



**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

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December 8, 2016

To: Supervisor Mark Ridley-Thomas, Chairman
Supervisor Hilda L. Solis
Supervisor Sheila Kuehl
Supervisor Janice Hahn
Supervisor Kathryn Barger

From: Philip L. Browning
Director

BIENVENIDOS CHILDREN'S CENTER FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of the Bienvenidos Children's Center Foster Family Agency (the FFA) in March 2016. The FFA has two licensed offices, one located in the First Supervisorial District and one located in San Bernardino County. Both offices provide services to the County of Los Angeles DCFS placed children. According to the FFA's Program Statement, its mission is "to provide short term emergency and longer term therapeutic foster care to children and siblings who cannot immediately return home to their families, and to work with all related parties toward reunification or some other appropriate permanency plan."

At the time of the review, the FFA supervised 247 DCFS placed children in 102 Certified Foster Homes (CFHs). The placed children's average length of placement was 21 months and their average age was eight.

SUMMARY

During CAD's Contract Compliance Review, the interviewed children generally reported: feeling safe in the FFA CFHs; being provided with good care and appropriate services; being comfortable in their placement environment; and treated with respect and dignity. The Certified Foster Parents (CFPs) reported being 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 applicable areas of CAD's Contract Compliance Review: Education and Workforce Readiness; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; 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 not making inquiries with the Out-of-Home Care Management Division (OHCMD) for historical information prior to certification; Facility and Environment, related to perishable and non-perishable food not properly maintained and weekly and clothing allowance logs not being maintained; Maintenance of Required Documentation and Service Delivery, related to the FFA Social Workers not obtaining or documenting efforts to obtain the DCFS Children's Social Worker's (CSW's) authorization to implement Needs and Services Plans (NSPs), CFPs not participating in the development of NSPs, Initial and Updated NSPs not being timely or comprehensive, and FFA Social Workers not contacting the DCFS CSWs monthly; Health and Medical Needs, related to follow-up medical examinations not being timely and initial and follow-up dental examinations not being timely; Personal Needs/Survival and Economic Well-Being, related to children not provided weekly allowances; and Personnel Records, related to an employee not having a timely health screening clearance.

Attached are the details of CAD's review.

REVIEW OF REPORT

On April 13, 2016, Sherry L. Rolls and Beatriz Meza, DCFS CAD, Elizabeth Villalobos and Nancy Armenta, DCFS OHCMD, held an exit conference with the FFA representatives: Stephanie Ivler, Director Foster Care Division; Jocelyn Corominas, Foster Care Manager; Elizabeth Mariscal, Recertification and Recruitment Coordinator; Cynthia Jimenez, Regional Office Supervisor; and Theresa Carrasco, Regional Officer Supervisor. The FFA representatives agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve the FFA's compliance with regulatory standards; and agreed 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 CCL.

The FFA provided the attached approved CAP, addressing the recommendations noted in this compliance report. The OHCMD provided technical assistance to the FFA on June 10, 2016.

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

PLB:KR
LTI:slr

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Ritchie L. Geisel, President and Chief Executive Officer, Bienvenidos Children's Center
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Lenora Scott, Regional Manager, Community Care Licensing Division

**BIENVENIDOS CHILDREN'S CENTER FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE REVIEW SUMMARY**

255 N. San Gabriel Boulevard
Pasadena, California 91107
License Number: 197805967

9828 Central Avenue
Montclair, California 91763
License Number: 366408173

	Contract Compliance Review	Findings: March 2016
I	<p><u>Licensure/Contract Requirements</u> (7 Elements)</p> <ol style="list-style-type: none"> 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 (CFPs) Whole Foster Family Home Payments 7. FFA Conducts an Assessment of CFP Prior to Placement of Two or More Children 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance
II	<p><u>Certified Foster Homes</u> (12 Elements)</p> <ol style="list-style-type: none"> 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 from Federal Bureau of Investigations (FBI), Department of Justice (DOJ), Child Abuse Central Index (CACI) Prior to Certification 4. Timely, Completed, Signed Criminal Background Statement 5. Health Screening & Tuberculosis (TB) Test Prior to Certification 6. All Required Training Prior to Certification 7. Certificate of Approval on File/Including Capacity 8. Safety Inspection Completed At Least Every Six Months or Per Approved Program Statement 9. Completed Annual Training Hours for Re-certification and Current CPR/First-Aid/Water Safety Certificates 10. Current Driver's License/Auto Insurance/Annual Vehicle Maintenance Documentation for CFPs and Designated Drivers 11. Criminal Clearances and Health Screening/Driver's 	<ol style="list-style-type: none"> 1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10. Full Compliance 11. Full Compliance

BIENVENIDOS CHILDREN'S CENTER FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

	<p>License/CPR/FBI/DOJ/CACI/Auto Insurance for Other Adults in the Home</p> <p>12. FFA Assists CFPs in Providing Transportation Needs</p>	<p>12. Full Compliance</p>
III	<p><u>Facility and Environment</u> (7 Elements)</p> <p>1. Exterior/Grounds Well Maintained</p> <p>2. Common Areas Well Maintained</p> <p>3. Children's Bedrooms/Interior Well Maintained</p> <p>4. Sufficient and Appropriate Educational Resources</p> <p>5. Adequate Perishable and Non-Perishable Food</p> <p>6. CFP Conducted Disaster Drills and Documentation Maintained</p> <p>7. Money and Clothing Allowance Logs Maintained</p>	<p>1. Full Compliance</p> <p>2. Full Compliance</p> <p>3. Full Compliance</p> <p>4. Full Compliance</p> <p>5. Improvement Needed</p> <p>6. Full Compliance</p> <p>7. Improvement Needed</p>
IV	<p><u>Maintenance of Required Documentation and Service Delivery</u> (10 Elements)</p> <p>1. FFA Obtains or Documents Efforts to Obtain DCFS Children's Social Worker's (CSW's) Authorization to Implement NSPs</p> <p>2. CFPs Participated in Development of the NSPs</p> <p>3. Children Progressing Towards Meeting NSP Goals</p> <p>4. FFA Social Workers Develop Timely, Comprehensive Initial NSP with the Child's Participation</p> <p>5. FFA Social Workers Develop Timely, Comprehensive Updated NSPs with the Child's Participation</p> <p>6. Therapeutic Services Received</p> <p>7. Recommended Assessments/Evaluations Implemented</p> <p>8. DCFS Children's Social Worker's Monthly Contacts Documented in Child's Case File</p> <p>9. FFA Social Workers Develop Timely, Comprehensive Quarterly Reports</p> <p>10. FFA Social Workers Conduct Required Visits</p>	<p>1. Improvement Needed</p> <p>2. Improvement Needed</p> <p>3. Full Compliance</p> <p>4. Improvement Needed</p> <p>5. Improvement Needed</p> <p>6. Full Compliance</p> <p>7. Full Compliance</p> <p>8. Improvement Needed</p> <p>9. Full Compliance</p> <p>10. Full Compliance</p>

<p>V</p>	<p><u>Education and Workforce Readiness</u> (5 Elements)</p> <ol style="list-style-type: none"> 1. Children Enrolled in School Within Three School Days 2. Children Attend School as Required and FFA Facilitates in Meeting Children's Educational Goals 3. Current Children's Report Cards/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 	<p>Full Compliance (All)</p>
<p>VI</p>	<p><u>Health and Medical Needs</u> (4 Elements)</p> <ol style="list-style-type: none"> 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 	<ol style="list-style-type: none"> 1. Full Compliance 2. Improvement Needed 3. Improvement Needed 4. Improvement Needed
<p>VII</p>	<p><u>Psychotropic Medication</u> (2 Elements)</p> <ol style="list-style-type: none"> 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review 	<p>Full Compliance (All)</p>
<p>VIII</p>	<p><u>Personal Rights and Social/Emotional Well-Being</u> (10 Elements)</p> <ol style="list-style-type: none"> 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 Extracurricular Activities, Enrichment and Social Activities at the CFH, School and Community 	<p>Full Compliance (All)</p>

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IX	<p><u>Personal Needs/Survival and Economic Well-Being</u> (7 Elements)</p> <ol style="list-style-type: none"> 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 5. Minimum Weekly Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement and Assistance with a Life Book or Photo Album 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Improvement Needed 6. Full Compliance 7. Full Compliance
X	<p><u>Discharged Children</u> (3 Elements)</p> <ol style="list-style-type: none"> 1. Completed Discharge Summary 2. Attempts to Stabilize Children's Placement 3. Child Completed High School (if applicable) 	<p>Full Compliance (All)</p>
XI	<p><u>Personnel Records</u> (9 Elements)</p> <ol style="list-style-type: none"> 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 Driver's License 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 	<ol style="list-style-type: none"> 1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance

**BIENVENIDOS CHILDREN'S CENTER FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE REVIEW
FISCAL YEAR 2015-2016**

SCOPE OF REVIEW

The following report is based on a "point in time" review. This compliance report addresses findings noted during the March 2016 review. The purpose of this review was to assess the Bienvenidos Children's Center Foster Family Agency's (the FFA's) compliance with its County contract and State regulations and included a review of the FFA's Program Statement, as well as internal administrative 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 Medication,
- Personal Rights and Social/Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children,
- Personnel Records.

For the purpose of this review, 12 placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed 10 of the children as two children were either pre-verbal or too young to be interviewed. During the home visits, the children were observed to be comfortable and well cared for in the Certified Foster Homes (CFHs), and the Certified Foster Parents (CFPs) were observed to be responsive to the children's needs. CAD reviewed 12 case files to assess the level of care and services the children received. Additionally, four discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, one placed child was prescribed psychotropic medication. This child's case file was reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed four CFP files and five staff files for compliance with Title 22 Regulations and County contract requirements. Site visits were conducted to the FFA and the CFHs to assess the quality of care and supervision provided to the placed children.

CONTRACTUAL COMPLIANCE

CAD found the following seven areas out of compliance:

Licensure/Contract Requirements

- Community Care Licensing (CCL) citations.

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CCL cited the FFA for a complaint received by CCL on October 1, 2015, regarding a CFP who failed to properly secure a child in the car seat. The FFA provided training to the CFP on November 20, 2015, and the Plan of Correction (POC) was cleared by CCL on November 25, 2015. An investigation was completed by the Department of Children and Family Services (DCFS) Out-of-Home Care Investigations Section (OHCIS) and the allegations of general neglect were unfounded.

CCL cited the FFA during an unannounced visit on December 10, 2015, regarding a CFP not reporting an injury sustained by a child who got angry when the CFP did not give him permission to visit his brother. CCL requested the FFA to provide a POC and Reporting Requirements training to the CFP, which was completed on January 5, 2016. The POC was cleared by CCL on February 3, 2016. OHCIS did not investigate this incident.

Recommendation:

The FFA's management shall ensure that:

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

Certified Foster Homes

- Agency inquiries with the Out-of-Home Care Management Division (OHCMD) for historical information were not conducted prior to certification.

The FFA did not request historical information from the OHCMD prior to a CFP being certified.

Recommendation:

The FFA's management shall ensure that:

2. FFA requests and obtains historical information from the OHCMD prior to certification.

Facility and Environment

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

Expired food was found in a CFH. CAD immediately had the CFP discard the expired items.

- Appropriate monetary and clothing allowance logs were not maintained.

Four of twelve children's case files did not have adequate clothing logs, one did not have adequate monetary allowance logs and three did not have adequate clothing and monetary allowance logs.

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Two children's clothing allowance logs had receipts that did not match the log's month, included receipts with no purchase dates, were missing receipts for one month, missing logs for three months, and receipts showed the CFP shopped for a child's clothes at a thrift store. On March 15, 2016 and May 13, 2016, CAD received proof of all weekly allowance being properly reimbursed.

On March 8, 2016, during the review, CAD informed the FFA that CFPs are not to shop for children's clothes at thrift stores. The FFA acknowledged this requirement.

During the exit conference with the FFA representatives, CAD discussed these findings and the need to ensure that CFPs are aware of how to submit appropriate and comprehensive monetary and clothing allowance logs.

Recommendations:

The FFA's management shall ensure that:

3. Perishable and non-perishable food are properly maintained.
4. Appropriate and comprehensive monetary and clothing allowance logs are maintained.

Maintenance of Required Documentation and Service Delivery

- The FFA did not obtain or document efforts to obtain the DCFS Children's Social Worker's (CSW's) authorization to implement Needs and Services Plans (NSPs).

Fourteen of forty-three NSPs reviewed did not have the DCFS CSW's signature or sufficient documentation of the FFA's efforts to obtain the DCFS CSW's signature.

- CFPs did not participate in the development of the NSPs.

Nine of forty-three NSPs reviewed did not have the CFPs' signatures.

- FFA Social Workers did not develop timely and comprehensive Initial NSPs.

Five of nine Initial NSPs reviewed were not timely and/or comprehensive.

Four children's NSPs, dated June 29, 2015, were not signed by the DCFS CSWs and no attempts to obtain the DCFS CSWs' signatures were documented in the case files.

A child's NSP dated February 15, 2016, was signed by the child on March 2, 2016. The NSP was not comprehensive as it did not record the correct date of placement. In addition, one of the goals was for the child to make more friends; however, this NSP also noted that the child has many friends.

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- FFA Social Workers did not develop timely and comprehensive Updated NSPs.

Twenty-two of thirty-four Updated NSPs reviewed were not timely and/or comprehensive.

A child had four NSPs that were not comprehensive and/or timely. The NSP dated March 1, 2015, was not comprehensive as the date was incorrect on the cover page, and a goal was modified, but it did not include a new projected completion date. Another goal listed was for the CFP to schedule a follow-up dental appointment. The NSP dated June 1, 2015, was not comprehensive as a goal was listed for the CFP to schedule a follow-up dental appointment. The NSP dated September 1, 2015, was not timely as the CFP signed it on September 9, 2015. The NSP dated December 1, 2015, was not comprehensive as a goal was modified but did not include a new projected completion date.

A child had two NSPs that were not comprehensive. The NSP dated November 12, 2015, listed a goal for the CFP to schedule a follow-up dental appointment. The NSP dated February 12, 2016, listed the name of the wrong CFP on the cover page, had two goals that were modified (but the dates of modification were not included) and did not list the dates for the child's mental health visits.

A child had two NSPs that were not comprehensive. The NSP dated November 12, 2015, listed a goal for the CFP to schedule an annual physical examination for the child. The NSP dated February 12, 2016, did not list the specific dates for the child's mental health visits.

A child had two NSPs that were not comprehensive. The NSP dated November 12, 2015, had a goal for the child to attend a follow-up dental examination. The NSP dated February 12, 2016, had a goal that was modified but did not include reasons for modification.

A child had two NSPs that were not comprehensive. The NSPs dated August 29, 2015, and November 29, 2015, did not include dates of contact with the DCFS CSW.

A child's NSP dated November 29, 2015, was not comprehensive as it did not include the dates of contact with the DCFS CSW.

A child had two NSPs that were not comprehensive. The NSP dated March 1, 2015, did not list the dates for the child's mental health visits. In addition, the NSP had a goal for the child to attend a follow-up dental examination and another goal for the child to attend a dental examination.

A child's NSP dated June 1, 2015, was not comprehensive as it listed a goal for the child to attend an annual medical examination.

A child had three NSPs that were not timely and comprehensive. The NSP dated August 29, 2015, did not include efforts to obtain the DCFS CSW's signature, and had a goal for the child to attend a dental examination and another goal to attend an annual medical examination. The NSP dated November 29, 2015, did not include efforts to obtain the DCFS CSW's signature and listed incorrect review dates on the cover page. The NSP dated

February 29, 2016, did not include efforts to obtain the DCFS CSW's signature and did not list the dates for the child's mental health visits.

A child had three NSPs that were not timely and comprehensive. A NSP dated August 29, 2015, did not include efforts to obtain the DCFS CSW's signature and had two goals that were identical in language. The NSPs dated November 29, 2015 and February 29, 2016, did not include efforts to obtain the DCFS CSW's signature and listed incorrect review dates on the cover page.

- DCFS CSWs' monthly contacts were not documented in case files.

For two children, the FFA Social Workers did not document contact with the DCFS CSWs for four months.

Recommendations:

The FFA's management shall ensure that:

5. FFA obtains or documents efforts to obtain the DCFS CSWs' authorization to implement NSPs.
6. CFPs participate in the development of NSPs.
7. FFA Social Workers develop timely and comprehensive Initial NSPs.
8. FFA Social Workers develop timely and comprehensive Updated NSPs.
9. DCFS CSWs' monthly contacts are appropriately documented in the case file.

Health and Medical Needs

- A follow-up medical examination was not conducted timely.

A follow-up medical appointment was not conducted timely for a child. On January 27, 2016, the doctor prescribed two follow-up examinations to occur seven and fourteen days from the appointment date. The child was not seen for the seven day follow-up examination.

- Initial dental examinations were not conducted timely.

Two children's Initial dental appointments occurred more than 30 days after placement.

- A follow-up dental examination was not conducted timely.

A follow-up dental appointment was not conducted timely for a child. An appointment due by July 2015, did not occur until October 16, 2015.

Recommendations:

The FFA's management shall ensure that:

10. Follow-up medical examinations are conducted timely.
11. Initial dental examinations are conducted timely.
12. Follow-up dental examinations are conducted timely.

Personal Needs/Survival and Economic Well-Being

- Children were not provided weekly monetary allowances.

Three children were not consistently provided their weekly monetary allowances and one of these children did not receive the allotted amount of allowance for their age. On March 15, 2016 and May 13, 2016, CAD received proof of the proper weekly allowance disbursements to the children.

Recommendation:

The FFA's management shall ensure that:

13. Children are provided weekly monetary allowances.

Personnel Records

- An employee did not receive a timely health screening clearance.

An employee hired on December 4, 2014, did not receive a timely health screening clearance. On May 13, 2016, the FFA provided proof of the health screening for this employee.

Recommendation:

The FFA's management shall ensure that:

14. Employees receive timely health screening clearances.

**PRIOR YEAR FOLLOW-UP FROM DCFS CAD'S FOSTER FAMILY AGENCY CONTRACT
COMPLIANCE REVIEW**

CAD's last compliance reported dated April 22, 2015, identified 5 recommendations.

Results:

Based on the results of the current review, the FFA fully implemented 1 of 5 previous recommendations for which the FFA was to ensure that:

- FFA Social Workers develop timely, comprehensive, quarterly reports.

Based on the results of the current review, the FFA did not implement 4 of 5 recommendations for which the FFA was to ensure that:

- The FFA is in compliance with Title 22 Regulations and free of CCL citations.
- FFA Social Workers develop timely, comprehensive, Initial NSPs with the child's participation.
- FFA Social Workers develop timely, comprehensive, Updated NSPs with the child's participation.
- Required follow-up medical examinations are conducted timely.

Recommendation:

The FFA's management shall ensure that:

15. The outstanding recommendations from the prior report noted in this report as Recommendation Numbers 1, 7, 8 and 10 are fully implemented.

At the exit conference, the FFA representative stated their desire to remain in compliance with Title 22 Regulations and contractual requirements. The FFA made efforts to utilize information from the CAD review to strive towards greater overall compliance. The FFA provided a listing of their new protocol in the attached detail. The FFA will consult with the OHCMD for additional support and technical assistance and CAD will assess for implementation of the recommendations during the next review.



August 19, 2016

Los Angeles County Department of Children & Family Services
Contracts Administration Division - Contracts Compliance Section
9320 Telstar Avenue Suite 216
El Monte, CA 91731
By email with hard copy follow up

Attn: Sherry L. Rolls, CSA I

Re: 2015-2016 Foster Family Agency Monitoring Review; Amended Corrective Action Plan as requested
7/5/2016

Bienvenidos submits the following Corrective Action Plan addressing the Monitoring Review Field Exit Summary for the 2015-2016 performance year.

I. LICENSURE/CONTRACT REQUIREMENTS

4. Is the Agency free of substantiated Community Care Licensing complaints' reports on safety and physical plant deficiencies since the last review? (SAFETY)

In addition to being available for consultation and support on a daily basis, the Director of Foster Care & Adoptions meets or consults on a weekly basis with the Regional Office Supervisors (ROSeS) responsible for monitoring and guiding the direct care social workers. The ROSeS are responsible for reviewing and addressing concerns that direct care staff have raised and for evaluating circumstances that might trigger a complaint, or the circumstances that have in fact generated a complaint. In circumstances requiring an immediate "intervention", corrective action will be taken. In addition, in consultation with the Director and during the weekly meetings, the ROSeS will review potential or actual complaints to determine whether there are patterns or similarities that indicate staff and/or Resource Families need additional training. If so, training will be provided to address the issue/s.

In parallel, the Certification Committee will meet weekly to discuss prospective applicants as well as concerns that may have arisen about specific Resource Families. The Committee itself may then request that training be scheduled.

Staff will attend monthly mandatory in-service training. Post-certification training will be provided to Resource Parents on a quarterly basis. Individual review and training will be provided directly to staff and/or Resource Parents by direct care staff or supervisory staff depending upon the nature of the concern on an as-needed basis.

II. CERTIFIED FOSTER HOMES

9. Does the foster parent case record include the agency's inquiry with OHCMC for historical information prior to certification and reference check? (SAFETY)

Under the direct control of the Quality Assurance and Certification Coordinator, the Division maintains a procedure for carrying out and documenting its inquiries with OHCMC and will be diligent in adhering to this procedure.

III. FACILITY AND ENVIRONMENT

24. Does the certified foster home maintain adequate nutritious 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) (WELL-BEING)

Following receipt of the Field Review Exit Summary, on May 16, 2016, the Regional Office Supervisors led a mandatory in-service training for the foster care social workers addressing the Findings and each point highlighted in the Summary. This included the importance of monitoring for adequate and nutritious perishable and non-perishable, non-expired foods periodically and at the quarterly home inspection.

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

The assigned foster care social worker will monitor that clothing allowance funds are used to purchase clothing each month, that complete receipts are submitted, and that allowances are disbursed appropriately. No used clothing is to be purchased with these funds or provided to foster children or youth. The FCSW will monitor that the clothing and allowance logs are fully and properly completed and maintained monthly. This process was communicated to the ROSEs and the foster care social workers following receipt of the Monitoring Review Exit Summary and reinforced during the mandatory in-service training referenced above. The social workers were instructed to similarly communicate with each of their Resource Parents and will report back to the Regional Office Supervisors.

IV. MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

27. Did the FFA obtain or document efforts to obtain the County worker's authorization to implement the NSP? (WELL-BEING)
28. Do certified foster parents participate in development of the NSPs? (WELL-BEING)
30. Did the FFA social worker develop timely, comprehensive, initial (NSPs) with the participation of the developmentally age-appropriate child? (WELL-BEING)
31. Did the FFA social worker develop timely, comprehensive, updated (NSPs) with the participation of the developmentally age-appropriate child? (WELL-BEING)

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

Following receipt of the Field Review Exit Summary, on May 16, 2016, the Regional Office Supervisors revised the existing protocols addressing timely development and appropriate content of the NSPs, and contact with the CSW. The Regional Office Supervisors led a mandatory in-service training for the foster care social workers addressing the Findings and each point highlighted in the Summary on May 16, 2016. This in-service training included a workshop to practice completing a satisfactory NSP. On June 9, 2016, OHCMD CSA Elizabeth Villalobos will meet with the Supervisors and foster care social workers to review the QAR, the Findings and the requirements for the NSP. The Regional Office Supervisors will follow up twice monthly during weekly team meetings with the social workers to provide guidance and practice, as well as randomly reviewing NSPs on an individual basis and providing the social workers with any necessary support. In addition, the Regional Office Supervisors will utilize the attached Quarterly Report Review form to monitor compliance with the protocols. Copies of in-service training agendas and sign-in sheets evidencing training will be on file. A copy of the form letter to document attempts to obtain CSW signature and a copy of the Quarterly Report Review form are attached to this CAP.

VI. HEALTH AND MEDICAL NEEDS

43. Are required follow-up medical examinations conducted in a timely manner? (WELL-BEING)

44. Are initial dental examinations conducted timely (WELL-BEING)

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

Following receipt of the Field Review Exit Summary, on May 16, 2016, the Regional Office Supervisors led a mandatory in-service training for the foster care social workers addressing the Findings and each point addressed in the Summary. This included reinforcing the importance of timely initial and follow up medical and dental examinations. The social workers were instructed to similarly communicate with each of their Resource Parents and will report back to the Regional Office Supervisors.

IX. PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

62. Are children always provided with weekly monetary allowances? (SELF-SUFFICIENCY)

Following receipt of the Field Review Exit Summary, on May 16, 2016, the Regional Office Supervisors led a mandatory in-service training for the foster care social workers addressing the Findings and each point addressed in the Summary. This included reinforcing the importance of monitoring disbursement of weekly allowances to the children and timely completion of the weekly allowance logs. The social workers were instructed to similarly communicate with each of their Resource Parents and will report back to the Regional Office Supervisors.

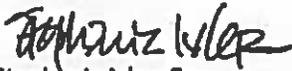
IX. PERSONNEL RECORDS

71. Have employees received timely health screenings/TB clearances? (SAFETY)

All staff, including foster care social workers who are independent contractors, will receive timely health screenings/TB clearances. Bienvenidos Human Resources Department will ensure that this process is timely completed.

Please do not hesitate to contact me directly with any further questions or concerns.

Very truly yours,



Stephanie Ivler, Esq.

Director, Foster Care & Adoptions Division