County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020
(213) 351-5602

PHILIP L. BROWNING
Director

FESIA A. DAVENPORT
Chief Deputy Director

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January 16, 2015

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

From: Philip L. Browning
Director

OLIVE CREST FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a review of Olive Crest Foster Family Agency (the FFA) in March 2014. The FFA has one site located in the Fourth Supervisorial District and one site located in Orange County that provides services to DCFS foster children and youth, as well as youth from other counties. According to the FFA's program statement, its mission is "to provide stability and belonging in the lives of the most needy children in our society while making every effort to reunify the placed children with their natural family."

At the time of the review, the FFA supervised 88 DCFS placed children in 65 certified foster homes. The placed children's average length of placement was 14 months and their average age was 9.

SUMMARY

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

The FFA was in full compliance with 4 of 11 sections of our Contract Compliance Review: Licensure/Contract Requirements, Education and Workforce Readiness, Psychotropic Medication and Discharged Children.

CAD noted deficiencies in the areas of: Certified Foster Home, related to safety inspections not being completed every six months and a Certified Foster Parent (CFP) not having completed annual training requirements; Facility and Environment, related to not maintaining the common areas, the children's bedrooms, and one Certified Foster Home (CFH) not maintaining a sufficient and appropriate selection

of educational resources and 3 of 6 CFHs not maintaining appropriate monetary and clothing allowance logs; Maintenance of Required Documentation/Service Delivery, related to not developing timely and comprehensive Initial and Updated NSPs and not having documented monthly CSW contacts; Health and Medical Needs, related to untimely follow-up medical and dental exams; Personal Rights and Social/Emotional Well-Being, related to a resident having indicated that chores that were age-appropriate; Personal Needs/Survival and Economic Well-Being, related to not ensuring that CFPs provide weekly monetary allowances and not allowing age-appropriate children to manage their money and 4 of 8 children reviewed did not have Life Books that were properly maintained; and Personnel Records, related to employees not having proper criminal clearances and employees not completing the required training.

REVIEW OF REPORT

On April 3, 2014, the DCFS CAD Contracts Compliance Administrator, Jennifer Higuchi, along with Children Services Administrator II, Ali Bhatti, held an Exit Conference with FFA representatives Kerri Dunkelberger, Foster & Adoption Executive Director; Jessica Valdez, Programs Director; Michelle Valdina, Supervisor; Eva Brown, Foster Family Coordinator; and Lauren Bowlby, Administrative Assistant. The FFA's representatives agreed 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).

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

The FFA provided the attached approved CAP addressing the recommendations noted in this compliance report. CAD will verify that these recommendations have been implemented in 90 days and OHCMD will provide on-going technical assistance prior to the next contract compliance review.

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

PLB:EM:LTI
DLF:AB:jh

Attachments

c: Sachi A. Hamai, Interim Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Olive Crest Treatment Center, Inc.
Kerri Dunkelberger, Executive Director Foster & Adoption
Debbie Rupard, Quality Management Director
Lenora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

OLIVE CREST
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

17800 Woodruff Ave.
Bellflower, CA 90706
License Number: 197805185

2130 E. Fourth St., #200
Santa Ana, CA 92705
License Number: 300600003

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

III	**Facility and Environment** (7 Elements)	
	1. Exterior/Grounds Well Maintained	1. Full Compliance
	2. Common Areas/Interior Well Maintained	2. Improvement Needed
	3. Children's Bedrooms/Interior Well Maintained	3. Improvement Needed
	4. Sufficient and Appropriate Educational Resources	4. Improvement Needed
	5. Adequate Perishable and Non-Perishable Food	5. Full Compliance
	6. CFP Conducted Disaster Drills and Documentation Maintained	6. Full Compliance
	7. Money and Clothing Allowance Logs Maintained	7. Improvement Needed
IV	**Maintenance of Required Documentation/Service Delivery** (10 Elements)	
	1. FFA Obtains or Documents Efforts to Obtain County Children's Social Worker's (CSW) Authorization to Implement NSPs	1. Full Compliance
	2. CFPs Participated in Development of the NSPs	2. Full Compliance
	3. Children Progressing Towards Meeting NSP Goals	3. Full Compliance
	4. FFA Social Workers Develop Timely, Comprehensive Initial NSP with Child's Participation	4. Improvement Needed
	5. FFA Social Workers Develop Timely, Comprehensive Updated NSPs with Child's Participation	5. Improvement Needed
	6. Therapeutic Services Received	6. Full Compliance
	7. Recommended Assessments/Evaluations Implemented	7. Full Compliance
	8. County Children Social Workers Monthly Contacts Documented in Child's Case File	8. Improvement Needed
	9. FFA Social Workers Develop Timely, Comprehensive Quarterly Reports	9. Improvement Needed
	10. FFA Social Workers Conduct Required Visits	10. Full Compliance
V	**Education and Workforce Readiness** (5 Elements)	
	1. Children Enrolled in School Within Three School Days	Full Compliance (ALL)
	2. Children Attend School as Required and FFA Facilitates in Meeting Children's Educational Goals	
	3. Current Children's Report Cards/Progress Reports Maintained	
	4. Children's Academic Performance and/or Attendance Increased	
	5. FFA Facilitates Child's Participation in YDS or Equivalent Services and Vocational Programs	

VI	**Health and Medical Needs** (4 Elements)	
	1. Initial Medical Exams Conducted Timely	1. Full Compliance
	2. Follow-Up Medical Exams Conducted Timely	2. Improvement Needed
	3. Initial Dental Exams Conducted Timely	3. Full Compliance
	4. Follow-Up Dental Exams Conducted Timely	4. Improvement Needed
VII	**Psychotropic Medication** (2 Elements)	
	1. Current Court Authorization for Administration of Psychotropic Medication	Full Compliance (All)
	2. Current Psychiatric Evaluation Review	
VIII	**Personal Rights and Social/Emotional Well-Being** (10 Elements)	
	1. Children Informed of Agency's Policies and Procedures	1. Full Compliance
	2. Children Feel Safe in the CFP Home	2. Full Compliance
	3. CFPs' Efforts to Provide Nutritious Meals and Snacks	3. Full Compliance
	4. CFPs Treat Children with Respect and Dignity	4. Full Compliance
	5. Children Allowed Private Visits, Calls and to Receive Correspondence	5. Full Compliance
	6. Children Free to Attend or Not Attend Religious Services/Activities of Their Choices	6. Full Compliance
	7. Children's Chores Reasonable	7. Improvement Needed
	8. Children Informed About Their Medication and Right to Refuse Medication	8. Full Compliance
	9. Children Aware of Right to Refuse or Received Medical, Dental and Psychiatric Care	9. Full Compliance
	10. Children Given Opportunities to Participate in Extra-Curricular Activities, Enrichment and Social Activities	10. Full Compliance
IX	**Personal Needs/Survival and Economic Well-Being** (7 Elements)	
	1. $50 Clothing Allowance Provided in Accordance with FFA Program Statement	1. Full Compliance
	2. Ongoing Clothing Inventories of Adequate Quantity and Quality	2. Full Compliance
	3. Children's Involvement in Selection of Their Clothing	3. Full Compliance
	4. Provision of Sufficient Supply of Clean Towels and Personal Care Items Meeting Ethnic Needs	4. Full Compliance
	5. Minimum Weekly Monetary Allowances	5. Improvement Needed
	6. Management of Allowance/Earnings	6. Improvement Needed

	7. Encouragement/Assistance with Life Book/Photo Album	7. Improvement Needed
X	**Discharged Children** (3 Elements) 1. Completed Discharged Summary 2. Attempts to Stabilize Children's Placement 3. Child Completed High School (if applicable)	Full Compliance (All)
XI	**Personnel Records** (9 Elements) 1. Criminal Clearances (DOJ, FBI, CACI) Signed and Submitted Timely 2. Timely, Completed, Signed Criminal Background Statement 3. FFA Social Workers Met Education/Experience Requirements 4. Timely Employee Health Screening/TB Clearances 5. Valid CDL and Auto Insurance 6. FFA Employees Signed Copies of FFA Policies and Procedures 7. FFA Employees Completed All Required Training and Documentation Maintained 8. FFA Social Workers Have Appropriate Caseload Ratio 9. FFA Maintained Written Declarations for Part-Time Contracted FFA Social Workers Caseloads Not 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

OLIVE CREST FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2013-2014

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addressed findings noted during the March 2014 review. The purpose of this review was to assess Olive Crest Foster Family Agency's (the FFA) compliance with its County contract and with 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, 10 Los Angeles County DCFS placed children and youths were selected for the sample. The Contracts Administration Division (CAD) interviewed each child and reviewed their case 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, a sampled child was prescribed psychotropic medication and the case file was assessed for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed 6 Certified Foster Parent (CFP) files and 5 staff files for compliance with Title 22 Regulations and County contract requirements. Interviews were conducted with 6 CFPs to assess the quality of care and supervision provided to children.

CONTRACTUAL COMPLIANCE

CAD found the following 7 of 11 areas out of compliance.

Certified Foster Homes

- The FFA office located in Bellflower was late in conducting their Safety Inspections in 3 of 5 Certified Foster Parent (CFP) homes by two months.

The FFA representatives informed CAD that Safety Inspections will be completed every six months for all certified foster homes servicing Los Angeles County placed children and that the FFA Program Supervisor will conduct quarterly audits to verify completion.

- A CFP did not complete the required 12 hours of their annual training.

The CFP was short of two hours in meeting his/her requirement. The FFA allowed the CFP to watch a child-welfare related movie and write a summary to meet the training standards. At the Exit Conference, the FFA representatives stated that they would provide closer supervision and ensure that CFP trainings are completed on time.

Recommendation

The FFA's management shall ensure that:

1. Safety Inspections are conducted every six months.

2. All CFPs complete required annual trainings timely.

Facility and Environment

- A CFP failed to maintain proper lighting in a hallway that is used by the children to access various parts of the home, such as, the bathroom, kitchen and living area. Further, the CFP did not maintain extra light bulbs in the home.

This particular hallway was dark even during day time hours, so CAD informed the CFP and the FFA representatives that this was a potential hazard to the children. This matter has since been remedied by the FFA.

- Two CFP homes visited did not have appropriate bedding for the children placed in their homes.

A 5-month old baby was placed in a home that did not have a crib and the CFP used a co-sleeper instead and the baby slept on the same bed as the CFP. In the second home, an 8-year-old and a 9-year-old were in a home where the younger child slept on a bare mattress on the floor and the older child slept on a futon that was in the up-right position without appropriate sheets and blankets.

On March 20, 2014, CAD contacted Community Care Licensing Division (CCLD) and the Children Social Workers (CSW) assigned to the cases. CCLD visited the CFP homes within three days of CAD expressing concerns related to the children's sleep arrangements and verified that a crib was purchased for the baby and a bunk bed was purchased for the 8-year-old and the 9-year-old.

The FFA representative stated that the case managers have been trained in Title 22 regulations and they were asked to ensure that each of their current CFPs have age-appropriate bedding during their next home visits.

- A CFP did not maintain a sufficient and appropriate selection of reading materials and educational resources for the school-aged children.

- Three CFP homes did not maintain appropriate monetary and clothing allowance logs.

The homes were missing logs for more than three months and had multiple logs for the same time period. Due to the duplication of logs with varying allowance amounts, it was difficult to determine if the children were actually receiving their allowances.

The FFA representatives stated that the case managers will ensure educational materials are provided and revised allowance and clothing logs have been issued to limit further confusion by CFPs.

Recommendation

The FFA's management shall ensure that:

3. Common areas are well maintained.

4. Bedrooms are well maintained.

5. Sufficient and appropriate educational resources are maintained.

6. Appropriate monetary and clothing allowances logs are maintained.

Maintenance of Required Documentation and Service Delivery

- Four Initial NSPs were not completed timely due to FFA social workers signing the NSPs five days past the due date. This review was conducted in March 2014 before the FFA contract was modified to allow agencies to have five days past the due date to submit the NSPs to DCFS.

- Four Updated NSPs reviewed at the Bellflower office were signed by the FFA social worker after the due date and a 11-year-old did not have his/her signatures in any of the NSPs with the exception of his Initial NSP although he had been in placement for 32 months.

- Three children's files were missing monthly contact with CSW.

- Seven Quarterly Reports were developed past the due dates; lacked children's signatures; and did not have CSW signature or documentation of efforts to obtain the signatures.

The FFA stated that the Initial, Quarterly, and Updated NSPs were developed by the FFA social worker on the exact NSP due date. The signatures of the child, the CFP, and the FFA supervisor were obtained afterwards; which led to the NSP being submitted on average three to five days past the due date to the CSW.

At the Exit Conference, the FFA was in disagreement with CAD regarding NSPs requiring submission to the CSW by the due date for signatures. The FFA indicated that they needed a few extra days after the NSP due date to obtain signatures from all involved parties, such as the child, foster parent, biological parents, and the FFA representatives. This was to ensure

that all pertinent information during the review period was included in the NSP. The CAD explained that this practice did not allow the CSW to have the full five days to sign the NSP.

Recommendation

The FFA's management shall ensure that:

7. All Initial NSPs are timely and comprehensive.

8. All Updated NSPs are timely and comprehensive, with child's participation.

9. County CSW monthly contacts are documented.

10. Quarterly reports are timely and comprehensive.

Health and Medical Needs

- Two children did not receive timely follow-up medical exams.

The HUB CHDP results recommended that a child be referred to a dermatologist and that the child's younger sibling be referred to an Audiologist and Speech/Language Assessment. More than three months had passed since the HUB made the above recommendations and the children were not referred. The FFA stated that they were not aware that the HUB had made these recommendations, as they don't always receive the Health and Education Passport (HEP) or the HUB results from DCFS.

- Four children did not receive timely follow-up dental exams.

A dental exam completed in February 2013 recommended that an 8-year-old child return in four weeks for further services, but he/she was not seen until January 2014. Three other children did not have records of initial or follow-up dental appointments since their placement with the agency in January 2013.

The FFA stated that the above children were replacements and the agency was verbally informed by DCFS that the initial dental exams had been completed for the three children and that the follow-up exams were not yet due. CAD informed the FFA that going forward; all children must receive the required medical and dental exams in accordance with the CHDP guidelines.

At the Exit Conference, the FFA stated that they do not always receive the HEP from DCFS; therefore, they sometimes determine the due dates for medical and dental exams based on verbal information provided by the CSW.

Recommendation

The FFA management shall ensure that:

11. Follow-up medical exams are timely

12. Follow-up dental exams are timely.

Personal Rights and Social/Emotional Well-Being

- A 9-year-old-child disclosed not having been provided with an orientation at the time of placement.

The FFA was able to produce documentation that the child signed placement agreements, which indicates that he/she is informed and understands the policies and procedures.

- The same child disclosed that the assigned chores can be difficult at times.

The child indicated being in charge of cleaning up the common area, their bedroom, and taking out the trash. The child stated that taking the trash out can be hard at times due to the size and weight of the trash. The FFA stated that their social workers will interview children separately during their visits to ensure chores are age-appropriate.

At the Exit Conference, the FFA expressed concerns that the above findings were made solely based on statements made by one child. The CAD informed the FFA that child interviews are part of the review and that the children are interviewed in an age-appropriate manner.

Recommendation

The FFA's management shall ensure that:

13. Assigned chores are age-appropriate.

Personal Needs/Survival and Economic Well-Being

- A 9-year-old child stated that a monetary allowance is provided, but that it is not on a weekly basis and does not know how much allowance should be provided.

- The same child stated being instructed to save the money that is provided; therefore, does not feel free to spend the allowance given.

The FFA stated that the case managers have been instructed to inform all CFPs that the children are to receive weekly allowances unless restrictions are appropriately documented in the NSPs. Further, the agency has modified their monetary weekly allowance logs to limit further confusion from the CFPs.

- Four children did not have Life Books that were properly maintained as the children stated that they did receive Life Books from the agency, but didn't receive any help from their caregivers to complete them. The children stated that they didn't have any photos to place in the books.

The CFPs stated that they were not aware they needed to assist the children in completing the Life Books and believed it was something that the children had to do on their own. The FFA stated that Life Books were given to each child and that the CFPs were instructed to assist the children.

Recommendation

The FFA's management shall ensure that:

14. Weekly monetary allowances are provided.

15. Age-appropriate children are allowed to manage their allowance/earnings, unless it is specified in the NSP.

16. Encouragement/assistance with Life Books/Photo Albums is provided.

Personnel Records

- Two employee files reviewed at the Bellflower office were missing proper criminal clearances.

A program coordinator hired on September 3, 2013 was missing DOJ and CACI results and a case manager/social worker hired on October 23, 2013 was missing CACI results as of March 2014. The FFA stated that on December 3, 2014, CCLD confirmed that the criminal clearances were completed for the above referenced employees.

- One employee did not complete the required training, specifically the completion of two-hour training per month.

The FFA required the social workers to complete 15-hours of training per year although their Program Statement required them to complete two-hours per month which adds up to 24-hours per year. The FFA stated that their FFA Program Statement will be revised to reflect a 15-hour annual training requirement instead of 24-hours.

At the Exit Conference, the FFA stated that their employees were receiving training during the agency's regularly held unit meetings. The agency was unable to provide detailed information as to the title/topic of the trainings provided during the unit meetings. The CAD informed the FFA that the current training provided to their employees is not in accordance to the training described in their program statement.

Recommendation

The FFA's management shall ensure that:

17. All proper criminal clearances are obtained before a person starts work.

18. All employees complete the required annual trainings, as described in the FFA's program statement.

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

The OHCMD's last compliance report dated September 11, 2013 identified 7 recommendations.

Results

Based on the results of the current review, the FFA fully implemented 6 of the prior 7 recommendations for which the FFA was to ensure:

- Certified Foster Parents are trained in personal rights.
- Certified Foster Parents are assessed prior to placing more than two children in the home.
- All Certified Foster Homes conduct disaster drills every six months.
- All Certified Foster Parents participate in the development of the NSPs and sign the NSPs.
- All FFA SW contacts are maintained in the children's files and/or easily accessible.
- All children's initial dental examinations are completed timely.

The FFA did not implement one previous recommendations for which the FFA was to ensure:

- Certified Foster Parents conduct safety inspection every six months.

Recommendation

The FFA management shall ensure that:

The outstanding recommendation from the 2012-2013 monitoring report dated September 11, 2013, which is also noted in this report as Recommendation 1, is fully implemented.

The FFA representatives expressed their desire to remain in compliance with Title 22 Regulations and Contract requirements. CAD will follow-up on the implementation of the recommendations in 90 days and OHCMD will provide on-going technical assistance.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

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

OLIVE CREST
Strong Families, Safe Kids

1.800.550.CHILD (2445)
www.olivecrest.org

December 19, 2014

Jennifer Higuchi, MSW
Children Services Administrator I
Department of Children & Family Services
Contracts Administration Division
3530 Wilshire Blvd. 4th Floor
Lost Angeles, CA 90010

RE: Corrective Action Plan for Foster Family Agency Monitoring Review (revised from 5/12/14 per DCFS request; revised from 7/25/14 per DCFS request; revised from 8/1/14 per DCFS request)

Dear Ms. Higuchi,

Per your request, we submit the following as our Corrective Action Plan (CAP) consequent to the finding of our Foster Family Agency Monitoring Review conducted on March 10, 2014.

The following CAP is therefore submitted for the Departments review:

1. **Item/Area not found in compliance:**

Section II: Certified Foster Homes

Question 15: Were safety inspections completed at least every six months or per the timelines approved in the agency's Program Statement? (SAFETY)

Agency's Response:

All staff have been reminded to conduct bi-annual safety inspections and to promptly document these inspections. FFA case managers will complete safety inspections at re-certification and 6 months thereafter. The FFA program supervisor will conduct quarterly audits to verify completion of the inspections and ensure that the appropriate documentation is on file.

2. **Item/Area not found in compliance:**

Section II: Certified Foster Homes

Question16: Have foster parents completed the required additional annual training of 12 hours during the first year and 15 hours every year thereafter, as well as CPR, First-Aid and Water Safety certificates (if applicable)? (SAFETY)

Agency's Response:

Our administrative staff conducts routinely Foster Parent file audits to ensure full compliance with Title 22 and county contract requirements. New practices have been

17800 Woodruff Avenue, Bellflower, CA 90706
SERVING CHILDREN AND FAMILIES IN CALIFORNIA, NEVADA, AND THE PACIFIC NORTHWEST

implemented internally to verify that all foster parents complete their required training hours prior to their re-certification date. Furthermore, the FFA has added extra training opportunities for families to take advantage of throughout the year. The goal is to add a minimum of one training in both the Glendale and Bellflower offices, per month. This may or may not occur each month depending on such things as staff resources and low attendance, however, this was implemented in January 2014 and has been working relatively well, thus far.

3. <u>Item/Area not found in compliance:</u>

Section III: Facility and Environment

Question 21: Are common areas/interior well maintained? (Clean/sanitary; neat; adequate furniture and lighting; home-like environment, no safety hazards) (SAFETY)

<u>Agency's Response:</u>

In one of the six homes that were inspected, the auditor noted a light bulb was out in the hallway area. Upon investigation it was reported that the light bulb was out for 24 hours. The assigned case manager was informed and was instructed to follow up with foster parent regarding light bulb. The matter was resolved and the home is in compliance with Title 22 regulations and county contract requirements.

4. <u>Item/Area not found in compliance:</u>

Section III: Facility and Environment

Question 22: Are children's bedrooms well maintained? (Clean/sanitary; neat; comfortable; adequate lighting, window coverings and storage space; beds, mattresses, furniture, flooring; full complement of clean linens on beds, age-appropriate decorations, and appropriate sleeping arrangements) (SAFETY)

<u>Agency's Response:</u>

Auditor made two findings regarding two foster homes lacking age-appropriate beds. The assigned case managers were made aware and foster families responded immediately to change. One home had a travel basinet that did not sufficiently meet Title 22 regulations. Assigned case manager informed the foster family and they purchased a crib for infant.

The second home had a mattress on the floor and a futon. Assigned case manager informed foster family that this was not appropriate and they purchased a bunk bed set. Both families have made adequate changes and assigned case managers have documented changes. Both homes are now in compliance with Title 22 regulations and the children have appropriate beds and bedding.

Furthermore, all staff reviewed Title 22 regulations and were asked to ensure that each of their current clients have age-appropriate beds during their next home visits. (See Attached sign in sheet). Going forward, case managers will check for age-appropriate bedding arrangements at their initial visit.

5. <u>Item/Area not found in compliance:</u>

Section III: Facility and Environment

Question 23: Does the certified foster home maintain sufficient and an appropriate selection of (quantity and quality) reading materials and educational resources and

supplies, including computers, which are age-appropriate, readily available to children and in good repair? (SELF-SUFFICIENCY)

Agency's Response:

Staff have been asked to ensure that each child has sufficient and age-appropriate selection of reading materials and educational resources in their foster homes. FFA case managers will look for these items in the foster home during home visits and document accordingly.

6. Item/Area not found in compliance:

Section III: Facility and Environment

Question 26: Are appropriate and comprehensive monetary and clothing allowance logs maintained? (WELL-BEING)

Agency's Response:

Auditor made two findings regarding two foster homes. One foster home was cited for documenting monthly allowance logs incorrectly. Second home was cited for missing three months of expenditure logs. Assigned case managers were informed and both foster parents have been trained in filling out forms correctly. FFA supervisor has reviewed policy with all staff. FFA case managers will verify completion and retention of the necessary documentation. FFA has also updated the allowance log, expenditure log and clothing inventory forms in order to limit further confusion; forms have been introduced to all current families.

7. Item/Area not found in compliance:

Section IV: Maintenance of Required Documentation and Service Delivery

Question 30: Did the FFA social worker develop timely, comprehensive, initial (NSPs) with the participation of the developmentally age-appropriate child? (WELL-BEING)

Agency's Response:

FFA supervisor has reviewed practices with all staff. In addition all staff was reminded of the contract requirement that child participation is necessary when age-appropriate in the development of the NSP goals. Furthermore, the staff will ensure that child signatures are on NSP's before submitting to county workers. Internal audits will verify that child's signature has been obtained. In addition, FFA Supervisor will attempt to sign the quarterly only after it is verified that the child's signature and family signature are present. (Note: Due to the tight timelines, there may be times when this is not possible, and in those instances, Olive Crest will rely on our internal audit procedure to ensure all signatures are present.)

8. Item/Area not found in compliance:

Section IV: Maintenance of Required Documentation and Service Delivery

Question 31: Did the FFA social worker develop timely, comprehensive, updated (NSPs) with the participation of the developmentally age-appropriate child? (WELL-BEING)

Agency's Response:

FFA supervisor has reviewed practices with all staff. In addition, all staff was reminded of the contract requirement that child participation is necessary in the development of the NSP

goals, when age-appropriate. Furthermore, staff will ensure child signatures are present on NSP's before submitting them to the county workers. Internal audits will verify that child's signature has been obtained. In addition, FFA Supervisor will attempt to sign the quarterly only after it is verified that the child's signature and family signature are present. (Note: Due to the tight timelines, there may be times when this is not possible, and in those instances, Olive Crest will rely on our internal audit procedure to ensure all signatures are present.)

9. <u>Item/Area not found in compliance:</u>

Section IV. Maintenance of Required Documentation and Service Delivery

Question 35: Does the FFA social worker complete timely, comprehensive, quarterly reports? (to County workers by 10th business day following the end of each quarter from the date the child was placed). (WELL-BEING)

<u>Agency's Response:</u>

FFA supervisor has reviewed policy and practices with all staff. In addition, all staff was reminded of the contract requirement that all FFA signatures be included in the quarterly report on or before the 90 day review date. This will allow the county worker the full **5** business days to sign and return quarterly report (per contract amendment dated May 1, 2014).

10. <u>Item/Area not found in compliance:</u>

Section IV: Maintenance of Required Documentation and Service Delivery

Question 34: Are County workers contacted monthly and are the contacts appropriately documented in the case file? (WELL-BEING)

<u>Agency's Response:</u>

FFA case managers are aware that all correspondence should be documented in the correspondence log. FFA supervisor will conduct regular chart reviews to verify that correspondence logs are completed and filed. FFA Supervisor will collect correspondence logs on a monthly basis for review.

11. <u>Item/Area not found in compliance:</u>

Section VI: Health and Medical Needs

Question 43: Are required follow-up medical examinations conducted timely? (WELL-BEING)

<u>Agency's Response:</u>

The issue noted was that two of the ten children had received medical services prior to placement with FFA and the paperwork indicated the children needed a follow-up appointment. FFA supervisor has reviewed policy and practices with all staff. FFA case managers will verify any follow-up appointments by reviewing intake paperwork and by contacting county worker. Case Managers will documents their efforts to obtain paperwork related to previous medical care and ensure appropriate follow-up appointments are scheduled and attended.

12. <u>Item/Area not found in compliance:</u>

Section VI: Health and Medical Needs

Question 45: Are required follow-up dental examinations conducted timely? (WELL-BEING)

Agency's Response:

The issue noted was that four of the ten children had previously received dental services and paperwork indicated that children needed a follow-up dental appointment. FFA supervisor has reviewed policy and practices with all staff. FFA case managers will verify any follow-up appointments by reviewing intake paperwork and contacting county workers.

13. Item/Area not found in compliance:

Section VIII: Personal Rights and Social/Emotional Well-Being

Question 54: Are children's chores reasonable and age-appropriate? (SELF-SUFFICIENCY)

Agency's Response:

FFA supervisor has reviewed practices with all staff. FFA case managers and foster parents will discuss reasonable and age-appropriate chores. FFA case manager will verify age-appropriate chores by interviewing child separately during visit and documenting accordingly.

14. Item/Area not found in compliance:

Section IX. Personal Needs/Survival and Economic Well-Being:

Question 62: Are children always provided with weekly monetary allowances? (If after November 1, 2012, minimum base allowance per contract) (SELF-SUFFICIENCY)

Agency's Response:

FFA supervisor has reviewed policy with all staff. FFA has also updated allowance log to ensure that foster parents are clear that children receive weekly monetary allowances, as is the current policy of Olive Crest. Case Managers will review weekly logs to ensure allowances are given appropriately, according to policy and NSP goals.

15. Item/Area not found in compliance:

Section IX: Personal Needs/Survival and Economic Well-Being:

Question 64: Does the Certified Foster Parent encourage and assist children to update a life book or photo album?(PERMANENCY)

Agency's Response:

FFA case managers were instructed to inform their families that Foster Parents need to encourage and assist children to update a life book or photo album. If child is an infant FFA case manager will inform Foster Parents that they need to start a life book or photo album.

16. Item/Area not found in compliance:

Section XI Personnel Records

Question 68: Were all criminal clearances (CACI, DOJ, FBI) signed and submitted timely prior to employee's hired date? (SAFETY)

Agency's Response:

Olive Crest Human Resource Department will ensure that all criminal record clearances are received and or printed out prior to employee's start date. Additionally, Olive Crest FFA Supervisor will work with HR to clarify the difference between a "hire date" and a "start date," and that this is properly communicated in employee files. Olive Crest current policy is that no employee will start work prior to the agency receiving criminal record clearances. The policy will continue to be enforced.

17. Item/Area not found in compliance:

Section XI. Personnel Records

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

Agency's Response:

FFA supervisor has reviewed training requirements with all staff. The FFA administrative assistant will verify completion and retention of the necessary documentation in a staff training binder. Olive Crest was utilizing a 15-hour annual requirement for staff. However, per the FFA program statement from 2008 that was reviewed during the DCFS Contracts Review, it appears staff must complete 24 hours of training.

*According to our Executive Director of Foster Care and Adoption, please note that **Olive Crest will update the Foster Family Agency Program Statement Section 17** to reflect a 15-hour annual training hour requirement and clarify treatment team meetings, that may be able to count toward monthly in-service training received by Case Management staff.*

*Executive Director is currently on vacation, and will not be able to update this prior to the due date of this CAP. **However, a proposed draft has been attached.**

If any additional information is needed, you may contact me at (562)977-6970 or our Executive Director, Kerri Dunkelberger at (714) 543-5437 ext. 1164.

Respectfully,

Jessica Valdez, MSW
Foster and Adoption Programs Director
jessica-valdez@olivecrest.org