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DEPARTMENT OF CHILDREN AND FAMILY SERVICES
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August 13, 2015

To: Supervisor Michael D. Antonovich, Mayor
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From: Philip L. Browning
Director

CHILDREN'S INSTITUTE FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Contract Administration Division (CAD) conducted a contract compliance review of Children's Institute, Foster Family Agency (the FFA) in April 2014. The FFA has one licensed office located in the Fourth Supervisorial District and provides services to the County of Los Angeles DCFS placed children. According to the FFA's program statement, its stated purpose is "to promote the well-being of vulnerable children by healing those harmed by abuse or neglect, helping families provide safe, nurturing homes and the resources their children need to thrive, and advancing innovative programs and policies that contribute to the welfare of children."

At the time of the review, the FFA supervised 37 DCFS placed children in 34 Certified Foster Homes (CFHs). The placed children's overall average length of placement was eight months and their average age was seven.

SUMMARY

During CAD's review, the interviewed children generally reported feeling safe in the FFAs CFHs; having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity. The Certified Foster Parents (CFP) reported they were supported by the FFA staff in their efforts to provide care, supervision and service delivery to the children placed in their homes.

The FFA was in full compliance with 5 of 11 sections of our contract compliance review in the areas of Licensure/Contract Requirements, Education and Workforce Readiness; Health and Medical Needs, Psychotropic Medication and Personnel Records.

CAD noted deficiencies in the areas of: Certified Foster Homes, related to not having contacted the Out-of-Home Care Management Division (OHCMD) for historical information; Facility and Environment, related to common areas and children's bedrooms not being well maintained,

insufficient educational materials, expired food in this home, and clothing allowance logs not being maintained; Maintenance of Required Documentation and Service Delivery, related to documenting efforts to obtain the County Children's Social Worker's (CSW's) authorization to implement the Needs and Services Plan (NSP), the CFPs did not participate in the development of the NSP's, the FFA Social Worker did not develop timely updated NSP's, monthly contact with the DCFS CSW were not documented and FFA Social Workers did not develop timely, comprehensive quarterly reports; Personal Rights and Social/ Emotional Well-Being, related to one child not being aware of their right to refuse medication; Personal Needs/ Survival and Economic Well-Being, related to one child not being aware of the amount they received for their monthly clothing allowance and children were not encouraged/assisted with Life Book/Photo Album; and Discharged Children related to incomplete discharge summaries.

Attached are the details of our review.

REVIEW OF REPORT

On June 20, 2014, DCFS CAD staff Pamela Carolina, Sherry Rolls and Amy Kim, and DCFS OHCMD staff Greta Waltersheld held an Exit Conference with FFA representative, Celia Anthony, Foster Care Director. The FFA representative agreed with the review findings and recommendations, was receptive to implementing systemic changes to improve compliance with regulatory standards and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this report has been sent to the Auditor-Controller and Community Care Licensing (CCL).

The FFA provided the attached approved CAP addressing the recommendations noted in this compliance report. On April 6, 2015, CAD completed a follow-up visit and verified implementation of the CAP addressing the recommendations in this report. The OCHMD will provide on-going technical assistance prior to the next review.

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

PLB:EM
LTI:pc

Attachments

cc: Sachi A. Hamai, Interim Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Mary Emmons, Chief Executive Officer, Children's Institute Inc.
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Lenora Scott, Regional Manager, Community Care Licensing Division

CHILDREN'S INSTITUTE FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

4300 Long Beach Blvd. #700
Long Beach, CA. 90807
License Number: 197805117

	Contract Compliance Monitoring Review	Findings: April 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 (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 Inspection Completed At Least Every Six Months or Per Approved Program Statement 9. Completed Annual Training Hours for Re-certification and Current CPR/First-Aid/Water Safety Certificates 10. Current CDL/Auto Insurance/Annual Vehicle Maintenance Documentation for CFPs and Designated Drivers, 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. 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 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. Improvement Needed
	6. CFP Conduct 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. Improvement Needed
	2. CFPs Participated in Development of the NSPs	2. Improvement Needed
	3. Children Progressing Towards Meeting NSP Goals	3. Full Compliance
	4. FFA Social Workers Develop Timely, Comprehensive Initial NSPs with Child's Participation	4. Full Compliance
	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's 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 Their 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 2. Follow-Up Medical Exams Conducted Timely 3. Initial Dental Exams Conducted Timely 4. Follow-Up Dental Exams Conducted Timely	Full Compliance (All)
VII	**Psychotropic Medications** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	Full Compliance (All)
VIII	**Personal Rights and Social Emotional Well-Being** (10 Elements) 1. Children Informed of Agency's Policies and Procedures 2. Children Feel Safe in the CFP Home 3. CFPs' Efforts to Provide Nutritious Meals and Snacks 4. CFPs Treat Children with Respect and Dignity 5. Children Allowed Private Visits, Calls and to Receive Correspondence 6. Children Free to Attend or Not Attend Religious Services/Activities of Their 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	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. Full Compliance 10. Full Compliance
IX	**Personal Needs/Survival and Economic Well-Being** (7 Elements) 1. $50 Clothing Allowance Provided in Accordance with FFA Program Statement 2. On-going Clothing Inventories of Adequate Quantity and Quality 3. Children's Involvement in Selection of Their Clothing 4. Provision of Sufficient Supply of Clean Towels and Personal Care Items Meeting Ethnic Needs 5. Minimum Weekly Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement/Assistance with Life Book/Photo Album	1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Improvement Needed

X	**Discharged Children** (3 Elements) 1. Completed Discharge Summary 2. Attempts to Stabilize Children's Placement 3. Child Completed High School (if applicable)	1. Improvement Needed 2. Full Compliance 3. Not Applicable
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 to Exceed a Total of 15 Children	Full Compliance (All)

CHILDREN'S INSTITUTE 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 addresses findings noted during the April 2014 monitoring review. The purpose of this review was to assess Children's Institute 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 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 purposes of this review, six 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. However, one child's interview was limited due to the child's young age and attention span. CAD observed this child in the Certified Foster Home (CFH). The child was observed by CAD to appear comfortable in the CFH setting with the Certified Foster Parent (CFP) who was attuned to the needs of the child. CAD reviewed all six case files to assess the care and services the children received. Additionally, three discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, no sampled children were prescribed psychotropic medication.

CAD reviewed five staff files for compliance with Title 22 Regulations and County contract requirements. Interviews were conducted with CFPs to access the quality of care and supervision provided to the placed children.

CONTRACTUAL COMPLIANCE

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

Certified Foster Homes

- The FFA's inquiry with Out-of-Home Care Management Division (OCHMD) for historical information prior to certification was not conducted.

The FFA did not have records of having requested or received historical information for one CFP prior to certification for one of the two files reviewed. This was brought to the immediate attention

of the FFA Administrator. During the Exit Conference, the FFA representative acknowledged it is the FFA's policy to request historical information from OHCMD on all potential CFPs prior to certification. The FFA stated an inquiry with OHCMD for the historical information on this particular CFH was made prior to certification and they will ensure that all CFPs have the historical information prior to certification and that it is documented. CAD conducted a follow-up visit on April 6, 2015, and it was verified that historical information from OHCMD had been requested and received for this CFP.

Recommendation:

The FFA management shall ensure:

1. The FFA's inquiry with OHCMD for historical information is conducted prior to certification.

Facility and Environment

- Common Areas were not maintained.

In CFH #1, sharp knives were not properly stored and were easily accessible by the children. CAD immediately brought this to the CFP's attention and the knives were moved to a locked cabinet.

- Children's bedrooms were not well maintained.

In CFH #1, the carpet and the curtains in the boys' bedroom were dirty and required cleaning.

- Sufficient and appropriate educational resources not maintained.

In CFH #1, there were no age appropriate books and there was no access to educational resources or tools for the children.

- Adequate non-perishable food was not maintained.

In CFH #1, there were expired canned goods in the pantry. The CFP immediately threw out the expired canned goods.

- Clothing Allowance logs were not maintained.

In CFH #1 and in CFH #2, the clothing allowance logs were not properly maintained. The clothing receipts did not correspond to the actual month's spending, but rather to the prior month's spending, with no records of all clothing purchases.

During the Exit Conference, the FFA representative stated that they would follow-up with the specific FFA Social Worker (SW) and CFPs. The FFA will create a monthly assessment sheet for use by all of its FFA SWs to use on their home visits once a month to ensure that the CFPs are in compliance with all regulations.

CAD conducted a follow-up visit on August 12, 2014, to CFH #1 and verified the carpet was cleaned and that the curtains were replaced in the boy's bedroom. Age appropriate books and educational resources were also observed in the home and available for the children's use.

On April 4, 2015, CAD conducted an additional follow-up visit to the FFA and verified the implementation and use of the monthly assessment sheet to ensure all CFHs are in compliance with all regulations.

Recommendations:

The FFA management shall ensure that:

2. Common areas are well maintained.

3. Children's bedrooms are well maintained.

4. Sufficient and appropriate educational resources are available.

5. Adequate perishable and non-perishable food is maintained.

6. Money and clothing allowance logs are maintained.

Maintenance of Required Documentation and Service Delivery

- Efforts to obtain County Children's Social Workers (CSW) authorization to implement NSP's were not documented.

For two of six children, the FFA did not document efforts to obtain the DCFS CSW's authorization to implement the NSPs. In one instance, the NSP was due on December 14, 2013, and in another the NSP was due March 14, 2014. For both of these NSPs, there were no documented efforts to obtain the CSW's authorization to implement the NSP by fax, email or telephone in the case file.

- CFPs did not participate in the development of NSPs.

For three children, their CFP stated she did not participate in the development of their initial NSPs; however, she signed them as required. One NSP was signed on October 25, 2013, and two others were signed on December 14, 2013.

- FFA SW did not develop timely updated NSPs.

Two of fifteen updated NSPs reviewed were not developed timely. Two of the updated NSPs were due on April 25, 2013, but not completed until May 23, 2013.

- County CSW's monthly contacts were not documented in child's case file.

For all six children files reviewed, there was no documentation in their case files to verify that there had been any monthly contact with the DCFS CSW.

During the Exit Conference, the FFA representative stated that the documentation of the monthly contacts would be provided. To date, this documentation has not been provided. CAD conducted a follow-up visit on April 6, 2015, and verified in two selected case files that the CSW's monthly contacts are now being documented.

- FFA SW did not develop timely Quarterly Reports.

Six of eight quarterly reports reviewed were not developed timely. All six quarterly reports were completed more than ten days after their due dates.

Recommendations:

The FFA management shall ensure:

7. FFA obtains or documents efforts to obtain DCFS CSW's authorization to implement NSPs.
8. CFPs participate in the development of the NSPs.
9. FFA SW develop timely updated NSPs.
10. County CSW monthly contacts are documented in the children's case file.
11. FFA SW develop timely Quarterly reports.

Personal Rights and Social/ Emotional Well-Being

- Children not informed about their Right to Refuse Medication.

One of six children interviewed stated they were not aware of their right to refuse medication. This child was not prescribed any medication at the time of the review.

During the Exit Conference, the FFA Representative stated that upon initial placement, all CFPs explain all rules and regulations to age appropriate children and would re-iterate to the CFPs about the importance of ensuring that each child is aware of their rights to refuse medication.

Recommendation:

The FFA's management shall ensure that:

12. Children are informed about their right to refuse medication.

Personal Needs/Survival and Economic Well-Being

- Clothing allowance in accordance with the FFA Program Statement was not provided.

Although clothing allowance logs reflected that a minimum of $50 a month was spent for the children, one child was not aware of the amount to be received monthly for their clothing allowance.

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

All six children sampled did not have a Life Book or Photo Album. There were photographs of the children available, but they had not been organized or placed into a Life Book or Photo Album.

During the Exit Conference, the FFA representative stated that they would follow-up with the CFPs on the importance of maintaining Life Books/Photo Albums for the children. The FFA will add this element to their monthly assessment sheet used by FFA SWs to ensure CFHs are in compliance with all regulations.

CAD conducted a follow-up visit to CFH #1 in August 2014, and verified that the three placed children had Life Books or Photo Albums. On April 6, 2015, CAD conducted a follow-up visit to the FFA and verified a sample Life Book was developed and used in training the CFPs. It was also verified that this element has been added to the monthly assessment sheet used by the FFA SWs to ensure the Life Books are created and maintained for all placed children.

Recommendations:

The FFA's management shall ensure that:

13. Clothing Allowance is provided in accordance with the FFA Program Statement.

14. CFPs encourage and assist with a Life Book/Photo Album.

Discharged Children

- Discharge Summary was not completed.

In two of four discharged summaries reviewed, the summary was not properly completed. One child's summary was not completed within 30 days of leaving the FFA. The child was discharged on November 26, 2013 and the summary was not completed until February 14, 2014. Another child's discharge summary did not contain any information regarding the permanency plan, as required.

During the Exit Conference, the FFA representative stated that the discharge summaries reviewed were not completed correctly for these two cases. The discharge summaries will be discussed and reviewed during supervision for thoroughness and accuracy.

On April 6, 2015, CAD conducted a follow-up visit and reviewed a discharge summary. This summary was correctly completed. It was also confirmed the FFA implemented a new protocol for a supervisory review of the discharged summaries.

Recommendation:

The FFA management shall ensure:

15. Discharge summaries are completed.

PRIOR YEAR FOLLOW-UP FROM DCFS OHCMD's FFA CONTRACT COMPLIANCE MONITORING REVIEW

The OHCMD's last compliance report dated, November 12, 2013, identified 11 recommendations.

Results

Based on the result of the current review, the FFA had fully implemented 8 of 11 recommendations for which they were to ensure:

- The FFA is in full compliance with Title 22 Regulations, free of CCL Citations.
- Safety inspections are completed at least every six months.
- CFPs complete annual training hours.
- Children's progress towards NSP goals is documented.
- Initial NSPs are comprehensive and include all elements in accordance with the NSP template.
- They facilitate meeting educational goals of each child.
- Services are provided to improve the children's academic performance.
- Age-appropriate children are involved in the selection of their clothing.

Based on the current review, the FFA did not fully implement 3 previous recommendations for which they were to ensure:

- Children have access to educational resources and supplies.
- NSP Quarterly Reports are completed in a timely manner.
- All children are encouraged and assisted in updating a Life Book/Photo Album.

Recommendation:

16. The outstanding recommendations from the 2013-2014 monitoring report dated November 12, 2013, which are noted in this report as Recommendations 4, 11, and 14 are fully implemented.

At the Exit Conference, the FFA representative expressed the desire to remain in compliance with the Title 22 Regulations and Contract requirements. The FFA will ensure that within the next 90 days, its' staff is retrained on fully complying with the regulations regarding NSPs and that all FFA CFPs understand the importance of having educational materials and resources available to the children. Additionally, the FFA will verify all children have Life Books within this 90 day period.

A follow-up visit was conducted by CAD on April 6, 2015 and the FFA implemented 15 of 15 recommendations noted in this report. CAD will continue to assess implementation of the recommendations during the next compliance monitoring review. The OCHMD will provide on–going technical assistance prior to the next review.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

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

children's institute, inc.

safe children, strong families, healthy communities

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President and Chief Executive Officer

Foster Family Agency Monitoring Review Field Exit Summary, June 20, 2014

Plan of Corrections

Date: July 10, 2014

Amy Kim, Contract Compliance Administration

Cc: Pamela Carolina

Department of Children and Family Services

3539 Wilshire Blvd, 4th Floor

Los Angeles, CA 90001

Dr. Ms. Kim:

Subject: Findings and Recommendations-Foster Family Agency Monitoring Review Field Exit Summary, Exit Interview June 20, 2014

Concern Area 1:

II. Certified Foster Homes

9. If applicable, does the foster parent case record include the agency's inquiry with OHCMD for historical information prior to certification (effective November 1, 2008) and reference check? (SAFETY)

Corrective Action Plan Area 1:

As per CII policies and procedures, all families inquiring to be certified as foster parents must undergo background clearances, including an inquiry with OHCMD for historical information. This is completed prior to certification of all families per the Statement of Work with Los Angeles County.

CII will resubmit DCFS/OHCMD clearances for existing families to ensure that all families have a recorded clearance from DCFS on file.

Concern Area 2:

III. Facility and Environment

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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)

Specific concern was that the carpet and curtains in the boy's room was noted to be dirty.

23. Does the certified foster home maintain a 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)

Specific concern noted was that one home had no educational materials available to children (i.e. no computer and no books).

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?

Specific concern noted, one home had several expired can goods in the home and sharp knives were easily accessible to the children.

25. Has the certified foster parent conducted disaster drills at least every 6 months and maintained a completed disaster drill log?

Specific concern noted was that disaster drills were not consistently completed or at least documented as such. Neither home had disaster drill kits that contained food or water.

26. Are appropriate and comprehensive monetary and clothing allowance logs maintained?

Specific concern noted was that there was inconsistent documentation specific to clothing logs and allowance logs.

<u>Corrective Action Plan 2:</u>

22. It is CII's procedure to complete home inspections on a quarterly basis, which will continue to occur, including documenting if any area of the home appears to be dirty or in need of cleaning. CII will continue this procedure, including completing cursory inspections as determined necessary. Additionally, Social Workers are expected to complete monthly assessments in which they meet with the child individually in the child's room, where observations specific to the cleanliness of the bedroom occur. Concerns and plans to address will be indicated on notes.

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23. CII's home inspection form asks about age appropriate materials in the home. CII will continue to monitor this, including educational materials, such as books. Additionally, during the Home Study process, this will be addressed in order to ensure that families have various materials on hand for different age children. Foster Parents are informed of the requirement for children to have access to computers via the library if there is not one in the foster home.

24. CII ensures that home inspections are completed quarterly, at which time food is one of many items that is inspected. CII ensures that families have a minimum of perishable and non-perishable items, per Title 22 regulation.

CII's policies and procedures follow that of Title 22 regulations regarding kitchen knives, which "are not required to be locked up or inaccessible to a child who is of sufficient age and maturity to use such items". CII will continue to ensure that the Reasonable and Prudent Parent Standard is being utilized for children who may not be of "sufficient age and maturity".

25. During the pre-certification process, CII will encourage families to have disaster kits with water and food supplies as a best practice (as there is no regulation requiring this).

26. It is CII policy that Social Workers collect Monthly Progress Reports (which contain the clothing monies spent for the month and the allowance received by the child/youth). It is also an expectation that Social Workers will assist foster parents in completing this form as necessary. Those forms are kept in the child's file.

All Home Inspection forms are reviewed by the Program Supervisor or Director, at which time any deficiencies or concerns are noted with a plan of correction. Furthermore, individual supervision also allows for a place to address any concerns specific to the physical dwelling. All Monthly Progress Reports are also reviewed by the Program Supervisor or Director at which time allowance, clothing, and other potential issues are discussed with the case carrying social worker and a plan to correct is made.

<u>Concern Area 3:</u>

IV. Maintenance of Required Documentation and Service Delivery

27. Did the FFA obtain document efforts to obtain the County worker's authorization to implement the NSP? (WELL-BEING)

Specific note: One child's NSP did not have the signature of the CSW.

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28. Do Foster Parents participate in the development of the NSPs? (WELL-BEING)

Specific Note: One foster parent stated she did not participate in the development of the NSPs.

31. Did the FFA Social Worker develop timely, comprehensive, updated (NSPs) with the participation of the developmentally age appropriate child? (WELL-BEING)

Specific Note: Two of the Quarterly and NSPs were done late.

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

Specific Note: There was no documentation in any child's case to reflect consistent monthly contact with the CSW.

35. Does the FFA Social Worker complete timely, comprehensive, quarterly reports? (WELL-BEING)

Specific note: There was no supporting documentation to show quarterly reports are submitted timely.

Corrective Action Plan 3:

27. CII will fax the County Social Worker a minimum of 3 times in attempt to obtain signatures. CII will maintain the fax sent documentation and attach to the report to indicate those attempts.

28. CII has developed a Service Planning Conference form, which will be held every six months, and provides documentation of all participants in the development of the NSP. The Service Planning Conference form will be implemented immediately and placed in the child's file following its completion.

31. CII expects that reports are completed timely and works closely with staff to ensure that this occurs. CII will continue to provide supervision to staff regarding timely submission of reports.

34. CII policy is that County Social Workers are contacted at minimum of twice per month and those contacts are documented and placed in the child's file. CII will continue this policy and ensure that documentation reflecting these contacts is in the files.

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35. CII Social Workers work with their supervisor to ensure that reports are completed timely. Supervising Social Workers will continue to support staff in the completion of timely reports.

The Program Supervisor directly responsible for the case carrying social worker will be responsible for oversight of reports and documentation.

Concern Area 4:

VIII Personal Rights and Social/Emotional Well-Being

55. Are age appropriate children informed about their medication and their right to refuse medication? (WELL BEING)

Specific concern noted: One child stated that he/she was not informed about his/her right to refuse medication.

Corrective Action Plan 4:

It is CII's policy and procedure to provide all foster youth with their personal rights. CII has an additional form (Agency Rules, Policies, and Procedures) that specifies the right to refuse medication. This form is reviewed with all foster children and foster children/youth, age 12 and older, sign, as do Foster Parents. Additionally, Foster Parents are provided with training specific to the child's right to refuse medication.

Concern Area 5:

IX Personal Needs/Survival and Economic Well-Being

58. Is clothing allowance amount provided in accordance with the agency's program statement? (If after November 1, 2012, $50.00 minimum monthly clothing allowance in accordance with the contract) (WELL BEING)

Specifically noted, one child stated that he/she did not know how much he/she received for monthly clothing allowance.

Corrective Action Plan 5:

CII's Agency Rules, Policies and Procedures form, which all children (age 12 and older) sign, indicates the amount of clothing allowance that foster children are entitled to.

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Concern Area 6:

X Discharged Children

65. Was a discharge summary completed for each discharged child reviewed? (PERMANENCY)

Note: One child's discharge summary did not contain any information except to say that the child was discharged and one child's discharge summary was completed 3 months after the child had discharged.

66. Did the FFA use all available resources, to attempt to stabilize the placement prior to requesting the removal of the child? (PERMANENCY)

Specific Note: Unable to verify for one child as discharge summary was incomplete.

Corrective Action Plan 6:

65. CII expects that Discharge reports are to be completed within 7 days of a child's discharge. Staff will complete Discharge Reports and submit them to their immediate supervisor for approval to ensure that discharge reports are being completed timely and contain the appropriate information.

66. Notes accurately reflecting the work and efforts being made by the Social Worker are expected and all notes are reviewed by the Supervising Social Worker. Individual supervision with social workers is expected to be conducted weekly at which time cases are discussed with the SSW.

This plan is submitted to you for your review. If you have any questions, please feel free to contact me at: 310.783.4677 x 5233 or at 562.522.8739.

Respectfully,

Celia Anthony, MHR

Foster Care Director

Dean Bradley

Senior Vice President, Administration

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Foster Family Agency Monitoring Review Field Exit Summary, June 20, 2014

Addendum to Plan of Corrections

Date: June 30, 2015

Amy Kim, Contract Compliance Administration

Cc: Pamela Carolina

Department of Children and Family Services

3539 Wilshire Blvd, 4th Floor

Los Angeles, CA 90001

Dr. Ms. Kim:

Subject: Findings and Recommendations-Foster Family Agency Monitoring Review Field Exit Summary, Exit Interview June 20, 2014

Concern Area 9:

Was there encouragement/Assistance with Life Books/Photo Album?

Specific Note: Six children did not have Life Books that were properly maintained.

Corrective Action Plan 9:

The social workers will be provided with re-training and materials to establish, and assist the foster parents with maintaining Life Books for all foster children. Life Book Training will be added to the yearly list of trainings offered to foster parents. Social Workers will check each foster child's Life Book on a quarterly basis and will provide reminders of things to add to the Life Book throughout the quarter.

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The Program Supervisor will:

1. Ensure that all staff, are retrained by 7/10/15 and submit documented proof of compliance by that date.
2. Monitor progress in this area by including the last date the Life Book was checked by the Social Worker on the Monthly Accountability Report. (which will be reviewed during weekly supervision meetings)
3. Adding Life Book training for foster parents to the yearly training topics for foster parents. These classes will be taught by the Program Supervisor or staff.
4. Purchase notebooks and that each child receives a notebook to start their Life Book by 7/10/15.
5. Monitor this area.

This plan is submitted to you for your review. If you have any questions, please feel free to contact me at: 310.783.4677 x 5233 or at 562-230-3979.

Respectfully,

Jacy Taylor

Jacy Taylor

Foster Care Interim Director

Corrective Action Plan Revisions completed by:

Jacy Taylor, MA