



BRANDON T. NICHOLS  
Director

# County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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November 2, 2023

To: Supervisor Janice Hahn, Chair  
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Supervisor Kathryn Barger

From: Brandon T. Nichols *Cynthia May Miller for*  
Director

## FRED JEFFERSON MEMORIAL HOME FOR BOYS FOSTER FAMILY AGENCY 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 Fred Jefferson Memorial Home for Boys Foster Family Agency (FFA) (the Contractor) in May 2022. The Contractor has three offices: one located in the Second Supervisorial District, one located in the Fifth Supervisorial District, and one located in Riverside County. The offices provide services to the County of Los Angeles DCFS placed children, Probation foster youth, children placed by other counties, and Non-Minor Dependents.

On May 3, 2023 this Contractor was placed on Investigative Hold. This was transitioned to a Termination Hold on August 1, 2023, and the placed children are being transitioned. The FFA contract will be terminated when the transitions are completed and this agency provides notice it intends to forfeit its FFA Facility Licenses effective October 31, 2023.

### Key Outcomes

NUMBER OF PRIORITY FINDINGS
PRIORITY 1 4
PRIORITY 2 71
PRIORITY 3 0

*"To Enrich Lives Through Effective and Caring Service"*

CAD conducted a virtual Contract Compliance Assessment review of the Contractor's compliance within the following applicable areas: General Contract Requirements; Resource Family Home (RFH) Requirements; Facility and Environment; Engagement and Teamwork; Needs and Services Plans (NSPs); Permanency; Education and Independent Living Program Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Files.

The Contractor was in full compliance with 2 of 11 applicable areas of CAD's Contract Compliance Review: RFH Requirements and Personal Needs/Survival and Economic Well-Being.

For the purpose of this review, 10 DCFS placed children were selected for the sample. CAD reviewed the files of the 10 selected children and virtually interviewed eight to assess the level of care and services they received; two children (ages 5 and 7 years) were too young to be interviewed and were virtually observed to be clean and well-groomed. An additional four discharged children files were also reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed four RFH files and five staff files for compliance with Title 22 Regulations and County contracting requirements. CAD also conducted telephonic interviews with staff and the Resource Family Parents. To assess the quality of care and supervision provided to the placed children, CAD also conducted virtual site visits of the Contractor locations and RFHs.

CAD noted findings in the areas of:

***Priority 1***

- General Contract Requirements (4 findings)
  - Special Incident Reports for four children were not properly cross-reported in the iTrack system.

***Priority 2***

- General Contract Requirements (6 findings)
  - Disaster drills were not conducted and documented in one Resource Foster Parent case file.

- Five Special Incident Reports were not properly documented in the Needs and Services Plans (NSPs).
- Engagement and Teamwork (25 findings)
  - The Child and Family Team (CFT) members/participants for ten children were not identified and the FFA efforts to obtain the information were not documented and maintained.
  - Efforts to collaborate and participate in the ten children CFT meetings were not documented.
  - Five children NSPs were not in alignment with services identified in the CFT notes.
- Facility and Environment (1 finding)
  - One child bedroom was not safe and well maintained; a minor shared a room with an adult.
- NSPs (12 findings)
  - Five children NSPs were not comprehensive and accurate.
  - One child NSP was not comprehensive and accurate; did not include Case Plans and a Concurrent Case Plan Goal; and missing the Children's Social Worker/Deputy Probation Officer signatures.
  - Two children NSPs were not comprehensive and accurate; and missing the Children's Social Worker/Deputy Probation Officer signatures.
  - Educational support services were not in place to meet the overall well-being of a child and efforts to obtain support services were not documented.
  - Trauma-informed services for three children were not documented in the NSPs.
- Permanency (2 findings)
  - A discharge summary was not submitted to identify that a child was discharged in accordance to the child's permanency plan.

- After support services were not identified and linkages were not made available to ensure a child was successfully transitioned to a permanent home-based care.
- Education and Independent Living Program Services (10 findings)
  - One child report card and progress report were not maintained in the files.
  - The FFA did not document collaborative efforts with the three children's educational rights holder.
  - The FFA did not document its efforts to maintain six children in their school of origin.
- Health and Medical Needs (7 findings)
  - Three children required follow-up dental examinations were not conducted timely.
  - The FFA did not provide sexual and reproductive health rights information to four age-appropriate children.
- Personal Rights and Social/Emotional Well-Being (2 findings)
  - One child reported the consequences for not following the rules were not fair.
  - One child reported not participating in CFT meetings.
- Personnel Files (6 findings)
  - One employee criminal record statement was not properly completed and missing the FFA name and organization number.
  - One employee did not receive the required one-hour initial Child Abuse Identification and Reporting training.
  - One employee did not receive the required initial Reproductive and Sexual Health training.
  - Three employees did not receive the annual on-going Reduction of Law Enforcement Involvement training.

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On August 18, 2022, the Children Services Administrator teams from DCFS' CAD and the Out-of-Home Care Management Division held an exit conference with the Contractor representatives. The follow-up to assess the Corrective Action Plan implementation began in January 2023 and the Calendar Year FFA Compliance Review was scheduled to start in March 2023. The Contractor delayed the entrance until May 31, 2023 and did not provide the requested documents.

The Contractor 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 findings in this compliance report.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager, at (213) 371-6052.

BTN:KDR  
LTI:lf

#### Attachments

c: Fesia Davenport, Chief Executive Officer  
Oscar Valdez, Auditor-Controller  
Guillermo Viera Rosa, Interim Chief Probation Officer  
Public Information Office  
Audit Committee  
Dr. Jefferson-Freeman, Chief Executive Officer, Fred Jefferson Memorial Home for Boys  
Kellee Coleman, Regional Manager, Community Care Licensing Division  
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division  
Celeste M. Fitchett, MSW, Bureau Chief Fiscal and Performance Audits



LOS ANGELES COUNTY  
FRED JEFFERSON MEMORIAL HOMES (FFA)



Corrective Action Plan

2022

General Contract

5. The FFA ensured disaster drills were conducted and documented in the RFPs case files, occurring at a minimum of every six (6) months. Title 22, Section 80023(d) ILS Section 88487.5 (c)

Facility

Site 937

1. Explain the Cause.

FFA Social Worker #1(Riverside/Discharged on 4/15/22) was trained to conduct disaster drills when they are due. FFA Social Worker #1 failed to conduct and submit the December 2021 disaster drill for RFH #937. FFA Social Worker#1 was contacted by the FFA Social Worker Supervisor on 12/30/21, 1/15/22, 2/1/22 by email and phone.

2. Corrective Action Taken.

Effective 12/01/22 the agency will begin using an email system to remind the FFA Social Workers to complete disaster drills when they are due. The agency will use the attached, Disaster Drill Checklist to track when the FFA Social Workers are completing disaster drills. The new FFA Social Worker for RFH#937 conducted a disaster drill on 5/28/22 to ensure the safety of RFH#937. FFA Social Worker #1 received 2 disciplinary actions dated 2/8/22 and again on 2/17/22. FFA Social Worker #1 was eventually discharged on 4/15/22.

3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Every year, the agency will conduct disaster drills during the first two weeks of June and December. Effective 12/01/22, the FFA Certification Analysts will provide the FFA Social Workers with an email requesting them to complete disaster drills for all Resource Family Homes on their caseloads. The same email will be sent on June 1, 2023. FFA workers will conduct a disaster drill including all occupants of the RFH. The FFA Certification Analyst will use the attached Disaster Drill Check List to document disaster drills as they are submitted by the FFA Social Workers. If the FFA Social Worker is two weeks late, a reminder email will be sent to the FFA Social Worker and FFA Administrator. The FFA Administrator will follow up with the FFA Social Worker to secure a date when the disaster drill will be completed and submitted to the FFA Certification Analyst. The Disaster Drill Checklist will be updated and reported to the FFA Administrator.

1. Special Incident Reports are properly documented.

1a. In the Needs and Services Plans (NSPs) Contract, Exhibit A-5, SOW, Part B, Section 10.4(Contract, Exhibit A-5, SOW, Part B, Section 10.4)

## Facility

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1b. Properly cross-reported in the I-Track system Contract, Exhibit A-5, SOW, Part B, Section 10.4(Contract, Exhibit A-5, SOW, Part B, Section 10.4)

## Facility

Site 931

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### 1. Explain the Cause.

FFA Social Workers #1(Riverside/Discharged on 4/15/22), #3(Gardena), #4(Lancaster/Resigned 12/9/21) failed to follow the protocol for documenting Special Incident Reports on the NSPs. The FFA Social Worker Supervisor failed to check the I-Track System for any SIRs when approving the NSPs. The FFA Social Worker Supervisor failed to cross report a SIR to the OHCMC on I-Track due to lack of training. On 12/28/21, the Administrator did not timely cross report a SIR on I-Track because the resource parent did not report the Covid-19 symptoms and Covid Test appointment in a timely manner. The foster parent and minor started feeling Covid symptoms on 12/25/21. RP took the entire family to be tested on the same day. The RP did not report the incident to the agency until after receiving the test results on 12/28/21. The FFA Administrator conducted a training for all Resource Families to report COVID-19 exposures and symptoms to the agency immediately. On 6/6/2022 the FFA Social Worker Supervisor received training on how to properly cross report SIRs in I-Track. The agency's proper protocol for timely reporting COVID-19 is to notify the FFA Social Worker or the FFA Administrator immediately when a resource family member experiences COVID symptoms or if there has been a possible exposure to COVID-19. When making a SIR, the RPs will provide the FFA Social Workers or FFA Administrator with the COVID symptoms, details regarding the exposure, and the date and location of the scheduled COVID-19 Test. The agency will report the information to I-Track immediately. Once the RP receives the COVID-19 results, they will notify the agency immediately. The agency will update the SIR with an addendum.

### 2. Corrective Action Taken.

On 6/7/2022 the FFA Administrator trained the FFA Social Workers, FFA Social Worker Supervisor, and Resource Families on the proper protocol for reporting Special Incident Reports, with emphasis on COVID -19 exposures and scheduled test appointments. During the training, the Resource Families were reminded to report Special Incidents to the FFA Social Workers and FFA Administrator immediately. The FFA Social Workers were reminded to cross-report SIRs to the appropriate parties. On 9/8/22 the FFA Administrator and FFA Executive Director conducted a training for FFA Social Workers on the protocol and procedures for writing proper NSPs. The training included the procedures for properly documenting SIRs on all NSPs. The training was conducted to ensure that any SIR that occurs during the reporting period is included on the NSP. (Training material attached). In addition, the agency created the attached Quality Assurance Review Form for the FFA Administrator to use when approving Needs and Service Plans before they are submitted to the CSW.

### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Currently the FFA does not have a FFA Social Worker Supervisor. The FFA Social Worker Supervisor resigned on 6/15/22 due to personal family reasons. Until a FFA Social Worker Supervisor is hired, the FFA Administrator will be responsible for approving all NSPs. Prior to submitting NSPs to the CSW, the FFA Social Worker will review the I-Track system for all SIRs submitted during the reporting period. The FFA Administrator will review all NSPs to check for accuracy of reported SIRs during the NSP reporting period. On 10/25/22, all FFA Social Workers were trained on proper cross-reporting in I-Track. The FFA Social Workers were instructed to cross-report all SIRs to the CSW, DPO, OHCMC, and CCL. The Administrator will schedule additional training for FFA Social Workers who have continued errors of cross-reporting. The Administrator will oversee and be responsible for this process.

## Engagement and Teamwork

20. The child's CFT team members/participants are identified and documented in the NSP OR the FFA has documented efforts to obtain the information SOW, Part C, Sections 14.0, 15.5, 19.2, 20.3

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### 1. Explain the Cause.

The FFA Social Worker #1(Riverside/Discharged on 4/15/22), #2 & #3 (Gardena), #4 (Lancaster/Resigned 12/9/21) failed to adhere to policy of requesting CFTs, participating in CFTs and placing copies of all CFT notes in the minors' files. The FFA Social Worker did not follow the protocol to document attempts to request CFT or obtain a copy of the CFT meeting notes.

### 2. Corrective Action Taken.

On 9/8/22 and 10/25/22, the Administrator and Executive Director conducted a training for FFA Social Workers on the procedures and protocol for writing Needs and Service Plans. The FFA workers were trained to document their attempts when requesting a CFT meeting with the child's CSW. The FFA Social Workers were instructed to request a copy of the CFT meeting notes if one was had to identify the CFT Participants. The FFA Social Workers will place a copy of the CFT notes in the minor's file, and the goals from the CFT will be utilized to complete the upcoming Needs and Service Plan. The training was conducted to ensure that the goals from the CFTs are included on the minor's current Needs and Service Plans. (Training material attached)

### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/01/22, the FFA Administrator will be responsible to send the FFA Social Workers a monthly reminder email to contact the CSW for each minor on their caseload. The FFA Administrator has provided examples of the email verbiage (see attached mock emails). The FFA Administrator will use the attached Monthly Email Tracker Log to keep track of the FFA Social Workers who have sent their monthly emails to the CSW. For new placements, the FFA Social Worker will send an introductory email to the CSW. The email will introduce the FFA Social Worker and provide the best contact information and request the CSW's cell number and Supervisor name and email address. The email will request the date, time, and place for the initial CFT. For existing minors, the FFA Social Workers will email the CSW monthly to request and confirm the dates for the next CFT until a CFT has been confirmed. In the body of the email, the FFA Social Worker will provide the CSW with the minor's current behavior updates, adjustment to the home and school. The FFA worker will send a concurrent communication to the FFA Administrator. An individual refresher training will be provided to the FFA Workers who continuously struggle with completing and maintaining CFT meetings and collaboration. To continue with compliance, the FFA Administrator will provide an annual refresher training (every January).

21. The FFA documented efforts to collaborate and participate in the child's CFT meetings OR the FFA obtained copies of the CFT meeting notes SOW, Part C, Sections 14.0



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**1. Explain the Cause.**

The FFA Social Worker #1(Riverside/Discharged on 4/15/22), #2 & #3 (Gardena), #4 (Lancaster/Resigned 12/9/21) failed to adhere to policy of requesting CFTs, participating in CFTs and placing copies of all CFT notes in the minors' files. The FFA Social Worker did not follow the protocol to document attempts to collaborate and participate in the CFT for the child and NMD.

**2. Corrective Action Taken.**

On 9/8/22 and 10/25/22, the Administrator and Executive Director conducted a training for FFA Social Workers on the procedures and protocol for writing Needs and Service Plans. The FFA workers were trained to document their attempts when requesting a CFT meeting with the child's CSW. The FFA Social Workers were instructed to collaborate and participate in the CFT for the minor and NMD. The FFA Social Workers will place a copy of the CFT notes in the minor's file, and the goals from the CFT will be utilized to complete the upcoming Needs and Service Plan. The training was conducted to ensure that the goals from the CFTs are included on the minor's current Needs and Service Plans. (Training materials attached)

**3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.**

Effective 12/01/22, the FFA Administrator will be responsible to send the FFA Social Workers a monthly reminder email to contact the CSW for each minor on their caseload. The FFA Administrator has provided examples of the email verbiage (see attached mock emails). The FFA Administrator will use the attached Monthly Email Tracker Log to keep track of the FFA Social Workers who have sent their monthly emails to the CSW. For new placements, the FFA Social Worker will send an introductory email to the CSW. The email will introduce the FFA Social Worker and provide the best contact information and request the CSW's cell number and Supervisor name and email address. The email will request the date, time, and place for the initial CFT. For existing minors, the FFA Social Workers will email the CSW monthly to request and confirm the dates for the next CFT until a CFT has been confirmed. In the body of the email, the FFA Social Worker will provide the CSW with the minor's current behavior updates, adjustment to the home and school. The FFA worker will send a concurrent communication to the FFA Administrator. An individual refresher training will be provided to the FFA Workers who continuously struggle with completing and maintaining CFT meetings and collaboration. To continue with compliance, the FFA Administrator will provide an annual refresher training (every January).

22. The child's NSPs are in alignment with services as identified in the CFT notes. [SOW, Part C, Sections 14.0, 19.1.2 and Master Contract, Exhibit A, Title 22, 80068.2; 80069.8(k), 88068.2; FFA ILS Chapter 8.8 Section 88289.1; SOW Part C, 14.0 (1-5), 15.1; 19.1.2; & 19.2; Foster Youth Rights Handbook pg.38]

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## 1. Explain the Cause.

The FFA Social Worker #1 (Riverside/Discharged 4/15/22), #2 & #3 (Gardena), #4 (Lancaster/Resigned 12/9/21) failed to adhere to policy of requesting CFTs, participating in CFTs and placing copies of all CFT notes in the minors' files. The FFA Social Worker did not follow the protocol to document attempts to request a CFT or obtain a copy of the CFT meeting notes.

## 2. Corrective Action Taken.

On 9/8/22 and 10/25/22, the Administrator and Executive Director conducted a training for FFA Social Workers on the procedures and protocol for writing Needs and Service Plans. The FFA workers were trained to request and document their attempts when requesting a CFT meeting with the child's CSW. The FFA Social Workers were instructed to collaborate and participate in the CFT for the minor and NMD. The FFA Social Workers will place a copy of the CFT notes in the minor's file, and the goals from the CFT will be utilized to complete the upcoming Needs and Service Plan. The training was conducted to ensure that the goals from the CFTs are included on the minor's current Needs and Service Plans. (Training materials attached)

## 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/01/22, the FFA Administrator will be responsible to send the FFA Social Workers a monthly reminder email to contact the CSW for each minor on their caseload. The FFA Administrator has provided examples of the email verbiage (see attached mock emails). The FFA Administrator will use the attached Monthly Email Tracker Log to keep track of the FFA Social Workers who have sent their monthly emails to the CSW. For new placements, the FFA Social Worker will send an introductory email to the CSW. The email will introduce the FFA Social Worker and provide the best contact information and request the CSW's cell number and Supervisor name and email address. The email will request the date, time, and place for the initial CFT. For existing minors, the FFA Social Workers will email the CSW monthly to request and confirm the dates for the next CFT until a CFT has been confirmed. In the body of the email, the FFA Social Worker will provide the CSW with the minor's current behavior updates, adjustment to the home and school. The FFA worker will send a concurrent communication to the FFA Administrator. An individual refresher training will be provided to the FFA Workers who continuously struggle with completing and maintaining CFT meetings and collaboration. To continue with compliance, the FFA Administrator will provide an annual refresher training (every January).

## Facility And Environment

17. Children's bedrooms were safe and well maintained ILS §88487.1(b)(2) and (c) (1) and (b)(3)

17m. Unless an infant, the child does not share a bedroom with adults (Title 22 84087(b)(6)) and [ILS §88487.1(c)(2)](Title 22 84087(b)(6)) and [ILS §88487.1(c)(2)]

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Site 931

#### 1. Explain the Cause.

The NMD was placed in the home of RFH#931 on 4/19/2020. The NMD was 16 years old at the time of placement. NMD has lived in the home since that time. The NMD turned 18 on 12/6/2021. Prior to the NMD turning 18, she shared a bedroom with another minor who aged out of foster care. A new minor came to the home on 12/27/21. The RP stated she did not consider the age of the NMD because she had just recently turned 18. The RP was more concerned about not placing the new minor in the room with a minor who should not have a roommate. The RP placed the 12-year minor in the room with the NMD in error thinking she would be a better fit based on personality. The FFA Social Worker #4 and the RP failed to follow the protocol stated in Title 22/ILS Version 5 that states unless an infant, the child does not share a bedroom with adults (Title 22 84087(b)(6)) and [ILS §88487.1(c)(2)](Title 22 84087(b)(6)) and [ILS §88487.1(c)(2)].

#### 2. Corrective Action Taken.

On 7/8/22, the RP moved the NMD out of the room with the minor. The NMD shares a room with a minor who is 16 years old. The RP and the FFA Social Worker were trained on the protocol for sleep arrangements for minors and NMD in placement according to Title 22 84087(b)(6)) and [ILS §88487.1(c)(2)](Title 22 84087(b)(6)) and [ILS §88487.1(c)(2)]. On 9/13/22, the FFA Social Worker and RFH #931 was retrained on the proper sleeping arrangements for minors and NMD's as it is stated in Title 22 84087(b)(6)) and [ILS §88487.1(c)(2)](Title 22 84087(b)(6)) and [ILS §88487.1(c)(2)].

#### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

On 10/25/22 all FFA Social Workers were trained on the proper sleeping arrangements for minors and NMD's as it is stated in Title 22 84087(b)(6)) and [ILS §88487.1(c)(2)](Title 22 84087(b)(6)) and [ILS §88487.1(c)(2)] (See attached training material). Effective 12/01/22, the Agency's Web based Case Management System, Extended Reach will be updated with all bedroom assignments for each minor placed in the RFH's. The FFA Social Workers will use the room assignments in Extended Reach to assure that the proper sleeping arrangements are being followed and maintained.

## Needs & Services

23. The NSPs were completed accurately and on time [ILS, §88268.2(c) & 88278.1(a); Master Contract, Exhibit A, SOW, Part C, §§15.0 & 16.8.]

## 23b. Are comprehensive and accurate

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## 23c. Included Case Plans and Concurrent Case Plan

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## 23g. Signed by CSW/DPO (or documented efforts to obtain signature))

Facility

Site 937

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Site 931

## 1. Explain the Cause.

FFA Social Workers #1(Riverside/Discharged on 4/15/22), #2 & #3(Gardena), #4(Lancaster/Resigned 12/9/21) did not write comprehensive, accurate NSP's. The FFA Social Workers did not use SMART Goals. The FFA Social Workers did not remove previous dates for medical and dental exams on the NSP's. The FFA Social Worker #4(Lancaster/Resigned 12/9/21) failed to include the mental health dates and service information for minors who were receiving mental health services. The FFA Social Worker #3(Gardena) failed to obtain the information from the CSW to include a concurrent case plan. The FFA Social Worker #1(Riverside/Discharged) #3(Gardena) failed to obtain a timely signature or document attempts to obtain a timely signature. In some cases, FFA Social Workers did not complete the NSPs in a timely manner, therefore rushing and making unnecessary errors. During this review period there was a previous FFA Social Worker Supervisor who was not able to perform her duties and provide proper supervision to the FFA Social Workers. For this reason the FFA Social Worker Supervisor was discharged from her position.

## 2. Corrective Action Taken.

On 9/8/22 and 10/25/22 the FFA Administrator and FFA Executive Director conducted a training for FFA workers on the procedures and protocol for writing Needs and Service Plans (Training material attached). The training included instructions on writing appropriate goals by using SMART Goal Techniques. During the training, the FFA Social Workers were provided with examples of NSP Reports (attached) to use as a reference when completing NSPs and writing goals. The FFA Workers were instructed to submit their NSP's to the Administrator at least 5 days before the due date for approval. If corrections are required, the Administrator will reject the report and the FFA Social Worker will make corrections and resubmit within 48 hours for a final approval. All NSP's will be submitted in the Provider Management Information System. After the NSP is approved, the FFA Social Workers will submit the approved version to the assigned CSW for a signature. An example of a proficient NSP was provided during the training (Training material is attached).

## 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 09/08/22, the FFA Administrator and Executive Director will work together to provide monthly supervision and training for the FFA Social Workers. The supervision meetings will provide support, training, and ongoing case management monitoring to improve the lack of accuracy and timeliness in writing and completing NSP's. The FFA Administrator will conduct monthly Group Supervision Training Meetings to maintain accountability and provide needed training. The FFA Social Workers who continue to repeat the same errors will be provided with bi-weekly individual supervision meetings with the FFA Administrator until improvement is made.

24. Support services (mentors, Tutoring, IEPs, Regional Center, etc.) are in place to meet each child's overall well-being OR efforts to obtain support services are documented (SOW, Part C, Sections 15.3) AND [ILS, §§88278.1(c) & 88330(e); Master Contract, Exhibit A, SOW, Part C, §15.6.]

Facility

Site 937

### 1. Explain the Cause.

The FFA Social Worker #1(Riverside/Discharged on 4/15/22) did not write a proper educational goal for Child #10. After reviewing child #10's report cards, it was determined that the education goal should have been more specific to his educational needs during the reporting period. Though Child #10 was doing well in school overall; however, there were two areas he could have been given a goal to improve his grades from a C to a B.

### 2. Corrective Action Taken.

The FFA Social Workers received training on 9/8/22 and 10/25/22 by the FFA Administrator and the FFA Executive Director (See attachment for training). The FFA Social Workers were trained on the protocols for writing proficient NSPs with appropriate goals using the SMART Goals Method. During the training it was expressed that when children have overall good grades, they should still receive an educational goal that address a specific needs or future goal. It was also expressed that requesting, attending and obtaining the notes from the CFT meeting is necessary to assist with writing appropriate NSP educational goals.

### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

On 10/25/22 the FFA Administrator conducted a training with the FFA Social Workers to follow up on NSP writing and to provide a closer supervision for the FFA Social Workers. The FFA Administrator and FFA Executive Director will provide ongoing monthly supervision and training for FFA Social Workers to make improvements in writing proficient and comprehensive NSPs with proper and necessary SMART Goals. An individual refresher training will be provided to the FFA Social Workers who continuously struggle with writing proficient NSP's and completing and maintaining CFT meetings and collaboration.

25. Children are receiving trauma-informed and culturally sensitive services to ensure progress is made toward meeting each child's case plan goals (SOW, Part C, Sections 15.0, 16.8)

Facility

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Site 932

Site 932

### 1. Explain the Cause.

The FFA Social Worker#4 (Lancaster/Resigned 12/9/21) failed to record the dates that minors, 7, 8 and 9 received mental health services during the reporting period of the NSP. Mental health services were requested and approved. The minors 7, 8 and 9 were assessed on 12/30/2021. All 3 minors were approved for therapy. Therapy started on 1/24/22 and continues to occur 2x a month for all 3 children. The therapy is performed on-line, biweekly, on Mondays at 3:30pm.

### 2. Corrective Action Taken.

The FFA Social Workers received training on 9/8/22 and 10/25/22 by the FFA Administrator and Executive Director (See attachment for training materials) The FFA Workers were trained on the protocols for writing proficient NSPs. The training included instruction on documenting the dates and times that the minors received trauma-informed and culturally sensitive services in the Mental Health Clinical Visits Section of the NSP. The RP provided a letter from the Mental Health Provider stating that therapy sessions occur every other week and the RP has been compliant with making sure the children attend.

### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/01/22, the FFA Administrator and FFA Executive Director will use the attached Quality Assurance Review Form when reading and approving NSPs for timeliness, comprehensiveness, and accuracy. An individual refresher training will be provided to the FFA Social Workers who continuously struggle with documenting the dates and times that the minors receive trauma-informed and culturally sensitive services in the Mental Health Clinical Visits Section of the NSP.

Permanency

34. The child's discharge summary (submitted to the CSW 30 Days from the date the child's placement was terminated) identified being discharged according to the child's permanency plan

Facility

Site 937

#### 1. Explain the Cause.

The assigned FFA Social Worker#4(Lancaster) resigned 12/9/21 without notice and refused to provide the FFA with the proper documentation for the case file.

#### 2. Corrective Action Taken.

Effective 12/01/22, all documentation for caseloads will be completed and saved on a Fred Jefferson device (i.e., Chromebook, laptop, or desktop). The following documentation includes Case Notes, NSP, CFT Notes, Termination Reports, and all other identifying information for the youth and NMD. By 12/01/22, all FFA Social Workers will have signed a "FFA Social Worker Device Declaration" (See attached) stating that they understand that all documentation for caseloads must be completed and saved on a Fred Jefferson device which include Chromebooks, laptops and desktops. A copy the signed FFA Social Worker Device Declarations will be provide to CAD.

#### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/01/2022, the FFA Program Manager will provide a monthly "Missing Termination Report" (see attached) with the names of each child that has been discharged from the agency without a termination report filed in the youth or NMD's case file and emailed to the CSW. The Missing Termination Report list will be provided on the last business day of each month to all FFA Social Workers with an expected 7-day turn around due date. The Missing Termination Report will be maintained by the FFA Program Manager. 24-hours prior to the expected due date, The FFA Administrator will make direct contact with the FFA Social Worker to ensure the completion of the termination report. The attached Termination Report has been revised to reflect all efforts made to assist all youth and NMDs with all transitional and termination plans that have been discuss in the CFT and documented on the NSP. By 12/01/2022, all FFA Social Workers will be trained to successfully complete the revised Termination Report.

35. After support services were identified and linkages are made available to ensure successful transition to permanent home based care [SOW, Part C, Section 15.2, 15.5, 18.1, 18.13 AND [ILS, §88268.2(c); Master Contract, Exhibit A, SOW, Part C, §§15.2, 15.4 & 18.1.]

Facility

Site 937

#### 1. Explain the Cause.

The assigned FFA Social Worker#4(Lancaster) resigned on 12/9/21 from the FFA on without notice and refused to provide the FFA with the proper documentation for the case file.

#### 2. Corrective Action Taken.

Effective 12/01/22, all documentation for caseloads will be completed and saved on a Fred Jefferson device (i.e., Chromebook, laptop, or desktop). The following documentation includes Case Notes, NSP, CFT Notes, Termination Reports, and all other identifying information for the youth and NMD. By 12/01/22, all FFA Social Workers will have signed a "FFA Social Worker Device Declaration" (See attached) stating that they understand that all documentation for caseloads must be completed and saved on a Fred Jefferson device which include Chromebooks, laptops and desktops. A copy the signed FFA Social Worker Device Declarations will be provide to CAD.

#### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/15/2022, the FFA Program Manager will provide a monthly "Missing Termination Report" (see attached) with the names of each child that has been discharged from the agency without a termination report filed in the youth or NMD's case file and emailed to the CSW. The Missing Termination Report will be provided on the last business day of each month to all FFA Social Workers with an expected 7-day turn around due date. The Missing Termination Report will be maintained by the FFA Program Manager. 24-hours prior to the expected due date, The FFA Administrator will make direct contact with the FFA Social Worker to ensure the completion of the termination report. The Termination Report has been revised to reflect all efforts made by the agency to assist all youth and NMDs with support services and linkages to ensure a successful transition during the discharge process. By 12/15/2022, all FFA Social Workers will be trained to successfully complete the Revised Termination Report (attached).

## Education and Independent Living Plan Services

37. Children's report cards and progress reports are maintained in their files (SOW Part C, Sections 15.3.7, 19.1.2.2)

Facility

Site 932

### 1. Explain the Cause.

The FFA Social Worker#4(Lancaster/Resigned 12/9/22) assigned to the case failed to collect and file the Child #9 report cards.

### 2. Corrective Action Taken.

On 9/17/22 the RP provided the FFA Administrator with copies of the minor's report cards dated 1/21/22 and 6/2/22 . The report cards have been uploaded into the children's case file.

### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/15/22, the FFA Social Workers will be trained to request, receive and upload all report cards and progress reports for each child on their caseload at the end of each nine week grading period and semester report cards at the end of each 18-week grading period. The FFA Social Workers will have 1- week to collect and upload all progress reports and report cards after each grading period. The FFA Social Workers will be instructed to encourage all RP's enroll in the parent-access portals of each minors school, if available. The electronic portal will allow RP's to see their child's points from tests, quizzes, homework assignments, and download progress reports and report cards more frequently.

38. The FFA documented collaborative efforts with the educational rights holder, placing agency and/or the school district to enroll the children in appropriate classes and provide educational support services (SOW, Part C, Section 15.3.3.3)

Facility

Site 932

Site 932

Site 932

### 1. Explain the Cause.

The FFA Social Worker#4(Lancaster/Resigned 12/9/22) did not document efforts made to collaborate with the educational rights holder, CSW or School District for Child #7, 8 and 9 on the NSP.

### 2. Corrective Action Taken.

The Children's Educational Rights holder was determined to be the children's biological father. Effective 10/5/22, the FFA Social Workers must provide the name and contact information for the Educational Rights Holder while completing the NSP's in the PMIS system for each child on their caseload. The FFA Intake Worker will send a welcome email to request more information regarding the minors education records and educational rights holder or the prior school district. with the CSW or Placement Worker to provide the educational rights holder for each minor placed. The FFA Intake Worker will follow up the placement with an email requesting the contact information for the minors

### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/01/22, the FFA Intake Worker will request the 709 to determine the minor's educational needs. The FFA Intake Worker will confirm the holder of educational rights and the school or origin. A CFT will be requested by the FFA Social Worker within the first 7-days of placement to obtain more information regarding the minors progress in school.

39. The FFA has documented its efforts to maintain children in their school of origin after placement, if determined in the best interest of the child (SOW, Part C, Section 15.3.2)



## Facility

Site 923

Site 937

Site 923

Site 932

Site 932

Site 932

**1. Explain the Cause.**

The FFA Social Worker#4(Lancaster/Resigned 12/9/22) did not document efforts made to maintain the child in his or her school of origin after placement.

**2. Corrective Action Taken.**

Effective 12/01/22, the FFA Intake Worker will request and document the school of origin and make efforts to place the child with a family who is able to transport the child to and from school.

**3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.**

Effective 12/1/22, during the placement process, the FFA Intake Worker will request the 709 to determine the minor's educational needs. The FFA Intake Worker will request information regarding the holder of educational rights and the school or origin. The FFA Intake Worker will collaborate with the CSW, Educational Rights Holder and School District to determine if the home is a good fit based on the child's educational needs and other factors.

## Health & Medical Needs

### 44. Required follow-up dental examinations were conducted on time (Contract, Section 19.0, SOW Part C, Sections 15.3.9)

## Facility

Site 932

Site 932

Site 932

**1. Explain the Cause.**

The FFA Worker#4(Lancaster/Resigned 12/9/22) failed to collect and upload the minor's follow-up dental documentation into the minor's case file. All 3 children's follow-up dental appointments were completed; however, the reports were not placed in the child's case file by the FFA Social Worker.

**2. Corrective Action Taken.**

On 9/16/22, the RP provided the FFA Administrator with copies of the updated dental exam reports. All 3 children were seen by the dentist for follow-up exams on 3/31/22 and again on 5/19/22. On 10/25/22, the FFA Administrator conducted a training for the FFA Social Workers instructing them to collect and file all medical, dental, and mental health documentation monthly or as it becomes available.

**3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.**

Effective 12/15/22, the FFA Administrator will oversee a Quality Assurance Case File Check on a random selection of the FFA Social Worker's caseload to ensure that the required documentation is being collected and maintained in the minor's case file. (See Quality Assurance Review Form). The Quality Assurance File Case File Check will take place quarterly (Jan, April, July, October). The FFA Administrator will oversee a QA Team each quarter to check the case files for missing documentation. The QA Team members will utilize the QA Checklist for each file that has been selected and report back to the FFA Administrator their findings. The FFA Administrator will schedule an individual supervision with each FFA Social Worker to discuss the QA File Check results. A refresher training will be provided for all FFA Social Workers who continuously struggle with completing required paperwork requirements.



45. The FFA has provided sexual and reproductive health rights information, age 10 or older (SOW Part C, Section 15.3.10, Senate Bill 89)

Facility

Site 932

Site 923

Site 931

Site 923

#### 1. Explain the Cause.

FFA Social Workers #2 & #3(Gardena) and #4(Lancaster/Resigned 12/9/21) failed to provide reproductive health rights information and guidance to children after they turn 10-years-old.

#### 2. Corrective Action Taken.

During the week of 10/24/22, the FFA Workers #2 & #3(Gardena) and #4(Lancaster/Resigned 12/9/21) met with the minors on their caseloads who are 10 years old and older to discuss their Sexual and Reproductive Health Rights. The FFA Social Workers provide the minors with the Sexual and Reproductive Health Rights pamphlet to have as a reference. The minors signed the front of the page of the pamphlet and a copy of the signed page was placed in each child's case file. The FFA Administrator created the attached Acknowledgement Signature Page for all minors to sign when they receive the Sexual and Reproductive Health Rights information from their FFA Social Worker.

#### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/01/22, all minors 10-years-old and up will sign the Sexual and Reproductive Health Acknowledgement stating they have received Sexual and Reproductive Health Rights information and counseling by their FFA Social Worker. The FFA Social Worker will discuss the Sexual and Reproductive Health Rights information with all minors who are 10 years old and older. The FFA Social Worker and minor will discuss the information and the minor will sign the Sexual and Reproductive Health Acknowledgement form. The signed form will be uploaded into the minor's electronic case file.

## Personal Rights

47. Children are supervised by the RFPs in accordance with ILS standards

47b. Children reported the consequences for not following the rules were fair

Facility

Site 932

#### 1. Explain the Cause.

The RP created a house rule that was unreasonable and unfair for the placed minors served.

#### 2. Corrective Action Taken.

Immediately after speaking with the reviewer on 7/20/22, a consultation was held with the RP and the FFA Executive Director. As a result of the finding, the FFA Executive Director scheduled and had a mandatory emergency meeting for all Resource Parents and staff on 7/28/22, at 11am and 6pm via Microsoft Teams regarding Foster Youth Bill of Rights for Children in Care according to Title 22 Regulation and the Interim Licensing Standards Version IV.

#### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/01/22, the agency will conduct unannounced pop-up visits to each resource home 1 to 2 times per year. The pop-up visits will be conducted by an alternative FFA staff member, not the FFA Worker assigned to the RFH. The FFA Staff member will interview the children in private and report back to the FFA Administrator any concerns that are noted. The FFA Administrator will follow up with the RP to discuss any concerns that were reported. If concerns were noted, a refresher individual training on Personal Rights for Children in care will be provided for the RP.

52. Children reported having a voice and choices in the CFT meetings (SOW, Part C, Sections 19.2) AND [WIC§16001.9 (a) (15); Master Contract, Exhibit A, SOW, Part C, 17.13.1 & 18.11]

Facility

Site 932

**1. Explain the Cause.**

The FFA Social Worker did not document attempts to request a CFT meeting or request a copy of the CFT if one was had. As a result, the child did not have a CFT meeting and therefore, did not have a voice or choice regarding his NSP.

**2. Corrective Action Taken.**

On 10/25/22, the Administrator and Executive Director conducted a training for FFA Social Workers. The FFA workers were directed to make sure to included the minor in his or her CFT Meeting. The FFA Social Workers were trained to encourage the minor to participate in the CFT and to ensure that their voice and choice is heard.

**3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.**

Effective 01/03/23, the FFA Administrator will select random children's files to ensure that a CFT was had and to also ensure that the minors voice and choice was documented in the CFT Notes. The FFA Administrator will conduct random file audits using the attached Quality Assurance Review Form. The random file audits will be conducted quarterly.

## PERSONNEL FILES

73. Personnel completed criminal related requirements prior to working with children [EXHIBIT A SOW Part C, 15.3.5 & 15.3.6]

73a. Personnel signed criminal record statements (LIC 508) prior to OR on the hire dates (Contract, Section 8.0, SOW, Part B, Section 8.2) (Contract, Section 8.0, SOW, Part B, Section 8.2)

Facility

Site 923

**1. Explain the Cause.**

The HR Generalist is responsible for processing and reviewing all onboarding documents which includes the Criminal Record Statement (LIC 508). During the review of FFA Social Worker #1 (Riverside) onboarding file, the FFA HR Generalist did not spot the error in the Criminal Record Statement. The form was missing the facility's name and organization number.

**2. Corrective Action Taken.**

Effective 12/15/2022, upon the completion of all documentation, onboarding FFA Social Worker files will be reviewed by the FFA Executive Director to ensure successful completion of all pertinent information regarding the onboarding with Fred Jefferson Memorial Home. The Executive Director will use the attached Quality Assurance Social Worker Declaration form to ensure that all onboarding documents are correct. FFA Social Workers will not be able to service homes within the FFA until the documents are reviewed.

**3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.**

Effective 12/15/2022, the attached Quality Assurance Social Worker Declaration form will be used and signed to ensure this process is followed. It must be signed by the HR Generalist and submitted to the Executive Director for final approval. The Executive Director will ensure that the prospective employee has a cleared tb test and health screening, education transcripts, child abuse index clearance, department of justice and FBI clearance, California Driver's License, resume and social security card.

77. Personnel received initial training and orientation [EXHIBIT A SOW Part C, 17.6.1.3, 17.6.1.6 & 17.6.1.7]

77a. Minimum of one (1) hour of Child Abuse Identification & Reporting training (SOW, Part B, Section 9.0, ILS Sections 88222.1(4), 88222(d)(7)(B)(3), 88264(g)(1)(B), 88265.2(c)(1), 88364(c), 88365.2(b), 88365.3(b))

Facility
Site 923
Site 923

77b. Reproductive and sexual health training (Senate Bill 89)

Facility
Site 923

#### 1. Explain the Cause.

The FFA Administrator did not provide comprehensive initial training for new FFA Social Workers. FFA Social Workers #1 & #5 did not complete the Sexual and Reproductive Health Rights and Child Abuse Identification & Reporting training within the first 90 days of employment

#### 2. Corrective Action Taken.

#77a. All FFA Social Workers will complete the training for the Child Abuse Identification and Reporting by 12/30/22. #77b. The FFA Administrator will train FFA Social Workers #1 and #5 on the Sexual and Reproductive Health Rights information no later than 12/15/22. The Sexual and Reproductive Health Rights and Child Abuse Identification & Reporting training will be added to the agency's training plan for all new hires. FFA Administrator will provide the sign-in sheets for the trainings upon completion.

#### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/30/22, the agency will add the curriculum for Sexual and Reproductive Health Rights and Child Abuse Identification & Reporting training to the FFA Social Worker Training Plan for all new hires.

78. Personnel are receiving annual on-going trainings as defined in the SOW and ILS [ Training Matrix and EXHIBIT A SOW Part C, 17.8 & 17.8.5]

78e. Reduction of Law Enforcement Involvement SOW, Part B, Section 9.4

Facility
Site 923
Site 923
Site 923

#### 1. Explain the Cause.

The FFA Administrator did not provide comprehensive initial training for new FFA Social Workers. Three employees did not complete the Reduction of Law Enforcement Involvement training within the first 90 days of employment.

#### 2. Corrective Action Taken.

The FFA Administrator and FFA Executive Director will complete the training for the Reduction of law enforcement Involvement by 12/30/22 to become the trainers for the agency. The FFA Executive Director and FFA Administrator will train all current FFA Social Workers with the information by 12/15/22. The Reeducation of Law Enforcement Involvement training will be added to the agency's training plan for all new hires.

#### 3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Effective 12/30/22, the FFA Administrator will add the curriculum for Reduction of Law Enforcement Involvement as a required training and will be included in the FFA Social Worker Training Plan for all new hires.