children from the Palmdale office. The CAP was not fully implemented from the June 2006 review as evidenced by ongoing missing visit/contact notes in the November 2006 review. We again requested a CAP to address this issue and to provide a plan for oversight. The CAP was submitted timely and was approved.

Wings of Refuge's 2006 Scorecard from the FFA Performance Reviews was completed by OHCMD. Wings of Refuge scored Below Standard in the areas of Safety (Free from Substantiated Abuse and Neglect and Implemented CAP) and School Enrollment (enrolling children within three days of placement).

March 2007 Review: 18 children's files and seven certified foster parent's files were reviewed.

Findings: During our review of a certified foster parent file, we noted that there was a SIR in the file that was written by the FFA and was reported to the CSW for the children in the home, however, the FFA did not report the SIR to OHCMD.

According to the SIR, one child placed in the home mentioned to the FFA social worker that foster mother was driving the children to and from appointments and the FFA was aware that foster mother did not have a California Driver's license. The FFA placed the children in respite awaiting CCL's response. The FFA placed the children back in the home once they and the CSW for the children met with the foster parent to complete a safety plan. However, OHCMD did not find a written plan of correction in the file to ensure that foster mother would not drive the children until she has a California Driver's license on file with the FFA. OHCMD requested that the FFA complete a plan of correction to address this issue and the certified foster mother signed an affidavit, indicating that she will not drive the placed children without a California driver's license that remains on file with the FFA. Furthermore, the Needs and Services Plans were vague, and lacked little to no new information or progress documented in the reports and lacked a supervisor's signature indicating that the reports were reviewed. A CAP and CAP addendum were requested and approved.

December 2007 Review: 31 children's files and 12 certified foster parent's files were reviewed.

Findings: In the area of safety, we noted that there were eight substantiated allegations of abuse or neglect from July 1, 2007 to December 31, 2007. The Palmdale office had numerous findings including: information on children's school enrollment within three days was missing for at least two of the children's files; there were numerous missing contact/visit notes in the children's files; the adoption home study for two children was delayed by the Wings' FFA adoption social worker, who failed to maintain contact with the children's CSW, for an unknown reason; one certified foster home had seven children residing in her home, during our review, without a DCFS exception and it was noted that she had been over the approved capacity continually for

at least a year with various placements. Furthermore, foster mother had given birth and the FFA failed to make a plan for the foster children in the home prior to and following the birth of foster mother's twins. For one child placed in this home, we noted that the foster mother had taken her off her prescribed psychotropic medication and had discontinued her therapy for a period of one month without any approval from the CSW and psychiatrist. The FFA social worker failed to ensure the child's participation in therapy and in ongoing maintenance of her prescribed medication and failed to maintain timely Needs and Services Plans and Quarterly Reports for the children in this home. We noted overall that the Needs and Services Plans and Quarterly Reports in the Palmdale office were sparse and did not have supervisor signatures.

February 2008: As a result of OHCMD's overall concerns for a period of time, OHCMD requested a meeting with Wings of Refuge, Community Care Licensing (CCL) and the Auditor Controller's Program staff were also invited to attend. The meeting commenced on February 4, 2008. The purpose was to discuss the findings and the overall concerns and the need for Wings of Refuge to effectively remedy the noted findings. As an immediate plan of correction, the FFA administrator and DCFS agreed that the FFA would place their Palmdale office on a self-hold from February 5, to February 25, 2008 to address the numerous findings and to allow the newly hired administrator to review the files and to make the necessary changes to ensure child safety and ongoing compliance. The Los Angeles office remained available for the intake of placements as findings noted primarily affected the Palmdale office. On April 15, 2008, the CAP was approved by OHCMD.

June 2008 Review: 22 children's files and eight certified foster home files were reviewed. This review was to ensure that the FFA's previous CAP was being implemented.

Findings: In the area of Safety, we noted that there were two substantiated allegations of general neglect between January 1, 2008 and May 1, 2008.

We noted numerous Title 22 regulation and DCFS Contract violations in the Palmdale office. For one child, there were no FFA contact/visit notes in the file for September 2007, October 2007 and November 2007 and only one contact visit for March 2008. For another child, there was only one FFA contact/visit for the month of December 2007. We noted that there were two certified foster homes that had a total of seven children each in the home without any DCFS approval. For one of these homes, there was no approved fingerprint clearances for one certified foster father and in fact, we noted that the file contained documentation from the State of California Department of Social Services, Caregiver Background Check Bureau, indicating that until the FFA received an approved exemption for the foster father, he was not to provide care and supervision to the children in the home. However, during the review, we noted that foster mother was called out of town and foster father was the designated caregiver at the time. The FFA did not notify foster mother of the State's requirement, nor did they take the proper measures to comply with the State's request and ensure child safety. However, at the time of the review, OHCMD recommended that the FFA contact their

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CCL representative who verified that the foster father should not be having contact with the children until he is cleared and approved by the State to reside in the home. The FFA immediately notified the children's CSWs and the children were removed from the home and were placed in respite while the matter was being resolved with the State. Furthermore, foster father had no CPR or First Aid certification and no driver's license and no car insurance on file. The FFA did not have an alternate substitute caregiver or driving plan on file for this foster parent.

For another home which was over child capacity, there was a SIR on the home which was not reported on time and indicated that a female foster youth in the home had been assaulted by the other foster youth in the home and had sustained injuries. The youth did not receive timely medical attention, the child protection hotline was not contacted, and the certified foster parents failed to notify the FFA. There were four foster youth, male and females, in the home in addition to foster mother's teenage son and two adoptively placed females. The FFA knew the home was over capacity and failed to take the necessary action. When OHCMD received the SIR, we contacted the FFA staff and instructed that the child protection hotline be contacted to initiate an investigation of the home. The foster youth were removed from the home, and upon completion of the investigation DCFS substantiated the allegation of general neglect by the foster parents.

Additionally, we noted that the FFA's roster for Palmdale included at least one home with an inaccurate child vacancy. The home had three children placed and had a vacancy for four children.

SUMMARY

Following this fifth review in 2 years which identified ongoing chronic deficiencies in practice in the Palmdale office, OHCMD strongly considered placing a Hold on placements at the Wings of Refuge FFA. However, such action would have impacted both the Palmdale and Los Angeles satellite offices, as ALL sites would be on Hold. Given that the more significant issues were noted in the Palmdale office, and because foster home resources are in limited supply in the Antelope Valley, OHCMD limited the remedy to stringent corrective action for that office.

In attempts to preserve placement resources in the Antelope Valley, OHCMD has been proactive in lending support to remediate the deficiencies noted at Wings of Refuge. However, in late June 2008 Wings of Refuge's 2007 Preliminary Scorecard for the second year revealed sub-standard scores in the areas of Safety and School Enrollment. Following the preliminary Scorecard results, in combination with the ongoing problematic issues and failure to succeed at corrective action, OHCMD decided it had exhausted remedial efforts, and on July 18, 2008 placed Wings of Refuge on a Hold status, stopping all new placements. In accordance with the Contract, OHCMD will be meeting quickly with Wings of Refuge for a Review Conference to grant the agency due process regarding the Hold status and discuss next steps. Since their track record at sustaining remediation has been inadequate,

one possible recommendation could be to close the Palmdale office. Unfortunately, this will leave the Antelope Valley with one less provider of services, and is the outcome OHCMD was striving to avoid through monitoring them closely and providing technical assistance.

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