County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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December 30, 2015

To: Supervisor Hilda L. Solis, Chair
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From: Philip L. Browning
Director

ETTIE LEE HOMES FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of Ettie Lee Homes, Foster Family Agency (the FFA) in April 2015. The FFA has one licensed office located in the Fifth Supervisorial District, and provides services to County of Los Angeles DCFS placed children and youth. According to the FFA's program statement, it's mission is to "provide each child with a safe and nurturing environment in which to meet his/her unique challenges, to provide the most home like environment possible and to offer comprehensive and effective treatment that supports the child to meet his/her goals."

At the time of the review, the FFA supervised 70 DCFS placed children in 34 Certified Foster Homes (CFHs). The placed children's average length of placement was 14 months and their average age was 10.

SUMMARY

During CAD's Contract Compliance Review, the interviewed children generally reported feeling safe at the FFA's CFHs, having been provided with good care and appropriate services, being comfortable in their environment and treated with respect and dignity. The certified foster parents reported they were supported by the FFA staff in their efforts to provide care, supervision and service delivery to the children placed in their homes.

The FFA was in full compliance with 5 of 11 sections of our Contract Compliance Review; Facility and Environment; Education and Workforce Readiness; Personal Rights and Social Emotional Well-Being; Personal Needs/Survival and Economic and Discharged Children.

CAD noted deficiencies in the areas of: Licensure/Contract Requirements, related to Community Care Licensing (CCL) citations; Certified Foster Homes, related to the agency not obtaining a response from Out-of-Home Care Management Division (OHCMD) regarding historical information prior to certifying a home and adults living in the home and who babysit do not have the proper medical clearances; Maintenance of Required Documentation and Service Delivery, related to the FFA not

obtaining or documenting efforts to obtain the County worker's authorization to implement the Needs and Services Plan (NSP), a placed youth not progressing toward meeting the NSPs goals; Health and Medical Needs, related to follow-up medical examinations not being conducted timely; Psychotropic Medications, related to a missing court-approved authorization for the administration of psychotropic medication; Personnel Records, related to criminal clearances not being obtained prior to an employee's hire date and employee's not receiving all required training.

Attached are the details of our review

REVIEW OF REPORT

On July 22, 2015, Maria Rosas, DCFS CAD and Kristine Kropke Gay, Out-of-Home Care Management Division held an Exit Conference with the FFA representatives Karen Cash, Director of Foster Family Agency and Adoptions and Sylvia Martin, Supervising Children's Social Worker. The FFA representatives agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve their compliance with regulatory standards; and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

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

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

On September 18, 2015, CAD conducted a follow-up visit to the FFA and verified the implementation of corrective actions for each of the recommendations noted in this compliance report.

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

PLB:EM
LTI: dlf

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Audit-Controller
Public Information Office
Audit Committee
Terri Varnum, President and CEO, Ettie Lee Homes
Lajuannah Hills, Regional Manager, Community Care Licensing

ETTIE LEE HOMES FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

754 E. Arrow Hwy, #F
Covina, CA 91722
License Number: 197804111

	Contract Compliance Monitoring Review	**Findings: April 2015**
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 Completion of Required Whole Foster Family Home Training	5. Not Applicable
	6. FFA Pays Certified Foster Parents (CFP) Whole Foster Family Home Payments	6. Not Applicable
	7. FFA conducts an Assessment of CFP Prior to Placement of Two (2) or more children	7. Full Compliance
II	**Certified Foster Homes** (12 Elements)	
	1. Home Study and Safety Inspection Conducted Prior to Certification	1. Full Compliance
	2. The Agency's Inquiry with OHCMD for Historical Information Prior to Certification	2. Improvement Needed
	3. Timely Criminal Clearances (DOJ, FBI, CACI) prior to Certification	3. Full Compliance
	4. Timely, Completed, Signed Criminal Background Statement	4. Full Compliance
	5. Health Screening & TB test Prior to Certification	5. Full Compliance
	6. All Required Training Prior to Certification	6. Full Compliance
	7. Certificate of Approval on File/Including Capacity	7. Full Compliance
	8. Safety Inspection Completed At Least Every Six Months or Per- Approved Program Statement	8. Full Compliance
	9. Completed Annual Training Hours for Re-Certification and Current CPR/First-Aid/Water Safety Certificates	9. Full Compliance
	10. Current CDL/Auto Insurance/Annual Vehicle Maintenance Documentation for CFPs and Designated Drivers, if Applicable Car Seat (s)	10. Full Compliance
	11. Criminal Clearances and Health Screening CDL/CPR/DOJ/FBI/CACI/Auto Insurance for Other Adults in the Home	11. Improvement Needed
	12. FFA Assists CFPs in Providing Transportation Needs	12. Full Compliance

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	Full Compliance (All)
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 Toward Meeting NSP Goals 4. FFA Social Workers Develop Timely, Comprehensive Initial NSPs with Child's Participation 5. FFA Social Workers Develop Timely, Comprehensive Updated NSPs with Child's Participation 6. Therapeutic Services Received 7. Recommended Assessment/Evaluations Implemented 8. County Children's Social Worker's Monthly Contacts Documented in Child's Case File 9. FFA Social Worker's Develop Timely Comprehensive Quarterly Reports 10. FFA Social Worker's Conduct Required Visits	1. Improvement Needed 2. Full Compliance 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 Report Cards/Progress Reports Maintained 4. Children's Academic Performance and/or Attendance Increased 5. FFA Facilitates Child's Participation in YDS or Equivalent Services and Vocational Programs	Full Compliance (All)

VI	**Health and Medical Needs** (4 Elements) 1. Initial Medical Exams Conducted Timely 2. Follow-Up Medical Exams Conducted Timely 3. Initial Dental Exams Conducted Timely 4. Follow-Up Dental Exams Conducted Timely	 1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance
VII	**Psychotropic Medication** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	 1. Improvement Needed 2. Full Compliance
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. CFP's Efforts to Provide Nutritious Meals and Snacks 4. CFP's 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. On-going Clothing Inventories or Adequate Quantity and Quality 3. Children's Involvement in Selection of Their Clothing 4. Provision of Sufficient Supply of Clean Towels and Personal Care Items Meeting Ethnic Needs 5. Minimum Weekly Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement and Assistance with Life Book/Photo Album	 Full Compliance (All)

X	**Discharged Children** (3 Elements) 1. Children Discharged According to 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 Requirement 4. Timely Employee Health Screening/TB Clearances 5. Valid CDL and Auto Insurance 6. FFA Employee's Signed Copies of FFA Policies and Procedures 7. FFA Employees Completed All Required Training and Documentation Maintained 8. FFA Social Workers Have Appropriate Caseload Ratio 9. FFA Maintained Written Declarations for Part-Time Contracted FFA Social Workers Caseloads Not Exceed Total of 15 Children	1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed 8. Full Compliance 9. Full Compliance

ETTIE LEE 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 visit. This compliance report addresses findings noted during the April 2015 review. The purpose of this review was to assess Ettie Lee Homes, Inc., Foster Family Agency's (the FFA's) compliance with the County contract and State regulations and included a review of the FFA's program statement, as well as internal administrative policies and procedures. The monitoring review covered the following 11 areas:

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

For the purpose of this review, 11 County of Los Angeles Department of Children and Family Services (DCFS) placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed each child and reviewed their case files to assess the care and services 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. Their case files were reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

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

CONTRACTUAL COMPLIANCE

CAD found the following six areas to be out of compliance.

Licensure/Contract Requirements

- Community Care Licensing Division (CCL) cited the.

On May 28, 2014, CCL cited the FFA for a deficiency and finding related to a complaint received on February 7, 2014, alleging that a placed child was sent home from school due to illness, with a nurse's note, and was not given adequate medical attention by the CFP. According to the CCL report, the CFP stated that she was unaware of the child having a nurse's note until a few days later. Witnesses disputed the CFP's statements; therefore, the allegation was substantiated. A Plan of Correction (POC) to provide re-training to the CFP was requested. CCL cleared the POC on

June 6, 2014. DCFS Emergency Response also investigated a complaint against the CFPs and deemed the allegations of General Neglect to be Unfounded. Out-of-Home Care Investigations Section conducted an investigation and requested a Corrective Action Plan (CAP) that included training on the importance of promptly attending to children's medical needs. The CAP was approved on May 30, 2014, which documented the training provided to the CFP on the importance of securing a doctor's appointment within 48 hours of any medical issue or in the alternative, taking the child to urgent care.

On September 25, 2014, CCL made an unannounced visit to the FFA office to conduct an annual visit and cited the FFA as result of deficiencies and findings related to missing records in three files that were reviewed. One child's file was missing immunization records; another file was missing a signature on the authorized consent form to receive medical care; and two files were missing original Needs and Services Plans. The POC, which required that the missing records and the missing signature be obtained, was cleared by CCL on October 3, 2014.

On September 25, 2014, CCL cited the FFA as a result of a deficiency and finding related to a violation of licensing regulations prohibiting a FFA from certifying a home that is already licensed by CCL as a Foster Family Home. The FFA decertified the CFH and a notice of decertification was provided to CCL on September 24, 2014. CCL requested a POC that required the re-training of agency staff on the Health and Safety Code 1506.8 requirement that thorough reference checks be conducted prior to certification and also required that CCL be contacted to verify the home is not licensed. The POC was cleared by CCL on September 24, 2014.

On March 6, 2015, CCL cited the FFA as a result of a deficiency and finding related to a complaint received on December 11, 2014, alleging that a CFP allowed a placed child to visit with their biological mother without the County Children's Social Worker's (CSW's) consent. According to the report, the CFP denied the allegations; however, witnesses provided information resulting in the allegations being substantiated. The home was decertified by the FFA on December 16, 2014, and no further action was required by CCL.

On March 17, 2015, CCL cited the FFA as a result of a deficiency and finding related to a complaint received on November 12, 2014, alleging a child urinated on herself when she was prevented from using the restroom. According to the report, the exact date of this incident is unknown. The allegation dated back to 2010 when the child resided in the home. The complaint alleged that the CFP prevented the child from using the bathroom, resulting in the child urinating on herself. CCL conducted an investigation and substantiated the allegation. As the home was already decertified on September 24, 2014, CCL determined that no further action was required. DCFS ER conducted an investigation and deemed the allegations of Emotional and Physical Abuse as Inconclusive. OHCIS conducted an investigation, and according to the report dated January 9, 2015, the home was placed on an Indefinite Hold status and may no longer be used as a placement resource for DCFS supervised children.

Recommendation:

The FFA management shall ensure that:

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

Certified Foster Homes

- Historical information from Out-of-Home Care Management Division (OHCMD) was not obtained prior to certification.

- Current First Aid/Cardiopulmonary Resuscitation (CPR) certificates for a foster parent and medical clearances for adults in the home serving as babysitters were not obtained.

During the review the CFP completed the First-Aid/CPR training and the FFA provided a copy of the certification. The adults residing in the home and serving as babysitters received medical clearances and the documentation was submitted by the FFA.

Recommendation:

The FFA's management shall ensure that:

2. The agency's inquiry with OHCMD for historical information is completed prior to certification.

3. Current First-Aid/CPR certifications and medical clearance are maintained.

Maintenance of Required Documentation and Service Delivery

- One child did not have a CSW signature on three Needs and Services Plans (NSPs) and there was no documentation of timely efforts to obtain the signature.

- One child's file did not contain sufficient documentation of progress on NSP goals or of the agency's efforts to help the child achieve progress.

During the review, the FFA social worker indicated that the youth refused some opportunities to make progress on his goals; however, she stated that she would revisit these goals with him.

During the follow-up visit by CAD on September 18, 2015, progress was verified on goals related to researching colleges and programs and obtaining a birth certificate, identification card and social security card for the youth.

Recommendation:

The FFA's management shall ensure that:

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

5. Children are progressing towards meeting NSP goals.

Health and Medical Needs

- Follow-up medical visits for one child and another child's referral to a cardiac specialist were not timely.

During the review, notes in the child's file indicated that during a physical, a test for lead was offered but refused by the CFP. The CFP said she did not know what a lead test was and; therefore, refused it when offered by the doctor for the placed child. As soon as the FFA was made aware of the issue, they discussed it with the CP. Similarly, in another child's file, the doctor's notation that the child was to be seen by a cardiac doctor had also been overlooked. When these omissions were brought to the FFA's attention, they immediately arranged for the children to receive the necessary medical services.

Recommendation:

The FFA management shall ensure that:

6. Follow-up medical exams are conducted timely.

Psychotropic Medication

- One child's file did not have a current court-approved authorization for the administration of psychotropic medication authorization.

During the review, the FFA immediately followed-up on the missing psychotropic medication authorization. During the follow-up visit by CAD on September 18, 2015, it was verified that a current psychotropic medication authorization was obtained for the administration of the psychotropic medication for the child.

Recommendation:

The FFA management shall ensure that:

7. A current court authorization for administration of psychotropic medication is maintained.

Personnel Records

- Documentation of one employee's criminal clearances is dated after the hire date.

- Employees did not receive all required training.

During the review, the FFA administrator indicated that all required training, specifically, anti-discrimination training was being developed and would be offered to all employees. During the follow-up visit by CAD on September 18, 2015, completion of the training was verified with attendance records dated September 10, 2015, and copies of the curriculum were provided.

Recommendation:

8. Criminal clearances are submitted prior to the employee's hire date.

9. Employees receive all the required training.

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

The OHCMD's last compliance report dated May 6, 2014, identified 6 recommendations.

Results

Based on CAD's follow-up, the FFA fully implemented 5 of 6 recommendations for which they were to ensure that:

- All CFPs home studies are completed prior to certification.
- Safety inspections of CFHsomes are completed at least every six months or per the timelines of the FFA Program Statement.
- Children's progress is documented and Updated NSP goals are modified, specific, time-limited and measureable.
- NSP Quarterly Reports are comprehensive and include all elements in accordance with the NSP template.
- Children's academic performance increases.

The FFA did not implement one prior recommendation which was to ensure that:

- Children are progressing towards meeting NSP goals.

Recommendation:

The FFA management shall ensure that:

10. The outstanding recommendation in the May 6, 2014, report which is noted in this report as recommendation 5 is fully implemented.

At the Exit Conference held on July 22, 2015, the FFA representatives expressed their desire to remain in compliance with all Title 22 regulations and County contract requirements. At the time of the follow-up visit by CAD on September 18, 2015, the FFA had implemented corrective actions for each of the findings. The FFA is tracking and auditing cases more frequently and has developed a number of tools to document compliance. CAD will verify continued implementation of these recommendations during the next review. OHCMD will provide on-going technical assistance prior to the next review.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A current fiscal review of the FFA dated June 24, 2015, has not been posted by the Auditor-Controller. The FFA has no outstanding debt at this time.

ETTIE LEE
Youth & Family Services

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August 20, 2015

RE: CAP Response for Agency Monitoring Review

This Corrective Action Plan is in response to expressed concerns regarding the agency monitoring review. Due to the recent audit it would be appropriate and best practices for Ettie Lee to follow and comply with this action plan:

Section 1(4): Sustained Community Care complaints reports

- In an effort to reduce substantiated complaint reports on personal rights, Ettie Lee will provided training/review personal rights with foster parents 2 x yearly (January/July) and document on the home inspections that it has been conducted (see attachment sample home inspection). At that time the Foster parents will also sign Personal Rights agreement.
- Ettie LEE staff will be provided training in Personal Rights and SIR reporting (see attached training materials) annually (verified by sign in sheets). Sign in sheets will be kept in their personnel file.
- Certified foster parents will receive ongoing training in "Protecting Yourself from Allegations of Maltreatment" (see attached article).
- To ensure County Workers have approved all visits, Ettie Lee staff updates Face sheets monthly. The supervisor will initial the face sheet on a monthly basis and maintain a log to ensure all face sheet have the most current information regarding visits.
- To ensure all medical/dental exams and follow ups are completed in a timely manner, Ettie Lee staff will utilize and maintain an accountability form (see attached) allowing all parties to be informed/aware of any follow ups, as well as other documentation needed for proper medical/dental care in a timely manner.

Section 2 (9): Agencies inquiry with OHCMD for historical information prior to certification

- All potential foster parents in the certification process will require clearances prior to certification. This will be carefully logged in our data base as well as the recruitment staff will maintain a check list and have Director verify and approve all clearances by initialing and dating the checklist prior to Certification of the Foster Parent.(see attached new foster parent checklist). Copies of clearances will be maintained in foster parent files.

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Section 2 (18): Foster Parents file include all of the necessary information

- Health Screening of back-up babysitters- All health screen clearances will be signed by a physician stating that the potential babysitters are in good health (see attached form). These will be maintained in the Foster Parent file.

- The director/supervisor will audit the foster parent's files on quarterly bases to ensure there is no missing documentation or changes (see attached foster parent file audit).

Section 4(27): FFA document efforts to obtain the County worker's authorization to implement the NSP.

- All FFA Social Worker will document their efforts of obtaining County Workers signature on NSP's through e-mails (Cisco), fax confirmations and attach to NSP's in child's file. This will be monitored by the supervisor through random audit checks (see attached form).

Section 4(29): Children progressing towards meeting the NSPs case goals.

- All foster youth capable of participating will be included in the planning and setting of their treatment goals. FFA Social Workers will document their efforts of supporting the NSP by placing the following documentation in the foster youths file: certificate of completions, flier of events/workshops attended, or copies of sign in sheets. If the foster youth refuses services, a signature must be obtained and placed in file (see attached form refusal of services). Attempts will be made at each quarter to encourage and revisit services with minor and document.

Section 6 (43): Follow up medical examinations

- Utilizing the "Accountability" form (see attached) this will help monitor and track any follow- up medical/Dental appointments and ensure appointments are conducted in a timely manner. This will be reviewed by the Supervisor on a quarterly basis and discussed with the FFA Social Worker for follow-up.

- If the foster parent is not clear /understand the medical/dental treatment or condition the foster will receive additional education and training.

- Utilization of the "accountability" form and transfer sheet will ensure any follow-up medical/dental visits are known when cases are transferred from FFA Social Worker or home (see attached).

Section 7(46)-Authorization for administration of psychotropic medication

- The "accountability" form will be utilized to help monitor and track all psychotropic medication authorizations.

- Supervisor will complete random file audits to ensure all psychotropic medication authorizations are current.

Section 11(68): All criminal clearances submitted prior to employees hire date

- Director will request scan copies of CCL clearances from Human Resources prior to hiring.

Section (74): All required trainings for staff

- On 08/20/15, anti-discrimination and fairness training was conducted. Staff read, reviewed and signed forms acknowledging they understand the policy.

At this time we have discussed this with Ettie Lee's staff and will comply with this plan. Ettie Lee is committed to providing quality care and will comply with best practices.

Sincerely,

Karen Cash, LCSW - Director

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