County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

PHILIP L. BROWNING
Director

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September 17, 2015

To: Supervisor Michael D. Antonovich, Mayor
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Don Knabe

From: Philip L. Browning
Director

COUNSELING AND RESEARCH ASSOCIATES DBA MASADA HOMES FOSTER FAMILY AGENCY FISCAL ASSESSMENT AND CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contract Administration Division (CAD) conducted a fiscal assessment and contract compliance review of Counseling and Research Associates dba Masada Foster Family Agency (the FFA) in November 2014. The FFA has one licensed office located in the Second Supervisorial District, two licensed offices located in the Fifth Supervisorial District and one licensed office in San Bernardino County and provides services to the County of Los Angeles DCFS placed children. According to the FFA's program statement, its mission is "to provide children with a stable and supportive living environment while preparing them for reunification with their biological families or placement."

At the time of the review, the FFA supervised 87 DCFS placed children in 43 Certified Foster Homes (CFHs). The placed children's overall average length of placement was 8 months and their average age was 10.

SUMMARY

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

The FFA was in full compliance with 4 of 5 areas of the fiscal compliance assessment: Financial Overview; Loans, Advances and Investments; Board of Directors and Business Influence; and Payroll and Personnel.

CAD identified a deficiency in the area of: Cash/Expenditures, related to bank reconciliations not being resolved timely.

During CAD's contract compliance review, the interviewed children generally reported feeling safe in the FFA CFHs; having been provided with good care and appropriate services; being comfortable in

their environment and treated with respect and dignity. The Certified Foster Parents (CFPs) reported they were supported by the FFA staff in their efforts to provide care, supervision and service delivery to the children placed in their homes.

The FFA was in full compliance with 8 of 11 sections of our Contract Compliance Review; Certified Foster Homes; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records.

CAD noted deficiencies in the following areas: Licensure/Contract Requirements, related to Community Care Licensing (CCL) citations; Facility and Environment, related to a CFH's exterior and grounds not being well maintained, a CFH's common area not being maintained, and a child's bedroom was not being well maintained; Maintenance of Required Documentation and Service Delivery, related to a CFP not participating in the development of Needs and Service Plans (NSPs) and children's progress toward meeting NSP goals not documented.

Attached are the details of our review.

REVIEW OF REPORT

On January 14, 2015, Matthew St. John, DCFS CAD, held a compliance Exit Conference with FFA representatives: Richard Coleman, Division Director, and Leslie Oropeza, Site Administrator. DCFS staff included Sonya Noil, Out-Of-Home Care Management Division (OHCMD). On June 19, 2015, Ali Gomaa–Mersal DCFS CAD Fiscal held the Fiscal Exit Conference with John McCullough, FFA Administrator. The FFA representatives were in agreement with the review findings and recommendations, were receptive to implementing systemic changes to improve compliance with regulatory standards and to address the noted deficiencies in a Corrective Action Plan (CAP) and Fiscal Corrective Action Plan (FCAP).

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

The FFA provided the attached approved FCAP and CAP addressing the recommendations noted in this compliance report. CAD provided a follow-up visit to the FFA on April, 20, 2015 to verify implementation of the CAP.

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

PLB:EM
LTI:ms

Attachments

c: Sachi A. Hamai, Interim Chief Executive Officer
John Naimo, Auditor-Controller
Jerry E. Powers, Chief Probation Officer
Public Information Office
Audit Committee
George Igi, CEO, Counseling and Research Associates dba Masada Homes
Lenora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

COUNSELING AND RESEARCH ASSOCIATES DBA MASADA HOMES
FISCAL COMPLIANCE ASSESSMENT REVIEW
FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The fiscal compliance assessment included review of Counseling and Research Associates dba Masada Homes' (the FFA's) financial records for the period of January 1, 2013 through March 31, 2015. CAD reviewed financial statements, bank statements, check register, and personnel files to determine the FFA's compliance with the terms, conditions, and requirements of the FFA contract, the Auditor-Controller Contract Accounting and Administration Handbook (A-C Handbook) and other applicable federal, State, and County regulations and guidelines.

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

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

The FFA was in full compliance with 4 of 5 areas of the fiscal compliance assessment: Financial Overview, Loans, Advances and Investments, Board of Directors and Business Influence, and Payroll and Personnel.

FISCAL COMPLIANCE

CAD found the following area out of compliance:

Cash/Expenditures

- Reconciled items remained outstanding for over six months.

Four checks totaling $454.34 remained outstanding for over six months.

To address the finding, the FFA voided the four checks and attempted to contact the vendors in question to provide them with current payments. Also, to be sure that this situation does not re-occur, the FFA accounting staff will closely monitor the outstanding check list.

Recommendation:

The FFA's management shall ensure that:

1. Bank reconciliations are timely resolved.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The most recent fiscal review of the FFA was posted by the A-C on December 28, 2012, for the period of June 30, 2010 through December 28, 2012. The A-C's review identified $28,979 in questioned costs. The A-C also noted that the FFA needed to strengthen its accounting

procedures and controls over bank reconciliations, petty cash, fixed assets and needed to comply with insurance requirements. In addition, the FFA needed to submit Semi-Annual Expenditure Reports, its cost allocation plan, and audited financial statement to DCFS.

The FFA has paid DCFS the $28,979 in questioned costs.

However, the FFA currently has an outstanding debt of $1,682.00 of which, $639.00 is in dispute. The FFA is making payments for debt not in dispute in accordance to invoice dates.

NEXT FISCAL COMPLIANCE ASSESSMENT

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

COUNSELING AND RESEARCH ASSOCIATES DBA
MASADA HOMES FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE REVIEW SUMMARY

130 West Victoria Avenue
Gardena, CA 90248
License Number: 197806164

1045 West Bonita Avenue
La Verne, CA 91750
License Number: 197806086

8485 Tarmarind Avenue, Suite A
Fontana, CA 92335
License Number: 366099803

43424 Copeland Cr., #A
Lancaster, CA 93535
License Number: 197806137

	Contract Compliance Review	**Findings: November 2014**
I	**Licensure/Contract Requirements** (7 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Timely, Cross-Reported SIRs	2. Full Compliance
	3. Runaway Procedures in Accordance with the Contract	3. Full Compliance
	4. Are there CCL Citations/OHCMD Safety Reports	4. Improvement Needed
	5. If applicable, FFA ensures Complete Required Whole Foster Family Home Training	5. Full Compliance
	6. FFA pays Certified Foster Parents (CFP) Whole Foster Family Home Payments	6. Full Compliance
	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	Full Compliance (All)
	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	

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 Foods 6. CFPs Conducted Disaster Drills and Documentation Maintained 7. Money and Clothing Allowance Logs Maintained	 1. Improvement Needed 2. Improvement Needed 3. Improvement Needed 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance
IV	**Maintenance of Required Documentation and 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 NSP with Child's Participation 6. Therapeutic Services Received 7. Recommended Assessments/Evaluations Implemented 8. County Children's Social Worker's 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. Improvement Needed 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance
V	**Educational 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 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	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 Choices 7. Children's Chores Reasonable 8. Children Informed About Their Medication and Right to Refuse Medication 9. Children Aware of Right to Receive or Reject 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. On-going 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	Full Compliance (All)

	6. Management of Allowance/Earnings 7. Encouragement and Assistance with Life Book/ Photo Album	
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, and 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 Social Workers Caseloads Not to Exceed a Total of 15 Children	Full Compliance (All)

COUNSELING AND RESEARCH ASSOCIATES DBA
MASADA HOMES 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 review. This compliance report addresses findings noted during the November 2014 review. The purpose of this review was to assess Counseling and Research Associates dba Masada Homes 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 review covered the following 11 areas:

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

For the purposes of this review, 10 placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed 9 children; 1 child was not interviewed because the child was a pre-verbal infant. However, during the home visit, the child was observed to be comfortable in the certified foster home (CFH), and the certified foster parents (CFPs) were observed to be responsive to the needs of the child. CAD reviewed all 10 files to assess the care and services they received. Additionally, 4 discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, 1 child was prescribed psychotropic medication. The case file was reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed 5 CFP files and five staff files for compliance with Title 22 regulations and County contact requirements. Interviews were conducted with 5 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:

Licensure/Contract Requirements

- Community Care Licensing (CCL) cited the FFA as a result of deficiencies and findings.

CCL cited the FFA as a result of deficiencies and findings noted during a CCL investigation initiated by a complaint received on February 11, 2014. According to the report dated

April 23, 2014, an infant did not have a crib in the home. A 22 month-old baby was sharing a bed with the CFP. The CFP admitted she did not own a crib for the baby and the allegation was substantiated. CCL requested a Plan of Correction (POC) that included placing the home on hold until all investigations were completed. This incident did not result in a related DCFS investigation. However, due to an unrelated CCL substantiated physical abuse allegation, the CFH was placed on an indefinite hold and subsequently decertified on June 9, 2014. The deficiency citation was cleared by CCL on June 24, 2014.

An Exit Conference was held on January 14, 2015. An FFA representative stated that the home was decertified and the social worker staff received an in-service training on July 14, 2014, regarding indicators of physical abuse and conducting body checks. A copy of the sign-in sheet, course description and body check forms the agency is using were provided to CAD on February 18, 2015.

CCL cited the FFA as a result of deficiencies and findings in a complaint received on February 5, 2014. According to the report dated April 23, 2014, a placed child was denied food by a CFP. If a child did not want to eat what the CFP cooked, they could not eat something else. The allegation was substantiated. CCL requested a POC for the FFA social worker to conduct unannounced evening visits to the CFH and the FFA was to train the CFP on engaging the children in the development of menu options and healthy eating habits. A referral dated February 4, 2014, was investigated by DCFS Emergency Response (ER) Children Social Worker (CSW) for Emotional Abuse and General Neglect. The allegation of Emotional Abuse was deemed inconclusive and the allegation of General Neglect was substantiated. During the course of investigation by DCFS, it was discovered the CFH had 16 previous referral investigations, including a previous investigation for denying or withholding food. It was recommended the CFH be decertified and placed on an indefinite hold. The home was decertified on May 13, 2014 and the deficiency citation was cleared by CCL on May 13, 2014.

An Exit Conference was held on January 14, 2015. An FFA representative stated the home was decertified and a copy of the decertification letter was provided to CAD during the review. On April 20, 2015, CAD completed a follow-up visit with the FFA and found no new substantiated CCL complaints for safety or plant deficiencies. CAD confirmed this information with the CCL duty worker on June 3, 2015.

Recommendation:

The FFA's management shall ensure that:

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

Facility Environment

- Exterior/Grounds were not well maintained.

In CFH #1, in the back yard, a fence attached to the house on the left was loose and had a broken latch board. A secondary side yard, which was kept locked was full of debris, including gym equipment, a dog kennel and couches.

A follow up visit to the home took place on November 17, 2014 and CAD confirmed the broken backyard fence board had been repaired. The secondary side yard had been cleaned and was free of debris.

An Exit Conference was held on January 14, 2015 and an FFA representative stated she and another FFA representative will be conducting unannounced visits in addition to regular monthly inspections to the CFHs.

- Common Areas were not well maintained.

In CFH #1, the bathroom the children use had a black stain or mold that ran along the rubber sealant at the top of the bathtub, near the faucet and ran up the same sealant line on the wall to the left of the faucet.

A follow up visit to the home took place on November 17, 2014 and CAD found the sealant that was stained or molded had been replaced with new sealant.

An Exit Conference was held on January 14, 2015. An FFA representative stated she and another FFA representative will be conducting unannounced visits in addition to regular monthly inspections to the certified homes.

- Children's bedrooms/interior were not well maintained.

In CFH #1, one of the children's bedrooms had a dresser with drawers that were difficult to open and the top drawer was chipped and broken. The dresser wobbled when any drawer was opened. This created a safety hazard because of a small flat screen television that was sitting on top and could fall on a child. Attached to the television was a cable, which runs behind the dresser and was attached to the wall by brackets. However, some of the brackets were missing, allowing approximately 3 feet of the cable to hang loose creating a tripping hazard. CAD pointed out the safety hazard to the CFP, who immediately moved the small television to a safer location in the room.

A follow up visit to the home took place on November 17, 2014 and CAD found the unstable, broken dresser had been replaced and the television cable had been appropriately secured to the wall.

An Exit Conference was held on January 14, 2015. A FFA representative stated she and another FFA representative will be conducting unannounced visits in addition to regular monthly inspections to the certified homes.

Recommendations:

The FFA management shall ensure that:

2. Exterior/grounds are well maintained.

3. Common areas are well maintained.

4. Children's bedrooms/interior are well maintained.

Maintenance of Required Documentation and Service Delivery

- Certified Foster Parent did not participate in the development of the Needs and Service Plan (NSP).

Of 28 NSPs reviewed, one NSP dated December 20, 2013, did not have the CFP's signature.

- Children's progress towards meeting NSP goals was not well documented.

Of the 10 files reviewed, 2 children's files reflected a need to improve academically and behaviorally at school over the span of three months. Both children's files reflected school suspensions. Progress toward these NSP goals were not well documented nor were the FFA's efforts documented in the children's files.

An Exit Conference was held on January 14, 2015. The FFA conducted an in-service training on January 26, 2015, to all FFA social workers. The training focused on the importance of documenting progress in the NSPs and the importance of having the CFP, as well as the child involved in the development of NSP goals. A copy of the training sign-in sheet and course description were provided to CAD on February 26, 2015.

On April 20, 2015, CAD completed a follow-up visit and reviewed 9 NSPs. CAD confirmed the FFA has CFPs participating in the development of NSPs and has been recording children's progress toward meeting NSP goals.

Recommendations:

The FFA management shall ensure that:

5. Certified foster parents participate in development of NSPs.

6. Children are progressing toward meeting NSP goals.

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

The OHCMD's last compliance report dated May 29, 2014, identified 9 recommendations.

Results

Based on our review, the FFA fully implemented 6 of 9 previous recommendations for which they were to ensure that:

- SIR's are cross-reported to all required parties timely.

- The FFA will conduct an assessment of CFPs prior to placing more than two children in a CFH and indicate how the CFPs would meet the needs of all the children placed.

- OHCMD is contacted regarding historical abuse/neglect information on prospective CFPs prior to certification.

- CFPs are familiar with NSPs.

- FFA social workers develop comprehensive initial NSPs and that all fields/sections are completed.

- All children have a Life Book/Photo Album.

The FFA did not implement 3 of 9 recommendations for which they were to ensure that:

- The FFA is in full compliance with Title 22 regulations, free of CCL citations.

- Common Areas are well maintained.

- Children's bedrooms are well maintained.

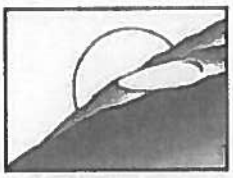
Recommendation

The FFA administration shall ensure that:

9. The outstanding recommendations from the May 29, 2014, review report, which are noted in this report as recommendations 1, 3 and 4, are fully implemented.

At the Exit Conference, the FFA representatives expressed their desire to remain in compliance with all Title 22 regulations and contract requirements. A follow-up visit was conducted on April 20, 2015, by CAD and the FFA had implemented 6 of 6 recommendations noted in this report. CAD will continue to assess implementation of the recommendations during our next monitoring review. OHCMD will continue to provide on-going technical assistance prior to the next review.

June 24, 2015



MASADA HOMES

. . building a foundation

A Division of Counseling & Research Associates

Ali Gomaa, Fiscal Specialist IV
Fiscal Compliance Unit
Contracts Administration Division
Department of Children & Family Services
3530 Wilshire Boulevard, 4th Floor
Los Angeles, CA 90010

RE: Corrective Action Plan for June 2015 Fiscal Compliance Review

Dear Mr. Gomaa,

Thank you for your time and effort during our recent Fiscal Compliance Review. As you were able to ascertain, Counseling & Research Associates takes very seriously our duties to develop, implement, and maintain good financial systems for the company. Your comments and suggestions during the review help us to become more proficient and complete financially.

During the review, you discovered one finding. When we reconcile monthly bank statements, we are not paying enough attention to the outstanding checks so that they may become more than six months old. Your review pointed out that there were four checks totaling $454.34 that were over six months old.

To correct the immediate problem, our Accounting Assistant, who is responsible for reconciling the monthly bank reconciliations, voided the four checks and attempted to contact the vendors in question to replace them with current payments.

To be sure that this situation does not reoccur, both the Accounting Assistant and the Controller, who is responsible for checking the reconciliation work, will pay closer attention to the column on the Outstanding Check list that posts the date the checks were written. When a check becomes five months old, we will attempt to contact the vendor to determine whether the vendor will cash the check within

Ph: (310) 715-2020 ▪ FAX (310) 327-4723
130 W. Victoria St., Gardena, CA 90248

the sixth month, or if voiding the check and creating a new one is more appropriate. In beginning this process in the fifth month instead of the sixth, we will have more time to resolve the problem before the six month deadline.

If you have and questions on our resolution of the finding or have additional questions concerning the fiscal review, please let me know.

Sincerely,

John McCullough, Controller
Counseling & Research Associates
DBA Maseda Homes

MASADA HOMES

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Foster Family Agency

February 20th, 2015

To: Matthew St. John, CSA I
Contract Compliance Section
3530 Wilshire Blvd.
Los Angeles, CA 90010

From: Masada Homes, FFA
Leslie C. Oropeza
Site Administrator

Subject: MASADA HOMES FOSTER FAMILY AGENCY CORRECTIVE PLAN OF ACTION 01/2015 OUT OF HOME CARE MANAGEMENT DIVISION RECOMMENDATIONS

Dear Mr. St. John:

Masada Homes, Foster Family Agency would like to extend its appreciation for the thorough review conducted in December 2014.

The following is the Corrective Plan of Action to address recommendations presented by your department:

Licensure/Contract Requirements

1.) Licensure/Contract Requirements.

During this reviewing period, Masada Homes, FFA received two citations:

CCN: / DCFS physical abuse substantiated allegation. The home was immediately placed on hold and Decertified as soon as the investigation concluded, 6/9/14. Social Worker Staff received an In-Service Training, on conducting body checks. The body check form was implemented in order to avoid further incidents of this nature. (Attachment 1, 2 &3)

CCN: DCFS general neglect substantiated allegation. The minors were removed from the foster home. The home was decertified on 5/13/14. (Attachment 4)

Facility and Environment

2.) Certified Homes are well maintained.

Site Administrator as well as Supervisors will be conducting unannounced Quality Assurance visits to the certified homes in order to assure safety and cleanliness are implemented at all times. Further, all Masada Homes Social Workers will continue to complete Monthly Inspections for their assigned certified homes. The report requires that Social Workers notate any deficiencies as well as plan of correction. Additionally, certified foster homes will be placed on administrative hold until all necessary deficiencies are corrected within the time allowed.

It is important for Masada Homes, FFA to inform the interested parties that the deficiencies found in the home were corrected within a 48 hour period.

Maintenance of Required Documentation and Service Delivery

3.) NSPs demonstrate progress.

An In-Service Training was provided on January 26th, 2015 to all Masada Homes, FFA Social Workers in which the importance of documentation of progress was addressed. Social Workers will collect report cards in order to monitor academic performance. By the foster parent and minor signing the NSP, the certified foster parent and minor are involved in goal development and achievement. Supervisors will ensure that accurate progress is being addressed where needed.

We appreciate the time and courtesy we experienced throughout the process and we look forward to being able to continue providing our services to the County of Los Angeles Department of Children and Family Services. Masada Homes appreciates the recommendations as a means to improve the quality of our services. Please feel free to contact me if I can be of further assistance.

Respectfully Submitted

Leslie C. Oropeza, MS
Site Administrator