

County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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March 12, 2021

To:

Supervisor Hilda L. Solis, Chair Supervisor Holly J. Mitchell Supervisor Sheila Kuehl Supervisor Janice Hahn Supervisor Kathryn Barger

Bobby/D. Cagle

From:

Director

FUTURO INFANTIL HISPANO INTENSIVE SERVICES FOSTER CARE FOSTER FAMILY AGENCY FOR CHILDREN WITH SERIOUS EMOTIONAL AND BEHAVIORAL NEEDS CONTRACT COMPLIANCE REVIEW

REVIEW OF REPORT

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a virtual Contract Compliance Review of the Futuro Infantil Hispano Intensive Services Foster Care (ISFC) Foster Family Agency (FFA) for Children with Serious Emotional Behavioral Needs (SEBN) (the Contractor) in May 2020. The Contractor has two offices: one located in the First Supervisorial District; and one located in San Bernardino County. All offices provide services to the County of Los Angeles DCFS placed children, Probation foster youth, children placed by other counties; and Non-Minor Dependents.

Key Outcomes



CAD conducted a virtual Contract Compliance review of the Contractor's compliance within the following applicable areas of their ISFC-FFA SEBN contract: General Contract Requirements; Resource Family Home (RFH) Requirements; Facility and Environment; Engagement and Teamwork; Needs and Services Plans; Safety; Permanency; Support Services; Personal Rights and Social/Emotional Well-Being; Discharge Planning; and Personnel Files.

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The Contractor was in full compliance with 7 of 11 applicable areas of CAD's Contract Compliance Review: Resource Family Home Requirements; Engagement and Teamwork; Safety; Permanency; Personal Rights and Social/Emotional Well-Being; Discharge Planning; and Personnel Files.

For the purpose of this review, three DCFS placed youth files were selected for the sample. CAD reviewed the files of the three selected youth and interviewed the three youth to assess the level of care and services they received.

CAD reviewed two RFHs files and two staff files for compliance with Title 22 Regulations and County contract requirements. CAD also conducted interviews with the staff and the Resource Families. To assess the quality of care and supervision provided to the placed children, DCFS conducted virtual site visits at the Contractor's location and the RFHs.

CAD noted findings in the areas of:

Priority 1

- General Contract Requirements
 - The Contractor did not provide the required staffing based on the child's ISFC medical needs and in accordance with the contract requirements (limits on dual roles, and the staff to child ratio).
- Facility and Environment
 - The common quarters of the ISFC-FFA home did not meet all required health and safety standards. Medicines were not properly stored and locked. Knives and sharp objects were not safely stored and locked.

Priority 2

- General Contract Requirements
 - The required parties were not notified of a threat or serious incident (or sign of either) within 24 hours and in accordance with Special Incident Reporting (SIR) guidelines. SIRs were not cross-reported appropriately to all parties in the i-Track system.
- Support Services
 - Educational services and supports were not provided as required. School enrollment was not completed timely.

Priority 3

- Needs and Services Plans (NSP)
 - The NSPs were not comprehensive, complete and were not in compliance with all requirements.

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On July 16, 2020, the DCFS CAD Children Services Administrator I and II, and the Out-of-Home Care Management Division Quality Assurance Specialist and Quality Assurance Manager with the Bureau of Clinical Resources and Services, held an exit conference with the Contractor's ISFC-FFA SEBN representatives.

The Contractor's representatives agreed with the review findings and recommendations, and were receptive to implementing systemic changes to improve the Contractor's compliance with regulatory standards.

The Contractor provided the attached approved Corrective Action Plan addressing the noted deficiencies in this compliance report.

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

BDC:KDR LTI:gt

Attachments

c: Fesia Davenport, Chief Executive Officer Arlene Barrera, Auditor-Controller Adolfo Gonzales, Chief Probation Officer Brandon Nichols, Chief Deputy Probation Officer, Public Information Office Audit Committee Sybil Brand Commission Jose E. Tejeda, Interim Executive Director, Futuro Infantil Hispano Kellee Coleman, Regional Manager, Community Care Licensing Division Monique Marshall-Turner, Regional Manager, Community Care Licensing Division



Aug. 12, 2020

DCFS-Contracts Adm Div Compliance Section Attn.: Grace Tamase, CSA I 3530 Wilshire Blvd, 4th Flr. Los Angeles, CA 90010

RE: Corrective Action Plan for FIH FFA ISFC-SEBN Contract Compliance Review

Dear Ms. Tamase,

Attached is the Corrective Action Plan (CAP) for the FIH ISFC-SEBN Contract Compliance Review due by 8/17/2020 addressing the deficiencies cited in the FFA ISFC-SEBN Exit Summary Report revised 7/16/2020 and received 7/27/2020.

The FIH FFA ISFC-SEBN CAP includes relevant time frames, the steps the FFA will utilize to prevent future violations in these areas, and identify the position of the person who will be responsible for ensuring that the CAPs will be fully implemented.

It was a pleasure working with you.

Sincerely.

Lily Olán, MSW Administrator



FIH FFA ISFC-SEBN 2020 CAP for Exit Summary Report

I. GENERAL CONTRACT REQUIREMENTS

7. The agency provided the required staffing based on the child's (ISFC) medical necessity and in accordance with the contract requirements (limits on dual roles, ratio staff to child).

The finding to be addressed is for the agency to provide the required staffing based on the child's (ISFC) medical necessity and in accordance with the contract requirements (limits on dual role, ratio staff to child). The FIH FFA administrator arranged for the ISFC supervisors to conduct an ISFC caseload review at the 7/30/2020 management team meeting to ensure agency compliance on required staff to child ratio by ISFC supervisors. It was agreed and established to continue such caseload reviews at subsequent scheduled monthly management team meetings upon any changes in ISFC FCSW caseload. This implementation and practice will allow the agency to track and adjust the required staff to child ratio in accordance with the contract requirements.

The meeting was at least an hour in length and provided via video technology (ZOOM) and electronic sign-is available in agency records.

8. The required parties were notified of a threat or serious incident (or sign of either) within 24 hours and in accordance with SIR guidelines.

FIH FFA addressed the finding through an in-service training arranged by the FFA administrator in collaboration with the DCFS Technical Assistant Specialist. The training was a SIR Review with the SIR Guidelines at the FIH General Staff Meeting/In-Service Training on 8/3/2020 via ZOOM and included ISFC staff. The SIR Guidelines was made available to all staff and it is to be used immediately and ongoing to determine if SIR is I-Trackable, who it is cross reported to and the required reporting timeframes.

The training should help correct the deficiency and assist social workers on complying with cross reporting in addition to assisting the supervisors reviewing the SIRs to ensure that the SIRs are accurate and complete.

III. FACILTY & ENVIRONMENT

18. The common quarters of the ISFC home met all required health and safety standards.

18h. Medicines are properly stored and locked according to the prudent parent.



FUTURO INFANTIL HISPANO Foster Family Agency

FIH FFA administrator took immediate action necessary on 7/6/2020 to have ISFC FCSW and supervisor correct the deficiency and administrator provided the CAD reviewer photos verifying the deficiency was corrected with proper storage of all psychotropic medications including the daily ones that ISFC minor has to visually be able to see to remember to take his psychotropic medication(s) for the day.

The ongoing correction will be implemented through documentation of the monthly visit on a RP contact note (see attached FIH FFA "Resource Parent Contact Record" item #3) of the ISFC resource home (RH) reviewed by the ISFC supervisor to ensure it indicates that all psychotropic medications are properly stored and locked.

The FFA administrator has arranged in-service training on 8/17/2020 for all agency social workers and supervisors on the topic of properly storing and locking psychotropic medication including the documentation of compliance on the RP monthly contact note.

The training is an hour in length and provided via video technology (ZOOM) and electronic sign-in and agenda filed in agency records.

The training should help correct the deficiency and assist social workers comply with the documentation that psychotropic medications are properly stored and locked and compliance is maintained. The supervisors will ensure compliance of the requirement being maintained through their monthly review of the documented RP monthly contact note for the RP file.

18i. Knives and sharp objects are safely stored and locked.

FIH FFA administrator took immediate action necessary on 7/6/2020 to have the ISFC FCSW and ISFC supervisor correct the deficiency and administrator provided the CAD reviewer a photo certifying the deficiency was corrected through the proper storage and locking of knives.

The ongoing correction will be implemented through the documentation by the ISFC FCSW on a monthly home visit contact note (see attached FIH FFA "Resource Parent Contact Record" item #13) reviewed by the ISFC supervisor. The ISFC supervisor will review the monthly contact note to ensure proper documentation and compliance is maintained.

The FFA administrator has arranged in-service training on 8/17/2020 for all agency social workers and supervisors on the topic of properly storing and locking knives in addition to the documentation of compliance on the monthly RP contact note.

The training is an hour in length and provided via video technology (ZOOM) and electronic sign-in and agenda filed in agency records.

F1H, FFA ISFC-SEBN CAP Date: 8/12/2020



The training should help correct the deficiency and assist social workers comply with knives and sharp objects being safely stored and locked and assist the supervisor to ensure compliance of the requirement through their monthly review of the documentation on the RP monthly contact note.

V. NEEDS AND SERVICES PLANS

24. Individualized NSPs were comprehensive, complete and in compliance with all requirements including being timely, trauma informed, culturally relevant and age and developmentally appropriate.

24a. Individualized NSPs were comprehensive, complete and in compliance with all requirements including timeliness, being trauma informed, culturally relevant and age and developmentally appropriate.

FIH FFA addressed the finding through an in-service training the administrator arranged to be conducted by the social work management team inclusive of ISFC staff to develop and implement the new NSP Required Attachment Checklist (see attached) and review the NSP Smart Goals and NSP Template on 7/20/2020 staff meeting/in-service training. Staff is expected to use the new NSP Required Attachment Checklist, NSP Smart Goals and Template made available effective immediately and ongoing for NSPs' timeliness, being trauma informed, culturally relevant and age and developmentally appropriate and to ensure NSPs are comprehensive, complete and in compliance with all of the following.

- a. Any outcome goal modified that modification reason is documented.
- b. Initial school enrollment form should be on the 30 days Initial NSP report.
- c. The use of the NSP Checklist will ensure the following documents are attached on NSPs.
- d. Clothing inventory,
- e. SIRs,
- f. Medical Exam (initial HUB clearance, initial medical exam or any medical related exam done during reporting period),
- g. Dental Exam (if applicable as soon as child has teeth or age 3),
- h. PMA (if applicable & if PMA hasn't been processed yet, PMA activity logs,
- i. IEP (if applicable),
- j. Report Card/Progress Report/any school document such as an initial school enrollment form (if applicable), certificates of achievement, student of the month, etc),
- k. CFT meeting notes, if CFT was requested but not completed during reporting period; then all emails/progress notes pertaining to any CFT documentation.
- 1. Any documentation related to Mental Health referral or a progress report from mental health provider,
- m. If a child is age 10 or over you, have the following attachment:

-Sexual Health & Reproductive form (with all signatures). This should be an attachment in the initial 30 Days Report/NSP.

FIH, FFA ISFC-SEBN CAP Date: 8/12/2020



-If children turn 10 years old during placement, attach it to the NSP that covers the next reporting period,

-If a children are 14 and over, attach the TILP and if no TILP is on file then all email/progress note communications with CSW regarding obtaining it needs to be stated on report and -Any ILP certificates or classes completed by children (usually there is a flyer or some proof of the ILP class).

The training was at least an hour in length and provided via video technology (ZOOM) due to and electronic sign-is available with agenda in agency records.

The training should assist correct the deficiency and help ISFC social workers complete NSPs accurately and on time and assist ISFC supervisors reviewing the NSPs to ensure these are complete, accurate and comprehensive prior to the due date of the report to the County placing agency.

VIII. SUPPORT SERVICES

35. Educational services and supports were provided as required.

35a. School enrollment was completed immediately upon the child's placement, or in the event of an acute issue, a written certification from a mental health or medical provider was provided to County Worker.

The reason for the deficiency was due to the ISFC FCSW reporting the date the enrollment was completed instead of when the enrollment began on the ISFC minors' School Enrollment form. The FFA administrator arranged for the supervisors including the ISFC supervisors to provide all social workers in-service training on 8/17/2020 on the requirement of school enrollment being immediately and a review of the proper completion of the School Enrollment form which is to be included with the 30 Days Initial/NSP report to the County placing agency per the new the new NSP Required Attachment Checklist implemented.

Effective immediately and ongoing all supervisors will be doing an ongoing review of the "School Enrollment" form to ensure that the information on the form is accurate and complete and is attached to the 30 Days Initial/NSP report to the County placing agency.

In-service training is at least an hour in length and provided via video technology (ZOOM) and electronic sign-in available with agenda in agency records.

Sincerely. Lily Olan, MSW FIH FFA Administrator

FIH, FFA ISFC-SEBN CAP Date: 8/12/2020