County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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

PHILIP L. BROWNING
Director

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Chief Deputy Director

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August 1, 2013

To: Supervisor Mark Ridley-Thomas, Chairman
Supervisor Gloria Molina
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Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

INNER CIRCLE FOSTER CARE AND ADOPTION SERVICES FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a review of Inner Circle Foster Care and Adoption Services Foster Family Agency (The FFA) in March 2013. The FFA has two offices, one in the Third Supervisorial District and one in the Fifth Supervisorial District, and provides services to County of Los Angeles DCFS foster children and youth. According to the FFA program statement, its mission is "to promote the growth of children and youth while strengthening the family unit".

At the time of the review, the FFA supervised 45 DCFS placed children in 41 certified foster homes. The placed children's average length of placement was 10 months, and their average age was four.

SUMMARY

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

The FFA was in full compliance with six of the 11 sections of our program compliance review: Licensure/Contract Requirements; Facility and Environment; Education and Workforce Readiness; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; and Discharged Children.

OHCMD noted deficiencies in the areas of: Certified Foster Homes, related to an untimely health screening for one certified foster parent and no annual vehicle inspection for three certified foster homes; Maintenance of Required Documentation and Service Delivery, related to one child's Needs and Services Plan (NSP) not having been approved by the DCFS Children's Social Worker's (CSW) prior to implementation and another child's updated NSP was not comprehensive and goals were not measureable, therapeutic evaluations were not documented, and for two other children, there was no documentation of the FFA Social Worker's monthly contacts with the DCFS CSW; Health and Medical Needs, related to an untimely initial medical examination for one child; Personal Needs/Survival and Economic Well-Being, related to one home not having an adequate supply of clothing for one child; and Personnel Records, related to one FFA social work staff having an untimely health screen.

Attached are the details of our review.

REVIEW OF REPORT

On March 14, 2013, the DCFS OHCMD Monitor, Cori Shaffer, held an Exit Conference with the FFA's Executive Director, Pamela Jordan and the FFA Supervising Social Worker and Adoption Coordinator, Jill Rosenberg. The FFA's representatives: agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve their compliance with regulatory standards; and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

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

The FFA provided the attached approved CAP addressing the recommendations noted in this compliance report. OHCMD will confirm that these recommendations have been implemented during our next monitoring review.

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

PLB:EM:KR
RDS:NF:cs

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Public Information Office
Audit Committee
Pamela Jordan, Executive Director, Inner Circle Foster Care and Adoption Services FFA
Angelica Lopez, Acting Regional Manager, Community Care Licensing

INNER CIRCLE FOSTER CARE AND ADOPTION SERVICES
FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2012-2013

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the March 2013 review. The purpose of this review was to assess Inner Circle Foster Care and Adoption Services Foster Family Agency's (the FFA) 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 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, ten children were selected for the sample. Out-of-Home Care Management Division (OHCMD) reviewed all ten case files and interviewed six children to assess the care and services they received. Four children were too young to be interviewed, however were observed to be in good health. Additionally, five discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, four placed children were prescribed psychotropic medication. We reviewed their case files to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

OHCMD reviewed five certified foster parent files and two staff files for compliance with Title 22 Regulations and County contract requirements. Interviews were conducted with four certified foster parents to assess the quality of care and supervision provided to children.

CONTRACTUAL COMPLIANCE

OHCMD found the following five areas to be out of compliance.

Certified Foster Homes

- For one certified foster home, the health screening and TB clearance was untimely. The foster parent was certified in October 2010 and the health screening and TB test were completed in March 2011, five months after his date of certification. During the exit conference, the FFA Administrator indicated that the FFA would ensure that newly certified foster parents have a health screening/TB clearance prior to certification according to Title 22 requirement time frames.

- Three certified foster homes did not have annual vehicle inspections. During the exit conference the FFA Administrator indicated that they have updated their vehicle agreement form to ensure that vehicle inspections are completed at the time of certification and annual recertification.

Recommendations

The FFA's management shall ensure that:

1. Certified foster parents have the required health screenings in accordance with Title 22 regulations and that documentation is maintained in the certified foster parent files.

2. Certified foster parents have annual documentation of vehicle maintenance and documentation is maintained in the certified foster parent files.

Maintenance of Required Documentation and Service Delivery

- For one placed child the updated Needs and Services Plans (NSPs) were not comprehensive, as it did not include therapeutic and educational information, goals and progress. Additionally, the NSP had not been approved by the Department of Children and Family services (DCFS) Children's Social Worker (CSW) prior to implementation.

  During the review conference, the FFA administrative staff indicated that they would ensure that all NSPs are sent to the CSWs for authorization and additional training was provided to all staff subsequent to this review. The FFA provided a revised plan for ongoing oversight in their Corrective Action Plan (CAP) to ensure ongoing compliance.

  It should be noted that the FFA's representatives attended the OHCMD's NSP training for providers on January 23, 2012.

- For the same child, there was no information on progress or mention of therapeutic evaluations noted in the NSP. During the interview process the foster parent

disclosed that the psychiatrist is re-evaluating the child's medication and is working closely with the psychiatrist and the school to address behavioral issues.

- For two placed children there was no documentation of the FFA Social Worker's monthly contact with the DCFS CSWs; for one child, contact during the month of November 2012 was missed and for the other child, contact during the months of January and February 2013 contact was missed.

Recommendations

The FFA's management shall ensure that:

3. The FFA obtains or documents efforts to obtain the DCFS CSW's authorization to implement the NSP and documentation is maintained in the children's files.

4. Placed children are progressing towards meeting the NSPs goals and documentation is maintained in the children's files.

5. The FFA staff develops comprehensive NSPs and documentation is maintained in the children's files.

6. Recommendations on required or recommended assessments/evaluations are implemented and documentation is maintained in the children's files.

7. The FFA social work staff contacts the DCFS CSWs monthly or documents attempts and documentation is maintained in the children's files.

Health and Medical Needs

- One child's initial medical examination was untimely. The child was placed in April 2012 and the initial medical examination was conducted in November 2012.

  During the exit conference, the FFA administrative staff provided verification that the FFA staff was re-trained on the FFA's protocol for placed children's initial medical examinations. The FFA Administrator indicated that the administrative staff will provide weekly oversight by reviewing the children's files with the FFA social worker at each supervision meeting to ensure ongoing compliance.

Recommendation

The FFA's management shall ensure that:

8. Placed children have initial medical examinations within the required timeframe and documentation is maintained in the children's files.

Personal Needs/Survival and Economic Well-Being

- During a home visit, OHCMD noted that one seven-year old child, did not have an adequate supply of clothing. This matter was immediately reported to the FFA administrative staff and to the DCFS CSW. During the review conference, the FFA Administrator indicated that the placed child had recently experienced a significant weight gain due to a change in the child's psychotropic medication. However, we did not find any documentation in the child's file regarding the matter. The FFA staff completed an immediate Corrective Action Plan (CAP), which included a follow-up visit to the home to assess the child's accessible clothing supply and providing the required clothing inventory for the child. A clothing inventory and pictures of the clothing and the closet were provided to OHCMD to ensure that clothing standards have been met. The FFA administrative staff also indicated that the FFA social worker staff was re-trained on clothing inventory protocol and on maintaining ongoing documentation in the children's files.

Recommendation

The FFA's management shall ensure that:

9. Placed children have an adequate supply of clothing in accordance with the Contract requirements clothing standard and documentation is maintained in the children's files.

Personnel Records

- One FFA social worker had an untimely health screening. The social worker was hired in March 2012 and her health screen was completed in December 2012. During the review conference, the FFA provided a signed statement from their Human Resources team indicating that the FFA understands the hiring protocol. The FFA administrator indicated that as an additional measure of oversight, the FFA has updated their personnel folders to ensure that the initial health screens for all new hires will be completed prior to staff working with clients.

Recommendation

The FFA's management shall ensure that:

10. All FFA social work staff have timely health screenings according to Title 22 regulation requirements and documentation is maintained in the personnel files.

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

The OHCMD's last compliance report completed dated March 12, 2012 identified 13 recommendations.

Results

Based on our follow-up, the FFA fully implemented nine of the 13 previous recommendations for which they had to ensure that:

- Substitute caregivers have the required health screening on file and if transporting placed children, have a current valid California Driver's License and car insurance on file with the FFA.
- Allowance logs for all age-appropriate children are completed and documentation is maintained.
- Age-appropriate children participate in the development of the NSPs and documentation is maintained.
- Certified foster parents participate in the development of the NSPs and documentation is maintained.
- Comprehensive initial NSPs are developed.
- Court authorizations for psychotropic medication are current and documentation is maintained.
- All children taking psychotropic medication are seen and routinely monitored by a prescribing physician and documentation is maintained.
- Placed children receive the minimum monetary allowances and documentation is maintained.
- Certified foster parents are informed about the allowance requirements and the agency monitors for ongoing compliance.

The FFA did not fully implement the following four recommendations:

- The FFA obtains the CSW's authorization, or documents efforts, for implementation of the NSPs.
- Comprehensive NSPs are developed.
- Children's initial medical examinations are timely and the FFA will routinely monitor and ensure the ongoing compliance of maintaining required documentation in the children's files.
- All staff have timely health screenings and documentation is maintained in the personnel files.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER (A-C)

A fiscal review of the FFA by the A-C was posted July 11, 2011. The A-C identified $6,147 in unallowable costs and $369 unsupported/inadequately supported expenditures. A-C recommended that the FFA and DCFS work together to resolve some potential overpayments and that DCFS should recover any valid overpayments. Further, the FFA reported that a former employee embezzled over $700,000 from the FFA and it appears that most of the embezzled funds were FFA funds from the County. The FFA hired an accounting consultant who is working with the LAPD with regard to

the criminal charges. The A-C recommended that the FFA strengthen its controls over contractors, bank reconciliations, insurance, preparation and submitting of Semi-Annual Expenditure Reports to DCFS, and maintaining a list of fixed assets as required by the FFA contract. The FFA has adhered to the recommendations made by the A-C.

On July 12, 2013, OHCMD contacted the DCFS Fiscal Section and was informed that the matter has been resolved with DCFS, the agency has paid off all monies owed and the agency employee who embezzled the money was criminally prosecuted.

INNER CIRCLE FOSTER CARE AND ADOPTION SERVICES
FOSTER FAMILY AGENCY
CONTRACT PROGRAM COMPLIANCE MONITORING REVIEW-SUMMARY

7120 Hayvenhurst Ave, Suite 204
Van Nuys CA 91406,
Lic 191593257

1317 E. Palmdale Blvd., Suite 18
Palmdale, CA 93550
Lic. 197602175

	Contract Compliance Monitoring Review	**Findings: March 2013**
I	**Licensure/Contract Requirements** (7 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Serious Incident Report Documentation and Cross Reporting	2. Full Compliance
	3. Runaway Procedures	3. Full Compliance
	4. Are there CCL Citations/OHCMD Safety Reports	4. Full Compliance
	5. If Applicable, FFA Ensures Complete Required Whole Foster Family Home Training	5. Not Applicable
	6. FFA Pays Certified Foster Parents Whole Foster Family Home Payments	6. Not Applicable
	7. Assessment of Certified Foster Parent (CFP) Prior to Placement of Two (2) or More Children	7. Full Compliance
II	**Certified Foster Homes (CFHs)** (12 Elements)	
	1. Home Study and Safety Inspection Prior to Certification	1. Full Compliance
	2. Contact with References/Including Check with OHCMD	2. Full Compliance
	3. Timely DOJ, FBI, CACI	3. Full Compliance
	4. Timely, Completed, Signed Criminal Background Statement	4. Full Compliance
	5. Health Screening & TB Test Prior to Certification	5. Improvement Needed
	6. Required Training Prior to Certification	6. Full Compliance
	7. Certificate of Approval on File/Including Capacity	7. Full Compliance
	8. Safety Inspection Every Six Months or Per Approved Program Statement	8. Full Compliance
	9. Completed Training Hours for Re-certification and Current CPR/First-Aid/Water Safety Certificates	9. Full Compliance
	10. Current CDL/Auto Insurance/Annual Vehicle Maintenance Documentation for CFPs and Designated Drivers	10. Improvement Needed
	11. Other Adults in the Home: Health Screening/CDL/CPR DOJ/FBI/CACI/Auto Insurance	11. Full Compliance
	12. FFA Assists CFPs with Transportation Needs	12. Full Compliance

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

VII	**Psychotropic Medication** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	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 3. CFPs' Efforts to Provide 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 7. Reasonable Chores 8. Children Informed About Their Medication and Right to Refuse Medication 9. Children Aware of Right to Refuse 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 in Accordance with FFA Program Statement ($50 Minimum if After November 1, 2012) 2. Ongoing Clothing Inventories of Adequate Quantity and Quality 3. Children's Involvement in Selection of Clothing 4. Provision of Sufficient Supply of Clean Towels and Personal Care Items Meeting Ethnic Needs 5. Minimum Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement/Assistance with Life Book	1. Full Compliance 2. Improvement Needed 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance
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. DOJ, FBI, CACI Submitted Timely	1. Full Compliance
	2. Timely, Completed, Signed Criminal Background Statement	2. Full Compliance
	3. Education/Experience Requirements	3. Full Compliance
	4. Employee Health Screening/TB Timely	4. Improvement Needed
	5. Valid CDL and Auto Insurance	5. Full Compliance
	6. Signed Copies of FFA Policies and Procedures	6. Full Compliance
	7. Staff Completed All Required Training and Documentation Maintained	7. Full Compliance
	8. FFA Social Workers Have Appropriate Caseload Ratio	8. Full Compliance
	9. Written Declarations for Contract FFA Social Workers That Caseloads Not Exceed Total of 15 Children	9. Not Applicable

Inner Circle

FOSTER CARE & ADOPTION SERVICES

Where children thrive and families are strengthened.

April 26, 2013

Cori Shaffer, CSA I
DCFS OHCIS
9320 Telstar Ave., Ste. 216
El Monte, CA. 91731

Re: CAP Request from Compliance Review 2012/2013 – **Amended Version**

Dear Cori:

In response to your Request, we are submitting the following items to address the Corrective Action Plan:

- Copy of Sign-in sheet from Inner Circle's Certification meeting on April 2, 2013:
  - Discussed with the team to reinforce Title 22 regulations that when families transfer certification from another agency, they must provide a health screening and TB test within one year prior to the new certification date.

  (Please note correction: The CFP was certified in October 2010 and provided health screening in March 2011, not November 2011 as stated in your CAP letter).

- Copy of updated Vehicle Agreement requiring that CFPs provide this agency with documentation of annual vehicle inspections at certification and annually at recertification.

- Copy of Sign-in sheet from Inner Circle's in-service training on April 2, 2013 to address the following CAP items:
  - Signature on NSP – to verify that CSW is in agreement with quarterly goals for child(ren).
    - Oversight procedure – Social Workers will fill out the last page of N&S report, Addendum, documenting requested signature from CSW. Social workers will turn in these sheets to their Supervisors. Supervisors will initial the Addendum and turn back into social workers to file in the child(ren)'s files. New protocol will be discussed and implemented at the next staff meeting, 4/30/13.
  - Detailed NSP goals – to document follow up and child(ren)'s progress toward quarterly goals.

VAN NUYS: 7120 Hayvenhurst Ave., Suite 204 • Van Nuys, CA 91406 • (818) 988-6300 • Fax: (818) 988-7087
PALMDALE: 1317 East Palmdale Blvd., Suite 18 • Palmdale, CA 93550 • (661) 575-9190 • Fax: (661) 575-9198
www.fosterfamily.org • E-mail: innercircle@fosterfamily.org

- Comprehensive NSP goals - to reflect child's comprehensive needs and services, including educational and therapeutic information.
  - Oversight procedure –Supervisors will initial each child's identified needs in the margins of the quarterly report narrative and double-check that each need has a corresponding goal in the N & S plan. Supervisors will ask social workers to correct each quarterly as needed before signing off. New protocol will be discussed and implemented at the next staff meeting, 4/30/13.

- Documentation of follow up for assessments requested for child(ren).

- Documentation of CSW monthly contact.

- Re-training on Initial Exam protocol and documentation.
  - Oversight procedure –Supervisors will have each social worker bring child(ren)'s files to each supervision meeting. Supervisors will check file for documentation of each medical exam, ensuring that exams are conducted in a timely manner and documented properly. New protocol will be discussed and implemented at the next staff meeting, 4/30/13.

- Re-training on Clothing Log protocol and documentation.

- Signed statement from HR team:

  - This agency understands and will reinforce hiring protocol that all new hires will provide an initial health screening and TB test prior to working with clients.
    - Oversight procedure – The face-sheets in the files for all new employees will be initialed by both HR personnel prior to new employee working with clients. New protocol will be discussed and implemented at the next staff meeting, 4/30/13.

In addition, this agency understands and agrees to continue to reinforce these ongoing compliance requirements.

Feel free to contact me for any further information at 818-988-6300 x202 or jillr@fosterfamily.org.

Sincerely,

Jill Rosenberg, MSW
Foster Care and Adoption Program Supervisor