County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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Director

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March 25, 2016

To: Supervisor Hilda L. Solis, Chair
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Supervisor Sheila Kuehl
Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA FOSTER FAMILY AGENCY FISCAL COMPLIANCE ASSESSMENT AND CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Fiscal Compliance Assessment and Contract Compliance Review of the Children's Bureau of Southern California Foster Family Agency (the FFA) in November 2014 and January 2015. The FFA has two offices, one located in the First Supervisorial District and one located in the Fifth Supervisorial District and provides services to the County of Los Angles DCFS placed children. According to the FFA's program statement, its stated mission is "to prevent child abuse and neglect; protect, nurture, and treat abused children; enhance the potential of families and communities to meet the needs of their children and advance the welfare of children and families through superior programs in foster care, adoptions, child development, parent education mental health research and advocacy."

At the time of the review, the FFA supervised 162 placed children in 110 Certified Foster Homes (CFHs). The placed children's average length of placement was ten months and their average age was seven.

SUMMARY

CAD conducted a Fiscal Compliance Assessment which included an agency-wide review of the FFA's financial records such as financial statements, bank statements, check register and personnel files to determine their 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 2 of 5 areas of the Fiscal Compliance Assessment: Loans, Advances and Investments; and Payroll and Personnel.

CAD noted deficiencies in the areas of: Financial Overview, related to the semi-annual expenditure reports not being submitted timely; Board of Directors and Business Influence, related to the Board meeting minutes not being certified by the Board secretary; Cash/Expenditures, related to the bank reconciliations with outstanding items for longer than six months and an incomplete fixed assets inventory list.

During CAD's Contract Compliance Review, the interviewed children generally reported: feeling safe at the FFA CFHs, having been provided with good care and appropriate services, being comfortable in the placement environment and treated with respect and dignity. The Certified Foster Parents (CFPs) reported

that 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 7 of 11 sections of the CAD's Contract Compliance Review: Licensure/Contract Requirements; Certified Foster Homes; Education and Workforce Readiness; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Discharged Children; and Personnel Records.

CAD noted deficiencies in the areas of: Facility and Environment, related to the exterior/grounds and interior not being well maintained and perishable and non-perishable foods not adhering to product expiration dates; Maintenance of Required Documentation and Service Delivery, related to children not progressing toward meeting their Needs and Services Plan (NSP) case goals, initial NSPs not being timely, updated NSPs not being timely and comprehensive and children not receiving therapeutic services; Health and Medical Needs, related to a follow-up dental examination not being conducted timely; and, Personal Needs/Survival and Economic Well-Being, related to CFPs not encouraging and assisting children with a Life Book or Photo Album.

Attached are the details of CAD's review.

REVIEW OF REPORT

On January 8, 2015, Sherry L. Rolls, DCFS CAD and Donald Luther, Out-of-Home Care Management Division held an Exit Conference with the FFA representatives: Amy Heilman, Director of Foster Care and Adoption, and Cathy Allen, Program Coordinator. On May 28, 2015, Luis Moreno, DCFS CAD held the Fiscal Exit Conference with the FFA representatives: Karen Haglund, Controller, and Emma Ocampu, Accounting Manager. The FFA's representatives agreed with the review findings and recommendations, were receptive to implementing systematic changes to improve their compliance with regulatory standards and were in agreement with addressing the noted deficiencies in a compliance Corrective Action Plan (CAP) and a Fiscal Corrective Action Plan (FCAP).

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

The FFA provided the attached approved CAP and FCAP addressing the recommendations noted in this report. CAD conducted a follow-up visit to the FFA in April 2015 and verified implementation of the CAP.

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

PLB:EM:LTI:slr

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Alex Morales, Chief Executive Officer, Children's Bureau of Southern California
Lenora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA
FISCAL COMPLIANCE ASSESSMENT REVIEW
FISCAL YEAR 2014 –2015

SCOPE OF REVIEW

The Fiscal Compliance Assessment included a review of Children's Bureau of Southern California Foster Family Agency's (the FFA's) financial records for the period of July 1, 2013 through December 31, 2014. Contracts Administration Division (CAD) reviewed the financial statements, bank statements, check register and personnel files to determine the FFA's compliance with the terms, conditions and requirements of the Foster Family Agency 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 review 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 2 of 5 areas of the Fiscal Compliance Assessment: Loans, Advances and Investments; and Payroll and Personnel.

FISCAL COMPLIANCE

CAD found the following areas out of compliance:

Financial Overview

- The semi-annual expenditure reports that were due in March 2014 and September 2014 were not submitted until September 11, 2014.

The contractor has established procedures to submit future semi-annual expenditure reports timely.

Recommendation:

The FFA's management shall ensure that:

1. The semi-annual expenditure reports are submitted timely.

Board of Directors and Business Influence

- The Board meeting minutes dated May 13, 2014, June 4, 2014 and September 23, 2014 were not certified by the Board Secretary.

The FFA contractor has established procedures and going forward, the Board meeting minutes will include the Board Secretary's signature.

Recommendation:

The FFA's management shall ensure that:

2. Board meeting minutes are certified by the Board Secretary.

Cash/Expenditures

- Bank reconciliations showed outstanding items for over six months.
- The FFA contractor did not maintain an inventory list of fixed assets that includes source of funding and serial number.

The FFA contractor has established procedures to reconcile outstanding items timely and will reflect the funding source and serial numbers on the fixed assets listing.

Recommendations:

The FFA's management shall ensure that:

3. Reconciling items are resolved timely.
4. The fixed asset inventory list is maintained and includes all required elements.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

The most recent fiscal review was posted by the A-C for the FFA contractor's Wraparound Program on April 15, 2011, for County Fiscal Years (FYs) 2007-2008 and 2009-2010. There was one Department of Mental Health finding.

NEXT FISCAL COMPLIANCE ASSESSMENT

The next Fiscal Compliance Assessment of the FFA will be conducted in County FY 2015-2016.

CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE REVIEW SUMMARY

1910 Magnolia Avenue
Los Angeles, California 90007
License No: 197805422

1529 E. Palmdale Blvd.
#210, Palmdale CA 93550
License No: 197800281

	Contract Compliance Review	**Findings: November 2014**
I.	**Licensure/Contract Requirements** (7 Elements) 1. Timely Notification for Child's Relocation 2. Timely, Cross-Reported SIRs 3. Runaway Procedures in Accordance with the Contract 4. Are there CCL Citations/OHCMD Safety Reports 5. If Applicable, FFA Ensures Complete Required Whole Foster Family Home Training 6. FFA Pays Certified Foster Parents (CFP) Whole Foster Family Home Payments 7. FFA Conducts an Assessment of CFP Prior to Placement of Two (2) or More Children	Full Compliance (All)
II.	**Certified Foster Homes** (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 (FBI,DOJ,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 Pre-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/ FBI/DOJ/CACI/Auto Insurance for Other Adults in the Home 12. FFA Assists CFPs in Providing Transportation Needs	Full Compliance (All)

	Contract Compliance Review	Findings: November 2014
III.	**Facility and Environment** (7 Elements)	
	1. Exterior/Grounds Well Maintained	1. Needs Improvement
	2. Common Areas Well Maintained	2. Needs Improvement
	3. Children's Bedrooms/Interior Well Maintained	3. Full Compliance
	4. Sufficient and Appropriate Educational Resources	4. Full Compliance
	5. Adequate Perishable and Non-Perishable Foods	5. Needs Improvement
	6. CFP Conducted Disaster Drills and Documentation Maintained	6. Full Compliance
	7. Money and Clothing Allowance Logs Maintained	7. Full Compliance
IV.	**Maintenance of Required Documentation/Service Delivery** (10 Elements)	
	1. FFA Obtains or Documents Efforts to Obtain County Children's Social Worker's (CSW's) 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. Needs Improvement
	4. FFA Social Workers Develop Timely, Comprehensive Initial NSP with Child's Participation	4. Needs Improvement
	5. FFA Social Workers Develop Timely, Comprehensive Updated NSPs with Child's Participation	5. Needs Improvement
	6. Therapeutic Services Received	6. Needs Improvement
	7. Recommended Assessments/Evaluations Implemented	7. Full Compliance
	8. County Children's Social Workers Monthly Contacts Documented in Child's Case File	8. Full Compliance
	9. FFA Social Workers Develop Timely, Comprehensive Quarterly Reports	9. Full Compliance
	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	

	Contract Compliance Review	Findings: November 2014
VI.	**Health and Medical Needs** (4 Elements) 1. Initial Medical Exams Conducted Timely 2. Follow-Up Medical Exams Conducted Timely 3. Initial Dental Exams Conducted Timely 4. Follow-Up Dental Exams Conducted Timely	 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Needs Improvement
VII.	**Psychotropic Medications** (2 Elements) 1. Current Court Authorization for the Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	 Full Compliance (All)
VIII.	**Personal Rights and Social Emotional Well-Being** (10 Elements) 1. Children Informed of Agency's Policies and Procedures 2. Children Feel Safe in the CFP Home 3. CFPs' Efforts to Provide Nutritious Meals and Snacks 4. CFPs Treat Children with Respect and Dignity 5. Children Allowed Private Visits, Calls and to Receive Correspondence 6. Children Free to Attend or Not Attend Religious Services/Activities of Their Choice 7. Children's Chores Reasonable 8. Children Informed About Their Medication and Right to Refuse Medication 9. Children Aware of Right to Refuse or Receive Medical, Dental and Psychiatric Care 10. Children Given Opportunities to Participate in Extra-Curricular Activities, Enrichment and Social Activities	 Full Compliance (All)
IX.	**Personal Needs/Survival and Economic Well-Being** (7 Elements) 1. Clothing Allowance Provided in Accordance with FFA Program Statement 2. Ongoing Clothing Inventories of Adequate Quantity and Quality 3. Children Involved in the Selection of Their Clothing 4. Provision of Sufficient Supply of Clean Towels and Personal Care Items Meeting Ethnic Needs	 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance

	Contract Compliance Review	**Findings: November 2014**
	5. Minimum Weekly Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement/Assistance with Life Book or Photo Album	5. Full Compliance 6. Full Compliance 7. Needs Improvement
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 (FBI,DOJ, CACI) Signed and Submitted Timely 2. Timely, Completed, Signed Criminal Background Statement 3. FFA Social Workers Met Education/Experience Requirements 4. Timely Employee Health Screening/TB Clearances 5. Valid CDL and Auto Insurance 6. FFA Employees Signed Copies of FFA Policies and Procedures 7. FFA Employees Completed All Required Training and Documentation Maintained 8. FFA Social Workers Have Appropriate Caseload Ratio 9. FFA Maintained Written Declarations for Part-Time Contracted FFA Social Workers Caseloads Not to Exceed a Total of 15 Children	Full Compliance (All)

CHILDREN'S BUREAU OF SOUTHERN CALIFORNIA FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE REVIEW
FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The following report is based on a "point in time" visit. This compliance report addresses findings noted during the November 2014 review. The purpose of this review was to assess Children's Bureau of Southern California 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 administrative internal policies and procedures. The compliance review covered the following 11 areas:

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

For the purpose of this review, 12 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 they received. Additionally, four discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, two 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 six Certified Foster Home (CFH) files and five staff files for compliance with Title 22 regulations and County contract requirements. Interviews were conducted with the Certified Foster Parents (CFPs) to assess the quality of care and supervision provided to the children.

CONTRACTUAL COMPLIANCE

CAD found the following areas out of compliance:

Facility and Environment

- Exterior and grounds were not well maintained.

The exterior/grounds of CFH #6 had exposed sprinkler wires on the front lawn. CAD brought this to the CFP's attention for immediate action. The CFP covered the exposed wires with a secure box the same day.

- The interior was not well maintained.

For CFH #2, a knob on the stove was missing, which exposed sharp edges. On December 5, 2014, CAD confirmed the home had replaced the missing stove knob.

- Adequate perishable and non-perishable foods were not maintained.

CFHs #2, #3, and #5 did not maintain perishable and non-perishable food items that adhered to the product expiration dates. CAD immediately had the CFPs discard the expired foods and advised them of the requirement to adhere to product expiration dates.

CAD conducted a follow-up visit on April 14, 2015 and confirmed that the Safety Awareness and Assessment of Resource/Foster Family Home training took place on March 30, 2015.

Recommendations:

The FFA's management shall ensure that:

1. The exterior and grounds are well maintained.

2. The common areas are well maintained.

3. Adequate perishable and non-perishable food are maintained.

Maintenance of Required Documentation and Service Delivery

- A child was not progressing towards meeting Needs and Services Plan (NSP) goals.

The FFA staff did not properly document and address meeting a child's psychological development issues in 1 of 36 updated NSPs reviewed, as the case file did not include information as to how and when a child would receive therapy. The case file noted that the child needed therapy but did not contain documentation on efforts to ensure the child started receiving it.

- One initial NSP was not comprehensive.

1 of 12 initial NSPs reviewed showed that it was not timely as it was sent to the County CSW on November 14, 2014; however, it was due on August 8, 2014.

- Updated NSPs were not timely and comprehensive.

6 of 36 updated NSPs reviewed were not timely and comprehensive. One NSP was not timely as it was signed late. The NSP was due October 8, 2014 and was not signed until November 18, 2014.

Five updated NSPs were not comprehensive. One NSP noted that the child was not taking psychotropic medications; however, the child had a court approved authorization and was taking the medications. For a group of three siblings, the NSPs contained identical information and were not child specific. Another NSP listed the child as receiving an allowance; however, per the FFA's

program statement, the child was too young to receive an allowance. The FFA confirmed the child is not receiving an allowance due to not meeting the age requirement.

- Therapeutic services were not received.

For 1 of 12 children, a case file did not contain documentation to address meeting a child's psychological development issues, as the child's therapy goal was not comprehensive. In addition, the child was the only party listed as being responsible for accomplishing the goal. At the time of the review, the child was 2 ½ years old.

On April 14, 2015 CAD conducted a follow-up visit and confirmed that the FFA held a training on December 8, 2014, to discuss therapy treatment and properly documenting these services in a child's case file. CAD also confirmed that on March 4, 2015, the FFA held training on developing Specific, Measurable, Attainable, Relevant, and Time-bound goals with the FFA social workers. Additionally, on February 26, 2015 the FFA sent a letter to all CFPs informing them to keep therapy logs, which must include appointments attended, those missed and why and the requirement for timely submission of these documents to the FFA.

Recommendations:

The FFA's management shall ensure that:

4. Children are progressing towards meeting NSP goals.

5. Initial NSPs are timely.

6. Updated NSPs are timely and comprehensive.

7. Therapeutic services are received.

Health and Medical Needs

- Follow-up dental exam not conducted timely.

A dental follow-up exam was due on February 1, 2014 and did not occur until February 20, 2014. During the Exit Conference, CAD discussed the requirement to ensure that CFPs take children to all medical and dental appointments in a timely manner.

On April 14, 2015 CAD conducted a follow-up visit with the FFA and confirmed that refresher training was held February 9, 2015, with the FFA social workers which included a discussion regarding the requirements to monitor follow-up appointments.

Recommendation:

The FFA's management shall ensure that:

8. Follow-up dental examinations are conducted timely.

Personal Needs/Survival and Economic Well-Being

- Encouragement and assistance with a Life Book/Photo Album was not provided.

A child did not have their own Life Book/Photo Album. The child was sharing one with a sibling. At the Exit Conference, the FFA was advised of the need to ensure that all children have their own copies of Life Books/Photo Albums.

On April 14, 2015, CAD conducted a follow-up visit and confirmed that training was provided on March 30, 2015, for the FFA social workers to ensure that all children have a Life Book/Photo Album.

Recommendation:

The FFA's management shall ensure that:

9. Encouragement/Assistance with a Life Book/Photo Album is provided.

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 July 18, 2014, identified 8 recommendations.

Results:

Based on CAD's follow-up, the FFA implemented 5 of 8 recommendations for which they were to ensure that:

- SAFE Home Studies are completed and dated prior to certification.
- CFPs conduct disaster drills at least every six months and documentation is maintained in the CFPs' files.
- CFPs participate in the development of NSPs and are familiar with NSPs.
- Criminal clearances are obtained prior to the hire date.
- Health screening/tuberculosis clearances are obtained prior to the hire date.

Based on the results of the current review, 4 of 9 recommendations were not implemented.

- Initial NSPs are developed timely.
- Updated NSPs are developed timely.
- FFA social workers develop comprehensive initial and updated NSPs and all the fields/sections are completed in accordance with the NSP template.

- All children are encouraged and assisted in developing a Life Book/Photo Album.

Recommendation:

10. The outstanding recommendations from the report dated July 18, 2014, which are noted in this report as recommendations 4, 5, 6, and 9 are fully implemented.

At the Exit Conference, the FFA representatives expressed their desire to remain in compliance with Title 22 regulations and contract requirements. Amy Heilman, Director of Foster Care and Adoption, and Cathy Allen, Program Coordinator, stated that the FFA will implement procedures to strive towards greater compliance.

On April 14, 2015, CAD conducted a follow-up visit and the FFA had implemented 7 of 8 recommendations. The FFA has not fully implemented developing timely and comprehensive updated NSPs. The FFA was advised to fully implement NSP procedures for ensuring timely and comprehensive NSPs. CAD will continue to assess implementation of the recommendations during the next compliance review. The OHCMD will provide ongoing assistance and technical support prior to the next review.

children'sbureau

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February 20, 2015

Amy Kim, CSA II
Department of Children and Family Services
CAD Contracts Compliance Section
3530 Wilshire Blvd., 4th Floor
Los Angeles, CA 90010

Re: Revised Corrective Action Plan—2014 Contract Compliance Review, Contract 07-021-12, Program No. 0252.01.03

Dear Ms. Kim,

Children's Bureau of Southern California (dba Children's Bureau) is committed to providing the highest quality services to the children we serve. The Department of Children and Family Services is a valued partner and the professionalism in which your team conducted themselves during the most recent Contract Compliance Review is appreciated. The following corrective action plan is submitted to address findings presented to Children's Bureau's for the licensed Foster Family Agency facilities located at 1910 Magnolia Ave., Los Angeles, CA 90007 (headquarters) and 1529 E. Palmdale Blvd., Suite 210, Palmdale, CA 93550 (satellite office).

Section III: Facility and Environment

20) Are the exterior and the grounds of the certified foster home well maintained?

FINDINGS: One family home had exposed sprinkler wires that had been capped off yet still visible. Monitor had CFPs cover the exposed wires with a box acquired form a hardware store.

CORRECTIVE ACTION PLAN: All FFA workers will participate in a review of the Children's Bureau's Safety Awareness and Assessment of Resource/Foster Family Home to be completed by March 30, 2015. An email was sent on 02/07/2015 to all FFA workers detailing findings and changes made to Safety Awareness and Assessment of Resource/Foster Family Home as part of CAP.

21) Are common areas/interior well maintained?

FINDINGS: Two homes did not have a carbon monoxide detector. Monitor had CFPs purchase and install for the home. One home had a missing knob on stove. CFP ordered and replaced the knob. All homes were revisited by the monitors and all homes were in compliance.

CORRECTIVE ACTION PLAN: During the Foster Care and Adoption Supervisor Meeting/Training on December 8, 2014, supervisors were informed each home must have carbon monoxide detector. Agency will develop and send a letter to all current CFP no later than February 27, 2015 informing them of the California state law requiring a carbon monoxide detector outside sleeping areas on each floor to be installed and verified by FFA social worker by March 30, 2015. FFA workers will verify installation and document inspection on a separate form or on the updated Safety Awareness and Assessment of Resource/Foster Family Home (now including inspection of carbon monoxide detectors). All FFA workers were sent an email on 02/07/2015 detailing findings and changes made to Safety Awareness and Assessment of Resource/Foster Family Home as part of CAP.

24) Does the certified foster home maintain adequate nutritious perishable and non-perishable foods and adhere to product "used or freeze by," "best by," "sell by," or expiration dates? (A minimum of three meals and between meal snacks)

FINDINGS: Three families had pantry and/or refrigerator had expired foods. CAD had CFP's discard of expired foods. Additionally, in one of the homes the emergency kit only contained water. UPDATE: 12/5/14, CAD verified that this home had sufficiently supplemented earthquake kit.

CORRECTIVE ACTION PLAN: Agency will develop and send a letter to all current CFP by February 27, 2015 informing them they must use, freeze or discard all perishable and non-perishable foods by the "use by", "sell by", "best by", or any other manufacture date per DCFS regulation and the emergency kit is sufficiently supplied. Children's Bureau Safety Awareness and Assessment of Resource/Foster Family Home form has been updated adding in "best by", "sell by" dates for perishable and non-perishable foods to be checked and sufficiently supplied emergency kit by FFA workers during the home safety check.
All FFA workers were sent an email on 02/07/2015 detailing findings and changes made to Safety Awareness and Assessment of Resource/Foster Family Home as part of CAP.

IV. Maintenance of Required Documentation and Service Delivery

29) Are the placed children progressing toward meeting the NSPs case goals (initial and updated)?

FINDINGS: One child not enough information in the file to address psychological developmental behavioral issues.

CORRECTIVE ACTION PLAN: Training on developing SMART goals will be provided to FFA workers by March 30, 2015.

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

FINDINGS: One child's NSP was sent via email to the county after due date with quarterly report and there was no fax confirmation (just fax sheet) proving NSP was sent when due.

CORRECTIVE ACTION PLAN: Staff will participate in a refresher training regarding the procedure to submit either a fax transmittal or print out of email sending the initial NSPs by contract requirements, currently by the 5th day after report due. Support staff will confirm fax transmittal or print out of email is attached when filing. If not provided, support staff will alert worker and supervisor. The training will be completed by March 30, 2015.

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

FINDINGS: Five children's NSPs were non-comprehensive for various specific reasons, but generally due to human error in filling out the forms, i.e., checking the box no for medication, but listing medication, achieved goals not included in subsequent report, etc. One child's first quarter NSP signed late.

CORRECTIVE ACTION PLAN: Staff will participate in a refresher training regarding information to be included in the NSP and the importance of accuracy. Supervisors will review all NSPs for accuracy before report is approved for distribution. The training will be completed by March 30, 2015.

32) When applicable, are children receiving necessary therapeutic services?

FINDINGS: One child's therapy log is missing one session.

CORRECTIVE ACTION PLAN: During the Foster Care and Adoption Supervisor Meeting/Training on December 8, 2014, supervisors were informed therapy attendance and missing appointments needed to be documented in the NSP. A review of documenting attendance and missed appointments required for therapeutic services in the file and/or NSP will be completed with FFA staff by March 30, 2015. Agency will develop and send a letter to all current CFP by February 27, 2015 informing them to keep a therapy log with appointments attended and missed with a reason to be turned into the agency.

VI. Health and Medical Needs

45) Are required follow-up dental examinations conducted timely?

FINDINGS: One child's six month dental exam occurred one month after required follow-up.

CORRECTIVE ACTION PLAN: FFA workers will be refreshed on requirements to monitor follow up dental examinations with the CFP to make appointments or document efforts to meet instructions on medical form by March 30, 2015.

IX. Personal Needs/Survival and Economic Well-Being

64) Does the certified foster parent encourage and assist children to update a life book or photo album?

FINDINGS: Siblings were sharing a life book/photo album residing in the same residence.

CORRECTIVE ACTION PLAN: FFA workers will be informed that every child must have their own life book/photo album by March 30, 2015.

At the Foster Care/Adoption Supervisor Meeting/Training on 02/09/15, a copy of this CAP was distributed and discussed. Supervisors will begin discussing with workers during their team meetings and individual supervision. A team meeting with all FFA staff facilitated by Director of Foster Care and Adoption, Program Coordinator, and Foster Care/Adoption Supervisors is scheduled for March 4, 2015 at which time findings and CAPs from the compliance review will be discussed. Any worker not present will participate in individual training with one of the above named facilitators to be completed by March 30, 2015. Team meeting agenda and sign in sheet will be maintained in staff training book verifying attendance.

Children's Bureau looks forward to continuing our partnership with the Department of Children and Family Services as members of the professional team in achieving safety, well-being, and permanency for our mutual clients. If you have further questions, please do not hesitate to contact me.

Sincerely,

Amy Heilman, LCSW
Director of Foster Care and Adoption Programs

Attachments: Safety Awareness and Assessment of Resource/Foster Family Home updated;
Email to all FFA staff to begin using updated Safety Awareness and Assessment of Resource/Foster Family Home dated 02/07/15;
Foster Care/Adoption Supervisor Meeting/Training Agenda and sign in sheet dated 12/08/15;
Foster Care/Adoption Supervisor Meeting/Training Agenda and sign in sheet dated 02/09/15;
Letter to resource families—English;
Letter to resource families—Spanish

children's bureau

June 23, 2015

Luis Moreno
Fiscal Compliance Administrator
County of Los Angeles
Department of Children and Family Services
Bureau of Contracts Services
3530 Wilshire Blvd, 5th Floor
Los Angeles, CA 90010

Re: Fiscal Corrective Action Plan (FCAP)

FCAT Section I – Financial Overview
Question No. 6

Processes have been established so the organization will meet the future submission deadlines.

FCAT Section III – Board of Directors
Question No. 13

Commencing immediately, the Executive Assistant to the CEO will ensure Board minutes are signed by the Board Secretary when approved.

FCAT Section IV – Cash/Expenditures
Question No. 25

The Accounting Manager has been trained in the procedure to reconcile any outstanding item timely and within a six month period.

Question No. 28

The fixed asset reporting schedules will be consolidated to reflect the requested funding source and serial numbers.

These changes are being implemented with immediate effect. The Accounting Manager will supervise and implement these changes and the Controller will be monitoring. There will be constant review of our accounting system to ensure that accounting best practices are being adopted and also in compliance with our DCFS contract.

Thank you,

Karen Haglund
Controller