County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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September 11, 2013

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

From: for Philip L. Browning
Director

OLIVE CREST 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 Olive Crest Foster Family Agency (the FFA) in February 2013. The FFA has two licensed offices located in the Fourth Supervisorial District and one in Orange County and provides services to County of Los Angeles DCFS foster children and youth. According to the FFA's program statement, its mission is "to provide stability and belonging in the lives of the most needy children in our society while making every effort to reunify the placed children with their natural family."

At the time of the review, the FFA supervised 54 DCFS placed children in 38 certified foster homes. The placed children's average length of placement was 11 months, and their average age was three.

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 6 of 11 sections of our program compliance review: Education and Workforce Readiness; Psychotropic Medications; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records.

OHCMD noted deficiencies in the areas of Licensure/Contract Requirements, related to a substantiated complaint by Community Care Licensing (CCL) during an investigation of personal rights violations and there was no documentation that an assessment was completed for certified foster parents prior to placing more than two children in the home; Certified Foster Homes, related to not having conducted re-evaluations/re-assessments of certified foster parents prior to re-certification; Facility and Environment, related to one certified foster home not having conducted disaster drills every six months; Maintenance of Required Documentation and Service Delivery, related to four Needs and Services Plans (NSPs) not having documentation of foster parents' participation and one child's FFA social worker required visitation compliance for the first three months of placement was unable to be determined; and Health and Medical Needs, related to two initial dental examinations not being completed timely.

Attached are the details of our review.

REVIEW OF REPORT

On April 26, 2013, DCFS OHCMD Monitor, Sharon Koga, held an Exit Conference with the FFA representatives Steve Goclowski, Regional Programs Director, and Jessica Valdez FFA Program Director. 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 CCL.

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:sk

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Public Information Office
Audit Committee
Steve Goclowski, Regional Programs Director
Angelica Lopez, Acting Regional Manager, Community Care Licensing

OLIVE CREST 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 February 2013 review. The purpose of this review was to assess Olive Crest Foster Family Agency (the FFA's) compliance with the County contract and State regulations and included a review of the FFA's program statement, as well as administrative internal policies and procedures. The 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) interviewed each child and reviewed all ten case files to assess the care and services they received. Additionally, four discharged children's files were also reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, two 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 four certified foster parent files and five 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 six areas to be out of compliance.

Licensure/Contract Requirements

- The FFA had one certified foster home with an allegation of personal rights violations substantiated by CCL. The violation involved the certified foster parent yelling and arguing with the biological mother of the children in front of the children. The FFA decertified foster parent.

- The FFA did not have documentation of having completed an assessment of certified foster parents prior to placing more than two children in the home. The FFA representative responded that the FFA will design and implement an assessment form prior to placing more than two children in the home.

Recommendation

The FFA's management shall ensure that:

1. Certified foster parents are trained in personal rights.

2. Certified foster parents are assessed prior to placing more than two children in the home.

Certified Foster Homes

The FFA did not complete safety inspections at least every six months per the timelines approved in the agency's Program Statement. The FFA representative responded that the FFA will review with staff the need to conduct safety inspections every six months, and will designate staff to verify that inspections are completed.

Recommendation

The FFA's management shall ensure that:

3. Certified foster parents conduct safety inspections every six months.

Facility and Environment

- One of four certified foster homes did not conduct disaster drills every six months. The FFA representative responded that the six month fire drill may have been missed due to a change in procedure. The FFA switched from doing fire drills at recertification and six months from that date, to a standard procedure of all homes conducting fire drills in January and July.

Recommendation

The FFA's management shall ensure that:

4. All certified foster homes conduct disaster drills every six months.

Maintenance of Required Documentation and Service Delivery

- Four Needs and Services Plans (NSPs) did not have documentation of certified foster parents' participation in the development of the NSPs. The FFA representative responded that certified foster parents are included in the development of the NSPs and will reiterate to the FFA Social

Workers (FFA SWs) the importance of obtaining the certified foster parents' signature on the NSPs.

An FFA representative attended the OHCMD NSP training for providers on January 27, 2012.

- One child's visitation compliance with the FFA SW for the first three months of placement was unable to be determined due to lack of contact documentation for that period. The FFA representative responded that because the client has been with the FFA for several years, his file is probably large, and the earlier documents are in archives. The FFA will review its procedures regarding keeping files of currently placed children readily available so they may have access to them.

Recommendations

The FFA's management shall ensure that:

5. All certified foster parents participate in the development of the NSPs and sign the NSPs.

6. All FFA SW contacts are maintained in the children's files and/or easily accessible.

Health and Medical Needs

- Two children's initial dental examinations were completed late. One examination was approximately one month late, and the other was approximately three months late. The FFA representative responded that he is aware of situations where it has been difficult to access dentists that accept medi-cal, and appointments are not readily available. He indicated that he would have the certified foster parents notify the FFA SW of any problems in scheduling an initial dental appointment.

Recommendation

The FFA's management shall ensure that:

7. All children's initial dental examinations are completed timely.

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

The OHCMD's last compliance report dated August 8, 2012, identified four recommendations.

Results

Based on OHCMD follow-up, the FFA fully implemented three of four recommendations for which they were to ensure that:

- All certified foster parents have an OHCMD historical abuse information check prior to their certification.
- All employees sign the criminal records statement in a timely manner.
- All employees receive timely health screenings.

Based on OHCMD follow-up, the FFA did not fully implement one of four recommendations for which they were to ensure that:

- All children have an initial dental examination within 30 days of placement.

Since this recommendation was not implemented OHCMD is requesting a new CAP in this area as to what the FFA will do differently to remedy these findings.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

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

OLIVE CREST FOSTER FAMILY AGENCY
CONTRACT PROGRAM COMPLIANCE MONITORING REVIEW SUMMARY

17800 Woodruff Avenue
Bellflower, CA 90706
License Number: 197805185

2130 E. Fourth Street
Santa Ana, CA 92705
License Number: 300600003

	Contract Compliance Monitoring Review	**Findings: February 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. Improvement Needed
	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. Improvement Needed
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. Full Compliance
	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. Improvement Needed
	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. Full Compliance
	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	1. Full Compliance
	2. Common Areas Maintained	2. Full Compliance
	3. Children's Bedrooms/Interior Maintained	3. Full Compliance
	4. Sufficient Educational Resources	4. Full Compliance
	5. Adequate Perishable and Non-Perishable Food	5. Full Compliance

	6. Disaster Drills Conducted and Documentation Maintained 7. Allowance Logs Maintained	6. Improvement Needed 7. Full Compliance
IV	**Maintenance of Required Documentation/Service Delivery** (10 Elements) 1. Department of Children and Family Services (DCFS) Children's Social Worker's (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. County Children Social Workers Monthly Contacts Documented in Child's Case File 9. Develop Timely, Comprehensive Quarterly Reports 10. FFA Social Workers Conduct Required Visits	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. Improvement Needed
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. Full Compliance 2. Full Compliance 3. Improvement Needed 4. Full Compliance
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 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	Full Compliance (ALL)
X	**Discharged Children** (3 Elements) 1. Completed Discharge Summary 2. Child Completed High School (if applicable) 3. Attempts to Stabilize Children's Placement	Full Compliance (ALL)

XI	**Personnel Records** (9 Elements) 1. DOJ, FBI, CACI Submitted Timely 2. Timely, Completed, Signed Criminal Background Statement 3. Education/Experience Requirements 4. Employee Health Screening/TB Timely 5. Valid CDL and Auto Insurance 6. Signed Copies of FFA Policies and Procedures 7. Staff Completed All Required Training and Documentation Maintained 8. FFA Social Workers Have Appropriate Caseload Ratio 9. Written Declarations for Contract FFA Social Workers That Caseloads Not Exceed Total of 15 Children	Full Compliance (ALL)

..FORTY YEARS..
OLIVE CREST
Strong Families, Safe Kids

1.800.550.CHILD (2445)
www.olivecrest.org

June 4, 2013

Nestor Figueroa, CSA II
Out of Home Care Management Division
County of Los Angeles Department of Children and Family Services.
9320 Telstar Avenue, Suite #216
El Monte, California 91731

RE: Corrective Action Plan for Foster Family Agency Monitoring Review

Dear Mr. Figueroa,

Per your request, we submit the following as our Corrective Action Plan (CAP) consequent to the findings of our Foster Family Agency Monitoring Review conducted by Ms. Sharon Koga. We appreciate the Department's affirmation of the strengths and accomplishments of the agency noted during this review, as well as the Department's assistance in identifying the areas our agency needs to improve or refine practices in our Foster Family Agency.

The following CAP is therefore submitted for the Department's review:

Item/Area not found in compliance:

1. 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)

Action Plan:

The one matter cited was discussed during the review, and was related to a substantiated allegation of emotional abuse/personal rights violation by a foster caregiver. That family was de-certified (notice given on 6/25/2012) by the agency during the time of the investigation, and the decision to decertify immediately followed the removal of the children from the home by the Department. Both the Department and the CCL analyst supported the agency decision to decertify the foster home as a just and right action.

Time Frame:

This item pertains to a specific and isolated incident for which the agency took swift and decisive action. No further action is needed at this time.

Steps to Prevent Future Violations/Non-compliance:

The conditions that led up to the incident involving the foster caregivers were unforeseen by agency personnel. While the agency was providing the common and expected support to the foster caregivers during the course of placement of the three minors in their care, the foster caregivers later acknowledged their failure to bring to their worker's attention the concerns and frustrations they were having with the birth parent at that time. The caregivers took ownership for acting out their issues in the presence of the children that was later deemed as emotionally abusive.

Agency personnel and administration later debriefed the case and examined what they might be able to draw from the experience to help reduce the risk of such an incident occurring in the future with other certified families. This incident may be used (with all confidentiality

Regular chart reviews will be conducted to verify that the safety inspections have been conducted.

Person(s) Responsible:

FFA program Supervisor and/or Director will review policy with all staff. The FFA agency's administrative assistant and QA designee will verify completion and retention of the necessary documentation in the certified home files.

Item/Area not found in compliance:

III. Facility and Environment; 25. Has the certified foster parent conducted disaster drill at least every 6 months and maintained completed disaster drill logs? (SAFETY)

Action Plan:

The one circumstance noted in the review was prompted due the lateness of a home to conduct the disaster drills and properly document the drills. In addition to reviewing with the staff responsible for the missed/late disaster drill, all staff have been reminded to conduct the bi-annual (6 month) disaster drills concurrent with the safety inspections every January and July, and to properly document these inspections. The FFA agency's administrative assistant and QA designee will verify completion of the inspections and retention of the documentation of such.

Time Frame:

Ongoing. Staff have been reminded of the policy and practice of the safety inspections and time frames, and all relevant items included in this CAP will be reviewed again on May 28, 2013 at the FFA all staff meeting.

Steps to Prevent Future Violations/Non-compliance:

Regular chart reviews will be conducted to verify that the disaster drills have been conducted in a timely manner.

Person(s) Responsible:

FFA program Supervisor and/or Director will review policy with all staff. The FFA agency's administrative assistant and QA designee will verify completion and retention of the necessary documentation in the certified home files.

Item/Area not found in compliance:

IV. Maintenance of Required Documentation and Service Delivery; 28. Do certified foster parents participate in development of the NSPs? (WELL-BEING)

Action Plan:

In four of the ten charts reviewed, the signature of the foster caregivers was missing. Consequently, even though the foster parents did participate in the development of the NSP goals, the lack of a signature failed to provide proof of that participation.

In addition to reviewing with the staff responsible for the failure to secure signatures in a timely manner, the FFA agency's administrative assistant and QA designee will regularly conduct chart reviews to verify all NSPs are present and all signatures have been secured.

Time Frame:

Ongoing. Staff have been reminded of the necessity of foster parent participation in the formation of NSP goals, and to secure signatures indicating that participation. This and all other relevant items included in this CAP will be reviewed again on May 28, 2013 at the FFA all staff meeting.

Time Frame:

Ongoing. This and all relevant items included in this CAP will be reviewed again on May 28, 2013 at the FFA all staff meeting.

Steps to Prevent Future Violations/Non-compliance:

Regular chart reviews will be conducted to verify all health records and documentation is complete. FFA workers will follow-up during the initial visits following placement to verify that the foster caregivers are able to set up all necessary medical and dental examination appointments.

Person(s) Responsible:

FFA workers will verify with foster parents that appointments are scheduled. FFA program Supervisor and/or Director will review practices with all staff. The FFA agency's administrative assistant and QA designee will verify completion and retention of the necessary documentation in the foster child files.

Olive Crest is honored to serve the children and families of Los Angeles County in partnership with the Department of Children and Family Services. If any further information is needed, you may contact me at (562)977-6925. If I am unavailable, you may contact our Director of Foster and Adoptions Programs, Jessica Valdez, MSW, at (562)977-6970.

Respectfully,

Steve Goclowski, LCSW
Los Angeles Region Programs Director

cc:file