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DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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October 9, 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

SOUTH BAY BRIGHT FUTURE 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 South Bay Bright Future Foster Family Agency (the FFA) in February 2013. The FFA has one licensed office located in the Fourth Supervisorial District and provides services to County of Los Angeles foster children and youth. According to the FFA's program statement, its mission is "to ensure the safety of each child, support and strengthen biological/certified families and promote the healthy development of all children."

At the time of the review, the FFA supervised 38 DCFS placed children in 29 certified foster homes. The placed children's average length of placement was 11 months, and their average age was 10.

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

OHCMD noted deficiencies in the areas of Licensure/Contract Requirements, related to the FFA not having submitted the Special Incident Reports (SIRs) via I-Track to OHCMD and all appropriate parties in a timely manner, the submitted SIRs contained limited information about the incidents and Community Care Licensing (CCL) cited the FFA as a result of deficiencies and findings related to a certified foster parent with an expired CPR and First Aid training certificate, for Buildings and Grounds violation when it was discovered that a certified foster parent's adult daughter and her three-year-old child shared a bedroom and for failure to submit a SIR via I-Track and cross report the incident to all appropriate parties, related to violation of a child's personal rights by the certified foster parent; Certified Family Home, related to the certified foster parents not completing the required annual training hours in accordance with County contracts; Facility and Environment, related to an inadequate amount of nutritious food in one of the certified foster homes and some of the canned food had passed the expiration dates; Maintenance of Required Documentation and Service Delivery, related to non-comprehensive Needs and Services Plans (NSPs); Health and Medical Needs, related to missing children's initial medical and dental and follow-up dental examinations not being documented in the children's case files; Psychotropic Medications, related to children's psychiatric evaluation visits not being documented in the children's case files; and Personnel Records, related to a part-time social worker not having documentation in file indicating total caseloads would not exceed 15 children.

REVIEW OF REPORT

On March 27, 2013, the DCFS OHCMD Monitor, Gladys Hidayat, held an Exit Conference with FFA's representatives Marvett Black, FFA Administrator and LeVetta Hill, FFA Chief Operation Officer. 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:gh

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Public Information Office
Audit Committee
Dr. William Hill, Executive Director, South Bay Bright Future FFA
Angelica Lopez, Acting Regional Manager, Community Care Licensing

SOUTH BAY BRIGHT FUTURE 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 South Bay Bright Future 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, six children were selected for the sample. Out-of-Home Care Management Division (OHCMD) interviewed each child and reviewed their case files to assess the care and services they received. Additionally, five 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 parents' files and five staff's 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 seven areas to be out of compliance.

Licensure/Contract Requirements

- Special Incident Reports (SIRs) were not submitted via I-Track system timely and cross reported to all required parties. Further, the submitted SIRs contained limited information about the incidents. During the Exit Conference, the FFA's Administrator stated that the FFA will ensure timely submission of SIRs and that they will contain the necessary

information in accordance with SIR reporting guidelines. Additionally, the FFA staff and certified foster parents will be retrained on SIR reporting guidelines.

- Community Care Licensing (CCL) cited the FFA during the course of reviewing the certified foster parents' files; CCL Licensing Program Analyst (LPA) discovered that a certified foster parent's First Aid/CPR certificate had expired 23 days prior. The Plan of Correction (POC) was for the FFA to ensure that the certified foster parent completed First Aid/CPR training. However, the certified foster parent did not complete the First Aid/CPR training timely, causing a delay in the FFA's submission of a Plan of Correction to CCL addressing the deficiency, which resulted in CCL levying civil penalties against the FFA.

- The FFA was cited for a Building and Grounds violation when during a visit to a certified foster home, the CCL LPA discovered that a certified foster parent's adult daughter and her three-year-old child shared a bedroom. According to CCL's Facility Evaluation Report, the deficiency was corrected by the certified foster mother's adult daughter moving out of the home.

- Lastly, CCL cited the FFA for their failure to submit a SIR via I-Track and cross report the incident to all appropriate parties when the FFA discovered that a certified foster parent had violated the personal rights of the placed children by making them stand in the corner holding several books. Based on the information CCL LPA received, the certified foster parent informed the FFA staff of the incident; however, the FFA did not submit a SIR via ITrack as required. According to CCL's Facility Evaluation Report, the FFA's Administrator will ensure all reportable incidents are reported in accordance with Title 22 guidelines. The FFA was not required to submit a POC.

Recommendations

The FFA's management shall ensure:

1. SIRs are submitted for all reportable incidents via ITrack; that submitted SIRs contain detailed information about the incident and are reported to OHCMD and all appropriate parties in a timely manner.

2. The FFA establishes an oversight plan to ensure all certified foster homes comply with the County contract and CCL regulations regarding Licensure/Contract Requirements.

Certified Foster Homes

- All four of the certified foster parents' files reviewed, revealed that they did not complete the required minimum 15 hours of annual training in accordance with County contracts. The FFA combined the certified foster parents' CPR/First Aid Training hours with other training hours to meet the 15 hour requirement. OHCMD reminded the FFA that CPR/First Aid Training is a separate training and that CPR/First Aid training hours do not count toward the annual training requirement. During the Exit Conference, the FFA's representative stated the FFA will ensure that all certified foster parents complete the 15 hours of annual training as required by the County contract, in addition to the CPR/First Aid training hours.

Recommendation

The FFA's management shall ensure:

3. Certified foster parents complete the required number of annual training in accordance with the County contract.

Facility and Environment

- During a home visit to a certified foster home, OHCMD noted there were a lot of canned - goods, yet there was an inadequate amount of nutritious and perishable food in the home. Upon random inspection, it was noted that two cans had passed the expiration date. Further, the certified foster parent did not appear to be aware of the importance of maintaining nutritious and fresh food. During the Exit Conference, the FFA's representative stated that the FFA will monitor compliance and ensure that adequate amount of fresh produce are available for the placed children.

Recommendation

The FFA's management shall:

4. Provide training to all certified foster parents on the importance of maintaining nutritious and fresh food for the placed children and ensure they have adequate supply of perishable and non-perishable food that adhere to product expiration dates.

Maintenance of Required Documentation and Service Delivery

- Four children's Needs and Services Plans (NSPs) did not have their Department of Children and Family Services (DCFS) Children's Social Worker's (CSW) signatures approving implementation or proof that the FFA made more than one attempt to obtain the CSW's signatures. It was also noted that a certified foster parent of two children did not participate in the development of the children's NSPs. Further, one child's NSP did not contain documentation of the child's unmet goals nor the FFA's efforts to assist the child towards meeting the goals. In addition, three children's Initial NSPs and three children's updated NSPs were not specific and goals were not measurable.

  During the Exit Conference, the FFA's representative stated the FFA will train the FFA social workers and certified foster parents on NSP requirements and ensure that all contacts with DCFS CSWs are documented in the children's case files.

  It should be noted that the FFA representatives attended the OHCMD NSP Training for providers on January 23, 2012 and were made aware of the NSP requirements. The NSPs reviews were developed subsequent to the training.

Recommendations

The FFA's management shall ensure:

5. NSPs are sent to the children's respective DCFS CSWs for their approval; that attempts to obtain the signatures are documented and placed in the children's case files.

6. NSPs contain documentation that the certified foster parents were offered the opportunity to participate in the development of the children NSPs.

7. Children's NSPs include assessment of their unmet goals and FFA's efforts made to assist them in reaching them.

8. Initial NSPs comply with County contract requirements and are comprehensive.

9. Updated NSPs comply with County contract requirements and are comprehensive.

10. Quarterly Reports are completed in a timely manner and proof of mailing is documented and placed in the children's case files.

Health and Medical Needs

- Verification for one child's initial medical and dental examinations and two children's annual dental examinations were missing from their case files. Therefore, OHCMD was unable to determine if examinations were conducted timely. During the Exit Conference, the FFA's administrator stated that the FFA will ensure that all children's medical and dental examinations are completed in a timely manner. Further, the FFA will ensure documentation of children's medical and dental treatment are obtained and placed in the children's case files. The FFA subsequently submitted verification of the children's medical and dental exams. The verification revealed that the exams were conducted timely.

Recommendations

The FFA's management shall ensure that:

11. All placed children's initial medical examinations are timely and documentation is maintained in the children's files.

12. All placed children's initial dental examinations are timely and documentation is maintained in the children's files.

13. All placed children's follow-up dental examinations are timely and documentation is maintained in the children's files.

Psychotropic Medication

- Two children's prescribed psychotropic medications did not have documentation of regular evaluations by their psychiatrists in their case files. During the Exit Conference, the FFA's representative stated that the FFA will ensure that all of psychiatrists' visits are documented and the information is placed in the children's case files.

Recommendation

The FFA's management shall ensure that:

14. Psychiatric evaluations are obtained for children prescribed Psychotropic medications and placed in the children's case files.

Personnel Records

- For one part-time FFA social worker, there was no documentation on file indicating that their total caseload would not exceed 15 children. In the Exit Conference, the FFA's representative stated that the FFA will ensure all part-time FFA social workers complete the declaration indicating their caseloads are not to exceed 15 children.

The FFA's management shall ensure that:

15. All part-time FFA contracted social workers have a declaration stating their caseloads are not to exceed 15 children.

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

The OHCMD's last compliance report dated November 16, 2012 identified 18 recommendations.

Results

Based on our follow-up, the FFA fully implemented 11 of 18 previous recommendations for which they were to ensure:

- The FFA contact the required number of references prior to certification and written verification is maintained in the certified parents' files.

- All certified foster parents have timely health screenings and verification of TB tests on file with the FFA.

- The FFA completes annual assessments/evaluations of all certified foster homes, prior to the annual certification and that documentation is maintained in the certified foster parents' files.

- All other adults, such as frequent visitors and/or designated care providers for placed children have the required documents on file with the Agency.

- All children are encouraged and assisted in creating and updating a Life Book/Photo Album.
- All FFA employees' health screenings are completed within the required timeframe and documentation is maintained in the files.
- All FFA social workers receive and sign the FFA's policies and procedures and documentation is maintained in the FFA personnel files.
- All FFA social workers receive the required initial training upon hire and documentation is maintained in the FFA personnel files.
- Children are informed about their medications.
- Children are informed of their right to refuse medication.
- Children are made aware that they may reject voluntary medical, dental and psychiatric care.

Results

Based on our follow-up, the FFA did not fully implement 7 of 18 previous recommendations for which they were to ensure:

- All submitted SIRs are reported to OHCMD and all appropriate parties timely.
- FFA certified homes comply with CCL regulations concerning Children's Safety/Physical plant and other Licensure/Contract Requirements.
- All children's NSPs are sent to the case-carrying CSWs for authorization to implement the plans and documentation is maintained in the children's files.
- All initial children's NSPs are comprehensive.
- All children's updated NSPs are comprehensive, including child specific, measurable, and time-framed goals.
- All children's initial medical examinations are timely and documentation is maintained in the children's files.
- All children's initial dental examinations are timely and documentation is maintained in the children's files.

The FFA management shall ensure that:

16. The outstanding recommendations form the 2011-2012 monitoring report dated November 16, 2012, which are noted in this report as Recommendations 1, 2, 5, 8, 9, 11, 12 are fully implemented.

SOUTH BAY BRIGHT FUTURE FOSTER FAMILY AGENCY
CONTRACT PROGRAM COMPLIANCE MONITORING REVIEW SUMMARY

24404 Vermont Avenue. Suite 206
Harbor City, California 90710
License # 198201659

	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. Improvement Needed
	3. Runaway Procedures in Accordance with the Contract	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 (WFFH) Training	5. Full Compliance
	6. FFA Pays Certified Foster Parents (CFP) WFFH Required Supplemental Payments	6. Full Compliance
	7. FFA Conducts an Assessment of 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 Conducted Prior to Certification	1. Full Compliance
	2. Agency's inquiry with OHCMD for Historical Information Prior to Certification	2. Full Compliance
	3. Timely Criminal Clearances (DOJ, FBI, CACI) Prior to Certification	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. All Required Training Prior to Certification	6. Full Compliance
	7. Certificate of Approval on File/Including Capacity	7. Full Compliance
	8. Safety Inspections Completed At Least Every Six Months or Per Approved Program Statement	8. Full Compliance
	9. Completed Annual Training Hours for Re-certification and Current CPR/First-Aid/Water Safety Certificates	9. Improvement Needed
	10. Current CDL/Auto Insurance/Annual Vehicle Maintenance Documentation for CFPs and Designated Drivers, if Applicable Car Seat(s)	10. Full Compliance
	11. Criminal Clearances and Health Screening/CDL/CPR DOJ/FBI/CACI/Auto Insurance for Other Adults in the Home	11. Full Compliance
	12. FFA Assists CFPs in Providing Transportation Needs	12. Full Compliance

III	**Facility and Environment** (7 Elements)	
	1. Exterior/Grounds Well Maintained	1. Full Compliance
	2. Common Areas/Interior Well Maintained	2. Full Compliance
	3. Children's Bedrooms/Interior Well Maintained	3. Full Compliance
	4. Sufficient and Appropriate Educational Resources	4. Full Compliance
	5. Adequate Perishable and Non-Perishable Food	5. Improvement Needed
	6. CFP Conducted Disaster Drills and Documentation Maintained	6. Full Compliance
	7. Money and Clothing Allowance Logs Maintained	7. Full Compliance
IV	**Maintenance of Required Documentation/Service Delivery** (10 Elements)	
	1. FFA Obtains or Documents Efforts to Obtain County Children's Social Worker's (CSW) 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. Improvement Needed
	4. FFA Social Workers Develop Timely, Comprehensive Initial NSP with Child's Participation	4. Improvement Needed
	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 Social Workers Monthly Contacts Documented in Child's Case File	8. Full Compliance
	9. FFA Social Workers Develop Timely, Comprehensive Quarterly Reports	9. Full Compliance
	10. FFA Social Workers Conduct Required Visits	10. Full Compliance
V	**Education and Workforce Readiness** (5 Elements)	
	1. Children Enrolled in School within Three School Days	Full Compliance (ALL)
	2. Children Attend School as Required and FFA Facilitates in Meeting Children's Educational Goals	
	3. Current Children's Report Cards/Progress Reports Maintained	
	4. Children's Academic Performance and/or Attendance Increased	
	5. FFA Facilitates Child's Participation in YDS or Equivalent Services and Vocational Programs	

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. Improvement Needed 4. Improvement Needed
VII	**Psychotropic Medication** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	 1. Full Compliance 2. Improvement Needed
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 Choices 7. Children's Chores Reasonable 8. Children Informed About Their Medication and Right to Refuse Medication 9. Children Aware of Right to Refuse or Received 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	Full Compliance (ALL)

	7. Encouragement/Assistance with Life Book	
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, Child, 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	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Improvement Needed

At the Exit Conference, the FFA representatives expressed their desire to remain in compliance with all Title 22 Regulations and Contract requirements. To ensure that SIR reporting protocol is followed, the FFA will retrain the FFA social workers and certified foster parents on SIR reporting protocol. Further, the Administrator will be responsible for documenting all the incidents reported by the FFA social workers and/or the certified foster parents and for submitting the SIR to all appropriate parties. To ensure the development of comprehensive Initial and Updated NSPs, the FFA Administrator will review the NSPs prior to submittal, and will conduct weekly meeting supervision during which the children's progress toward achieving NSP goals will be addressed. Additionally, the FFA Administrator will ensure all efforts made to obtain the DCFS CSW's authorization to implement NSPs are documented. The FFA Administrator will utilize their Quality Assurance Tool to monitor compliance with the CAP.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

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

SOUTH BAY BRIGHT FUTURE, INC.
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April 18, 2013

DCFS Out of Home Care Management Division

Attn: Nestor Figueroa, Manager

FAX: 626.572.2368

RE: Corrective Action Plan (CAP)

Dear Mr. Figueroa,

Please find attached the following CAP for the South Bay Bright Future Foster Family Agency (SBBFFFA) as requested by Gladys Hiyadet on March 27, 2013 related to SBBFFFA Monitoring Review Exit Summary.

LICENSURE/CONTACT REQUIREMENTS

Are special incidents reports (SIRs) appropriately documented and cross-reported?

CAP: The agency shall ensure that all Special Incident Reports are appropriately documented and cross reported in the timely manner. Agency social workers and certified foster parents **have been informed that is mandatory to report timely and detailed Special Incidents to the Administrator.** The administrator shall be the person responsible for documenting all the information from agency social workers and certified foster parents and reporting Special Incidents /cross reports to all appropriate parties (CSW, CCL, OHC Management.) The effective date is March 27, 2013. (SAFETY)

CERTIFIED FOSTER HOMES

Have foster parents completed the required additional annual training of 12 hours during the first year and 15 hours every year thereafter, as well as CPR, First-Aid and Water Safety certification (if applicable)

CAP: The agency shall ensure that all certified foster parents with SBBFFFA shall complete **12 hours** during the first certified year and **15 hours** annually thereafter. In addition, the Administrator shall ensure that the **15 hours** do not include CPR, First-Aid and Water Safety certification training.

Further, the agency shall ensure that all certified foster parents receive CPR, First-Aid and Water Safety as required. The Administrator shall be the person responsible for the aforementioned. The effective date is March 27, 2013. (SAFETY)

FACILITY AND ENVIRONMENT

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

CAP: The agency shall monitor for compliance that all certified homes maintain a minimum of three meals of non-perishable foods, including snacks. In addition, all products shall be adhered to the product's "used or freeze by, "best used by", "sell by" and expiration date. In addition, the Supervisor shall monitor for compliance during weekly supervision with social workers that the aforementioned as well as **fresh fruits and vegetables** are part a healthy nutritional meal and shall be included in daily meals. The Quality Assurance tool shall be used to monitor for compliance and the Administrator will review and track the compliance. The effective date is March 27, 2013. (WELL-BEING)

MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

(# 27) Did the FFA obtain or document efforts to obtain the County's worker authorization to implement the NSP?

CAP: The agency shall monitor for compliance that **a minimum of three attempts** are made by SBBFFFA to County worker(s) for authorization to implement NSP(s). The attempts will be made vie email or fax and all attempts/efforts shall be documented. The Quality Assurance tool shall be used to monitor the attempts and the Administrator will review and track the compliance. The effective date is March 27, 2013. (WELL- BEING)

(#28) Do certified foster parents participate in development of the NSP's?

CAP: The agency shall monitor for compliance that **all** certified foster parents participate in the development of **every** NSP(s). The Supervisor shall monitor for compliance during weekly supervision with agency social worker. The Quality Assurance tool shall be used to monitor the participation in the development of the NSP(s) and the Administrator will review and track the compliance. The effective date is March 27, 2013. (WELL-BEING)

(#29) Are the placed children progressing toward meeting the NSP's case goals (initial and updated)? (review agency's documentation of their efforts)

CAP: The agency shall monitor for compliance that all NSP (s) are developed with specifics and are measurable. In addition, specific services shall be put in place when needed for placed children to assist them in meeting the NSP goals. The Supervisor shall monitor during weekly supervisory meeting with social workers to ensure that the aforementioned is being met. The Quality Assurance tool shall be used to monitor the progress of the case goals both with initial and updated NSP (s). The Administrator will review and track the compliance. The effective date is March 27, 2013. (WELL-BEING)

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

CAP: The agency shall monitor for compliance that all developed initial NSP (s) are developed with the placed child. The Supervisor shall monitor for the participation of the child with the development of the NSP during weekly supervision. The Quality Assurance tool will be used to monitor this matter and the Administrator will review and track compliance. The effective date is March 27, 2013. (WELL-BEING)

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

CAP: The agency shall monitor for compliance that all updated (NSP's) are developed timely, comprehensive and includes the participation of the placed child and the certified parent. The Supervisor shall monitor for compliance during weekly supervision with social workers that the aforementioned is being met. The Administrator shall utilize the Quality Tool to review and track compliance. The effective date is March 27, 2013. (WELL-BEING)

(#32) When applicable, are children receiving necessary therapeutic services? (i. e., indiv. group therapy, substance abuse counseling, etc.)

CAP: The agency shall monitor for compliance that every placed child that requires therapeutic services receives such treatment. The Supervisor shall monitor for compliance during weekly supervision. The Quality Assurance tool will be used to monitor the aforementioned and the Administrator will review and track compliance. The effective date is March 27, 2013. (WELL-BEING)

(#35) **Does the FFA social worker complete timely, comprehensive, quarterly reports? (to County workers by 10th business days following the end of each quarter from the date the child was placed.)**

CAP: The agency shall ensure that all initial and timely NSP (s) are developed timely and comprehensive to include placed child and certified parent participation, all required signatures are provided and the reports are submitted to county workers by the 10th business day following the end of each quarter from the date the child was placed.

The Supervisor shall ensure during weekly supervision with social workers that the aforementioned is being met. The Administrator shall use the Quality Assurance tool to review and track the compliance. The effective date is March 27, 2013. (WELL-BEING)

(#42 & 44) Are initial /dental medical examinations conducted timely?

CAP: The agency shall ensure that initial/medical/dental examinations are conducted timely by using the Foster Track System. In addition, the Supervisor shall ensure the exams are conducted timely during weekly supervision with social workers. The Quality Assurance tool will monitor the aforementioned and the Administrator will review and track compliance. The effective date is March 27, 2013. (WELL-BEING)

(#43 & 45) Are follow-up medical/dental examinations conducted timely?

CAP: The agency shall ensure that follow-up medical/dental examinations are conducted timely by using the Foster Track System. In addition, the Supervisor shall ensure that the follow-up exams are conducted timely during weekly supervision with social workers. The Quality Assurance tool will monitor the timely examinations and the Administrator will review and track compliance. The effective date is March 27, 2013. (WELL-BEING)

(#47) Is there a current psychiatric evaluation/review for each child on psychotropic medication?

CAP: The agency shall monitor for compliance that all minors prescribed psychotropic medication are evaluated/reviewed monthly or as directed by psychiatrist. The Supervisor shall monitor for compliance during weekly supervision with social workers. The Quality Assurance tool shall also be used to monitor the timely evaluations/reviews and the Administrator will review and track compliance. The effective date is March 27, 2013. (WELL-BEING)

ADDENDUM TO CAP 2013

(42 & 44) Are initial/dental medical examinations conducted timely?

CAP: The agency shall ensure that initial/medical examinations are conducted timely by implementing the following:

- Upon placement certified parent shall be informed that it is extremely important that the minor must have the initial medical/dental exam within the next 30 days.
- In addition, social workers are being informed that in addition to the certified parents being held responsible for the exams, social workers are being held responsible, as well. Although, the CAP is basically the same as the one provided in CAP 2012, as of January 2013 the agency has a new administrator and the agency is moving in new directions which include conducting initial exams timely. The administrator is the person responsible for implementing the aforementioned.

(43 & 45) Are follow-up medical/dental examinations conducted timely?

CAP: The agency shall ensure that follow-up medical/dental examinations are conducted timely by implementing the following:

- Although CAP 2013 was similar to CAP 2012 a new administrator was employed by the agency as of January 2013 and the agency is moving in different directions including meeting all timely follow-up exams.
- As stated in the original CAP 2013 the Foster Track System shall be utilized in tracking required follow-up exams. In addition, during weekly supervision with social workers the supervisor shall monitor for compliance. The administrator is the person responsible for implementing the aforementioned.