

City and County of San Francisco

OFFICE OF THE CONTROLLER CITY SERVICES AUDITOR

Human Services Agency:

*Family and Children's Services Does Not Have
a Structured Program to Attain and Sustain Full
Compliance with Laws and Regulations*





CITY AND COUNTY OF SAN FRANCISCO
OFFICE OF THE CONTROLLER

Ed Harrington
Controller

Monique Zmuda
Deputy Controller

February 1, 2006

Trent Rhorer, Executive Director
Human Services Agency
170 Otis Street
San Francisco, CA 94103

Dear Mr. Rhorer:

The Controller's Office, City Services Auditor, presents its audit report concerning the San Francisco Human Services Agency (Department) Family and Children's Services (FCS) Division. The audit objectives were to determine whether: (1) FCS regularly assesses caregivers who are relatives of foster children and their homes using the same health and safety standards required for foster caregivers; and (2) face-to-face contacts between FCS child welfare workers and foster children are in compliance with federal and state laws and Department policies. The major audit findings include:

- The Department is not in compliance with the law requiring that family members caring for foster children be subject to the same health and safety standards applied to other foster care providers. For example, FCS must assess relatives' homes for physical safety and perform criminal background checks on all adults living in a foster care home. Although the mandates have been in effect since 2001, FCS management has been slow to gain a full understanding of these legal requirements and has not made the necessary changes to achieve compliance. Our review showed that only 47 percent of caregivers had been assessed completely and within the time requirements. The state will audit these cases in the future, and with current compliance rates the Department could be liable for reimbursement of federal and state funds exceeding several million dollars annually.
- Child welfare workers make face-to-face contacts with children in foster care every month to check on their safety and well-being—the state standard is that 90 percent of active foster care cases must receive a timely visit. At the time of our review in November 2005, FCS' documented rate of contacts had improved to 85 percent as a result of urgent management directives to document visits and update case files. In general, FCS does not have policies or consistent practices in this area, does not hold staff accountable for poor performance, and does not make efficient use of resources such as portable electronic devices and clerical staff that could be used to document visits. Although there are no financial sanctions for noncompliance, the face-to-face contacts are essential safety checks to protect children in foster care and state regulators have threatened in the past to take over foster care agencies for poor performance in this area.

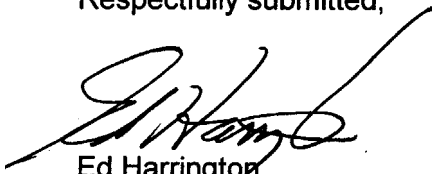
February 1, 2006

Page 2

The audit includes nine recommendations for Department and FCS management to attain and sustain 100 percent compliance with federal and state laws governing caregiver assessments and face-to-face contacts with foster children. Specifically, the audit recommends that FCS incorporate the goal of 100 percent compliance into the performance evaluations of staff, supervisors, and managers, clearly communicate the consequences for noncompliance to all employees, and act on the information from internal quality reviews. The audit also recommends that FCS management develop policies and procedures for documenting face-to-face contacts, use the Child Welfare Services/Case Management System as the preferred method for documentation, and complete documentation within a definitive time period.

The Department's response to the audit is attached as an appendix to this report. The Controller's Office will work with the Department to follow up on the recommendations presented. We acknowledge the assistance and cooperation provided to the audit staff by the San Francisco Human Services Agency and its Family and Children's Services Division, the California Department of Social Services Children and Family Services Division, and the child welfare departments in Alameda, Contra Costa, Los Angeles, Orange, and Santa Clara Counties.

Respectfully submitted,



Ed Harrington
Controller

TABLE OF CONTENTS

Executive Summary	i
Introduction	1
Chapter 1	5
Nonrelative Extended Family Member Cases Do Not Comply With Federal and State Laws and Regulations	
Chapter 2	13
Face-To-Face Contact Compliance and Documentation is Not Efficient	
Appendix A	A-1
Human Services Agency Response to the Audit	

Abbreviations

AB	Assembly Bill
ACF	United States Department of Health and Human Services Administration for Children and Families
CDSS	California Department of Social Services
CWS/CMS	Child Welfare Services/County Management System
FCS	San Francisco Family and Children's Service Division
HSA	San Francisco Human Services Agency
NREFM	Nonrelative Extended Family Member
QA	San Francisco Human Services Agency quality assurance unit

EXECUTIVE SUMMARY

Overview

The performance audit assessed the San Francisco Human Services Agency (HSA, hereinafter referred to as “Department”) Family and Children’s Services (FCS) Division’s compliance with the law and protection of children and public resources in two areas: relative assessments and face-to-face contacts. In addition, the audit team reviewed practices of other California county foster care programs to identify successful methods of administering these programs. Specifically, the audit objectives were to determine whether:

- The Department extends health and safety standards to caregivers who are relatives of foster children (NREFMs)¹ as are applied to all foster families and providers as required by Assembly Bill 1695 and the California Department of Social Services, and;
- Face-to-face contacts between child welfare workers and foster children are in compliance with federal and state laws and Department policies.

The audit findings show that the Department and FCS are not in compliance with laws and regulations in these areas of foster care and do not yet have a structured program to achieve compliance. Policies, procedures, and standards for performance are not in place. FCS has not fully used existing resources such as the internal quality assurance unit, clerical staff, monitoring software, and new technologies that could streamline child welfare workers’ case management and documentation of their work.

The compliance rates for NREFM cases was 47 percent in our review and has never been more than 52 percent in the reviews conducted by the FCS quality assurance unit and the state. The compliance rate of face-to-face contacts was 85 percent in our review after FCS instructed staff to urgently update case files in preparation for the audit. However, it is not clear whether this level can be sustained without significant changes to the methods and performance mandates for documenting child welfare worker visits.

The audit recommends adopting a structured approach to attain and sustain 100 percent compliance with the laws and regulations relating to NREFM cases and the timeliness of face-to-face contacts with foster children. This attitude and focus must be included in a strong, clear message from Department management and incorporated into all aspects of work.

¹ NREFM stands for nonrelative extended family member, which is defined as an adult caregiver who has an established familial or mentoring relationship with a child, such as a godparent or a teacher. The provisions of Assembly Bill (AB) 1695 apply to both relative caregivers and NREFMs, but the term “NREFM” is commonly used as shorthand and to refer to relative caregivers as well. This report adopts the term “NREFM” for all those cases to which AB 1695 applies, including relative caregivers, because this is the terminology used by the auditee. It should be noted however, that the vast majority of the cases to which AB 1695 applies in San Francisco are technically relative, rather than NREFM, caregivers.

CHAPTER 1

Caregiver Assessments Do Not Comply With Federal and State Requirements for Health and Safety Assessments

Health and safety assessments of family foster care placements are complete in only about half of cases. The City could be liable for reimbursement of several million dollars annually to federal and state agencies.

The law requires that the same standards be applied when a foster child is placed with a relative as are applied to other foster care homes. These placements are referred to as nonrelative extended family members (NREFMs). The standards include inspecting the home for safety, reviewing caregiver qualifications, and performing criminal background checks for all adults living with the foster child. An initial NREFM assessment must be completed before the child is placed with the caregiver, and reassessments must be conducted within 365 days of the previous assessment.

Only 14 of the 30 NREFM cases we tested (47 percent) were in compliance with federal and state laws and regulations governing the safety and health of foster child homes. The children in these placements face risks since FCS cannot be assured that the homes and caregivers meet the required standards. Further, the Department may have to forfeit federal Title IV-E² and state funds that together provide 70 percent of the costs of services extended to these foster children and their families. Although it was enacted in 2001, FCS has been slow to respond to the requirements of AB 1695. A state audit in 2004 identified reimbursable costs totaling \$287,000 for out of compliance cases. We estimate that as much as \$120,000 could be forfeited for the 16 cases that were noncompliant in our audit sample. State regulators have indicated that they may extrapolate the rates of noncompliance to the entire caseload in future audits. Since the compliance rates for these cases could be 50 percent or less, the Department's liability for reimbursable costs to federal and state agencies could exceed several million dollars per year.

FCS is not fully using the internal quality assurance unit that it created. Although this unit has identified weaknesses and those procedures most subject to error in NREFM assessments, FCS management has not taken adequate or timely action. Rather, errors and problems recur in subsequent quality assurance reviews, and the compliance rate has not improved in the year that the quality assurance unit has monitored NREFM cases.

The audit recommends that the Department establish policies to attain 100 percent compliance with AB 1695 laws and NREFM regulations, communicating this goal and the consequences for noncompliance to child welfare workers, and incorporating the goal into the performance evaluations of staff, supervisors, and managers. Management should promptly make necessary improvements in response to communications from the

² Title IV-E funds are payments for foster care and adoption assistance from the United States Department of Health and Human Services.

quality assurance unit and to changes in NREFM compliance regulations. Also, management should look to technology to better fulfill requirements. For instance, since criminal clearances and background checks are the primary cause of NREFM noncompliance, management should consider contracting with private companies that offer portable criminal background clearance services. The costs of these services should be compared with the liability for reimbursement due to noncompliance with AB 1695 mandates.

CHAPTER 2

Face-to-Face Visits With Foster Care Children Are Not Documented and Methods Are Not in Place to Improve and Manage Performance

Child welfare worker visits to foster care children are not documented accurately or completely and case plans for families are incomplete.

Federal and state laws and regulations require that child welfare workers visit children in the foster care system in person once each calendar month. This is to ensure the well-being and safety of the child and for the child welfare worker to evaluate the progress of the child and family. The state requires a face-to-face contact compliance rate of at least 90 percent. That is, FCS must visit at least 90 percent of their active cases on a timely basis. In addition, state standards require that all foster care cases (100 percent) have a case plan detailing the actions to be taken by the caregiver, the child (if appropriate), and the child welfare worker for the benefit of the child and the family. Case plans are developed by FCS child welfare workers and approved by a supervisor. Our sample of FCS case files showed a compliance rate of 85 percent for timely face-to-face visits, reflecting an improvement in compliance since November 2004. Only 82 percent of cases met the state standard of having a case plan.

The improvement in the face-to-face contact compliance rate over the past several months resulted from urgent directives to staff to update case files and provide documentation of prior visits in preparation for this audit. Although documentation of face-to-face contacts is a state requirement and a good practice for managing child welfare worker cases, it is haphazard and FCS management has not held staff accountable for substandard performance. Management has not implemented a consistent and structured program to meet a target of 100 percent compliance and has not provided workers with clear and consistent policies for documenting their work. Documentation of visits is maintained both electronically and manually and this has resulted in unnecessary duplication of effort and in multiple, inconsistent sets of records. Resources that could make the process more efficient—such as clerical staff and technological applications—are not well used and managed.

SafeMeasures is a software that produces reports from data in the Child Welfare Services/County Management System (CWS/CMS), the statewide electronic database system for child welfare workers. Management has not required that supervisors, managers and child welfare workers use SafeMeasures to monitor the timeliness of visits and case plans. The Department purchased the SafeMeasures software in 2004 for more than \$100,000, but no more than five percent of child welfare workers, supervisors, and managers use this tool. Similarly, the Department does not take full advantage of its business intelligence software (Business Objects), which produces statistical reports based on queries of data stored in CWS/CMS and could do more to assist managers and others in their compliance monitoring efforts.

Technical and staff resources that could improve both day-to-day work for child welfare workers and the accuracy of Family and Children Services' records are not well used and managed.

QuickPads are another technology that FCS management could better use to gain greater efficiencies. In 2000, the Department purchased more than 150 QuickPad devices for child welfare workers to input case notes, case plans, and other documents. These are simple devices requiring little or no training and allow for a simple transfer of data to CWS/CMS. Currently, fewer than ten FCS child welfare workers are using QuickPads, and no one in the Department was able to tell us where the remaining devices are located or whether the Department still has them. Finally, the Department's use of clerical staff is inconsistent and weak. This has resulted in an increased burden for data entry and file maintenance on FCS child welfare workers.

The audit recommends that the Department develop policies and procedures for the documentation of face-to-face contacts. CWS/CMS should be the preferred method for documenting face-to-face contacts, documentation should be completed within a definitive time period (within three to five days of the visit), and there should be clear consequences for failing to adhere to these policies and standards. The Department should make use of and provide better oversight of its existing resources, including SafeMeasures, Business Objects, QuickPad devices, and clerical staff charged with supporting the work of child welfare workers. The Department should also develop strategic plans to use technologies to enhance the accuracy and efficiency of social work.

INTRODUCTION

The performance audit assessed the San Francisco Human Services Agency (HSA, hereinafter referred to as “Department”) Family and Children’s Services (FCS) Division’s compliance and protection of children and public resources in two areas: relative assessments and face-to-face contacts. Specifically, the audit objectives were to determine whether:

- (1) The Department extends the same requirements and health and safety standards to caregivers who are relatives of foster children (“NREFMs”) ¹ as nonrelative foster families, as required by Assembly Bill 1695 and the California Department of Social Services, and
- (2) Face-to-face contacts between child welfare workers and foster children are in compliance with state laws and Department policies.

Scope & Methodology

We conducted the performance audit at the San Francisco Human Services Agency headquarters in San Francisco and satellite offices in the Mission and Bayview Districts. We engaged in research, interviews, and testing from July 2005 through November 2005.

We reviewed relevant federal and state laws and regulations; local provisions; as well as prior audits, studies, and reports. We interviewed Department and FCS managers, supervisors, and child welfare workers; state officials; other city officials involved in the child protection system; FCS community and foundation partners; and representatives of technology organizations and companies. We also analyzed relevant written policies and procedures of the Department.

To understand best practices, we surveyed five California counties with successful compliance rates and innovative approaches, as defined by audit interviews and Child Welfare Services Reports.² Senior managers in Alameda, Contra Costa, Los Angeles, Orange, and Santa Clara Counties provided responses concerning quality assurance

¹ NREFM stands for nonrelative extended family member, which is defined as an adult caregiver who has an established familial or mentoring relationship with a child, such as a godparent or a teacher. The provisions of AB 1695 apply to both relative caregivers and NREFMs, but the term “NREFM” is commonly used as shorthand and to refer to relative caregivers as well. This report adopts the term “NREFM” for all those cases to which AB 1695 applies, including relative caregivers, because this is the terminology used by the auditee. However, the vast majority of the cases to which AB 1695 applies in San Francisco are technically relative, rather than NREFM, caregivers.

² Center for Social Services Research, University of California at Berkeley, School of Social Welfare, Measure 2C: Social Worker Visits with the Child, Summary Report for March 2004, http://cssr.berkeley.edu/cwscmsreports/cdss/CDSS_2csummary304.htm.

and compliance on face-to-face contacts and NREFM assessments, as well as technology applications, data entry, and caseload management.

In addition, we conducted two compliance reviews of FCS case files focusing on NREFM assessments and face-to-face contacts. In accordance with generally accepted government auditing standards, we limited this review to those areas specified in the audit scope of this report.

NREFM Assessments

We sampled 30 case files, using a nonstatistical method, to determine whether child welfare workers conducted timely and comprehensive NREFM assessments as required by federal and state standards. We examined the most recent assessment of each case in both the Child Welfare Services/County Management System (CWS/CMS)³ and manual case files. We focused on the relevant State of California (SOC) forms⁴ and determined the required initial or renewal assessment dates. We reviewed each case using the standards and requirements of the regulations and the policies of FCS. Audit testing focused on the following areas:⁵

- Foster child identifying information;
- Criminal clearances for all adults living in the foster child's home;
- Timeliness of the assessment; and
- Worker, supervisor, and caregiver signatures affirming caregiver qualifications and the safety of the home and grounds.

Face-to-Face Contacts

We sampled 42 cases, using a nonstatistical method, to determine whether child welfare workers conducted timely visits and whether case plans were in compliance with federal and state requirements. We did not evaluate the quality of these face-to-face contacts. We included case plan compliance information in the audit testing because it specifies the face-to-face visit schedule. We tested compliance in two time periods: November 2004 and August 2005. We reviewed 36 cases for the November 2004 period and 34 cases for August 2005.⁶ We determined compliance documentation in three different systems: manual case files, CWS/CMS, and SafeMeasures, a web-based monitoring tool used by California child welfare agencies. We determined whether:

³ CWS/CMS is a computerized program that stores case information, automates tasks of county child welfare workers, and allows state and county child welfare workers to share information. It was mandated by Senate Bill 370 (Chapter 1294, Statutes of 1989). All California counties participate in this system, and the California Department of Social Services uses CWS/CMS in monitoring the social welfare practices of these counties.

⁴ 158A (Foster Child's Data Record and AFDC-FC Certification), 815 (Approval of Family Caregiver Home), 817 (Checklist of Health and Safety Standards for Approval of Family Caregiver Home), and 818 (Relative or Non-Relative Extended Family Member Caregiver Assessment).

⁵ The audit procedures did not extend to the areas of caregiver training or to the personal rights of foster children, as is the practice of state audits of these cases.

⁶ Our total sample was 42 cases, 36 of which were active in November 2004 and 34 of which were active in August 2005. Twenty-eight of the 42 cases span both time periods.

- Contact was made with the child within the specified time period;
- There was a case plan that had been approved by a supervisor sometime within the six-month period prior to the time period selected for testing (November 2004 and August 2005);
- The contact schedule was included in the case plan; and
- Reasons for exceptions were included in the case plan, if the contact schedule was less frequent than monthly.

Additionally, we looked for changes in compliance rates between the two time periods as well as inconsistencies between information found in the manual case files, CWS/CMS, and SafeMeasures.

Background

Government Administration

The United States Department of Health and Human Services Administration for Children and Families (ACF) is responsible for federal programs that promote the economic and social well-being of families, children, individuals, and communities. The Children's Bureau, one of six bureaus within ACF, works with states and local agencies to develop and fund programs for foster care and adoption, independent living, safe and stable families, child abuse and neglect prevention, and child welfare.

In California, the California Department of Social Services (CDSS) Children and Family Services Division is responsible for oversight and regulations, policies, and procedures necessary to implement the child welfare system and relevant laws. CDSS also supervises and coordinates child and family programs of the federal Social Security Act, including Title IV-E funds⁷ payments for foster care and adoption assistance.

At the local level, the 58 counties of California administer the child welfare system. San Francisco's child welfare agency is the Human Services Agency Family and Children's Services (FCS) Division. FCS provides counseling, education, and other services to families who need assistance to raise their children safely and stay together. When children are removed from the home because of abuse, neglect, exploitation, or abandonment, FCS works to reunify the family, if possible, while the children are placed in foster care or with relatives who agree to be caregivers. When reunification is not possible, FCS seeks other permanent options for children, such as adoption or legal guardianship.

Key Legislation

In 2001, the California Legislature passed two major pieces of legislature affecting the child welfare system: Assembly Bill (AB) 1695 and AB 636.

⁷ Title IV-E funds are payments for foster care and adoption assistance from the United States Department of Health and Human Services ACF.

AB 1695 (Chapter 653, Statutes of 2001)⁸ clarifies existing state law to ensure conformity with the federal Adoptions and Safe Families Act of 1997. It requires that the relative caregiver⁹ assessment process meet the same health and safety standards used to license nonrelative foster family homes. The assessment includes an evaluation of the caretaker's ability to properly care for the child, criminal background checks of the caretaker and other adults in the household, and an examination of the premises. Since the passage of the bill, the Youth Law Center, a nonprofit public interest law office, has filed two lawsuits against public agencies for failure to meet AB 1695 standards. *Higgins v. Saenz* was filed against the CDSS in October 2002, and *Wheeler v. Sanders* was filed in December 2003 against Los Angeles County. Both cases have been settled, and the Youth Law Center continues to monitor compliance with the *Higgins v. Saenz* as a result of the settlement agreement.

AB 636, the Child Welfare System Improvement and Accountability Act of 2001, provides the legal framework for measuring and monitoring each county's performance on safety, permanence, and well-being of children. It replaces the former Child Welfare Services Division 31 Oversight System that focused exclusively on regulatory compliance. AB 636 shifts child welfare services to an outcome-based focus, building upon standards established by the federal government and adding other measures deemed appropriate by California. The accountability measures feature child welfare services participation rates, permanency and stability, and child and family well-being. The measures also address safety concerns and include monthly child welfare worker visits with children.

Notice of Noncompliance

On November 18, 1992, CDSS issued a Formal Notice of Noncompliance to the Department for its failure to create a comprehensive Corrective Action Plan (CAP) in its FCS Division. FCS was out of compliance in ten areas, including face-to-face contacts between child welfare workers and foster children. The state reviewed FCS in 1986, 1987, 1989, 1990, and 1991, and found in each review that performance was below the acceptable compliance rate of 90 percent. The state did not withdraw the Formal Notice of Noncompliance until June 1997 when FCS achieved compliance in all areas cited. With the assistance of an outside consultant, FCS created a CAP that CDSS accepted, established a quality assurance unit to conduct internal reviews, trained staff on Division 31 regulations, and participated in quarterly reviews of CAP progress.

⁸ California Welfare & Institutions Code 361.4.

⁹ The bill also includes "nonrelative extended family members" (NREFM), which is defined as any adult caregiver who has an established familial or mentoring relationship with the child.

CHAPTER 1

NONRELATIVE EXTENDED FAMILY MEMBER CASES DO NOT COMPLY WITH FEDERAL AND STATE LAWS AND REGULATIONS

Only 47 percent of the 30 NREFM cases we tested were in compliance with federal and state regulations. This is because FCS does not have a target to attain a 100 percent compliance rate, the communication of policies is ineffective, and there are inadequate consequences for child welfare workers and managers for noncompliance. Children who are the responsibility of FCS are at risk for harm because the safety of some caregiver homes has not been adequately assessed in a timely manner. Further, the state and federal governments fund 70 percent of the costs of services for these cases. The Human Services Agency (Department) and the City and County of San Francisco (City) may be liable for the repayment of grants obtained on behalf of noncompliant cases.

The federal Adoptions and Safe Families Act of 1997, California AB 1695,¹⁰ and the settlement provisions of the *Higgins v. Saenz* lawsuit¹¹ established the standards and requirements for assessing and approving the homes of caregivers who are relatives and nonrelative extended family members (NREFMs). The law requires that the same standards for licensed, nonrelative foster families be extended to caregivers who are relatives of foster children or extended family members who are not directly related to the child. This includes the inspection of the home for safety, reviewing caregiver qualifications, and performing criminal background checks and fingerprinting for all adults living in the foster child's home. Initial assessments must be completed before the child is placed with the caregiver, and reassessments of each NREFM home must be conducted within 365 days of the previous assessment. The state has issued All County Letters describing mandatory NREFM procedures and documentation.

We tested a nonstatistical sample of 30 NREFM caregiver cases that receive federal and state grant monies and are subject to an annual assessment of the home and caregiver. Only 14 out of 30 (47 percent) manual case files that we tested were assessed completely and within the mandated time requirements. Although CWS/CMS should reflect the assessment as documented in the manual files, and thus should have the

¹⁰ Chapter 653, Statutes of 2001.

¹¹ On October 24, 2002, the Youth Law Center filed a lawsuit against the California Department of Social Services, charging that some children were living in substandard and dangerous conditions because of the state's failure to require counties to fully investigate relatives' homes. The settlement of *Higgins v. Saenz* requires uniform, statewide standards for foster parents who are related to the children in their custody. The Youth Law Center is continuing to monitor compliance with the settlement agreement.

same compliance rate, the sampled cases in CWS/CMS had a much higher compliance rate of 63 percent.

In our evaluation of the sampled cases, we employed a methodology similar to the one used by state regulators in their audits of NREFM cases. We classified cases as out of compliance if any of the timeliness, home assessment, caregiver review, or criminal background requirements were not properly completed. We reviewed both manual case files and CWS/CMS entries because FCS uses both systems to record the results of the assessments. The manual case files include documents originating from other sources that are required to be maintained by FCS. These include the verification of criminal background checks and statements signed annually by the caregiver. Once this information is completed and the assessment is finalized, the child welfare worker inputs all of this data into CWS/CMS.

The results of the testing reflect the fact that FCS does not have a clear policy establishing a goal of 100 percent compliance in NREFM assessments. Management communications do not emphasize the importance or consequences of noncompliance, and there is little urgency to correct identified deficiencies. Existing quality assurance resources and technology applications are not optimized to gain greater efficiencies. For example:

- **FCS has not developed policies or procedures to improve the fingerprinting process, a primary cause of noncompliance in NREFM assessments.** Fingerprinting of the adults in the foster child's home is necessary to conduct criminal background checks and is essential to the safety and well-being of the child. Child welfare workers instruct caregivers and others living in the home to make fingerprinting appointments at a specified location in San Francisco. However, some family members have been reluctant to submit to fingerprinting, and it can be an inconvenience especially for those living outside of the City. FCS has not taken steps to mitigate these obstacles, such as contracting with businesses or entering into reciprocal agreements with other California counties that provide these services outside of San Francisco.
- **There is a lack of accountability for substandard performance.** FCS management has only issued reprimands when a child welfare worker was late in completing a NREFM assessment twice within a three-month period. Such consequences do not correlate with the seriousness of noncompliance with the law and the risks posed to children. Management did not hold supervisors and section managers accountable to their role to monitor and correct compliance problems. The discrepancy between compliance rates in CWS/CMS and the manual case files in the sample suggests a lapse on the part of supervisors and section managers in reviewing the work of child welfare workers.
- **Response to quality assurance (QA) reviews is poor and requires repeated requests by the QA unit.** In their CAP, required as a result of the 2004 state NREFM audit, FCS charged their internal QA unit with the responsibility of

conducting quarterly internal reviews of NREFM assessments to determine compliance with laws and regulations. Such reviews include detailed instructions to workers and managers on how to improve compliance. However, response to such reviews has been lacking to date, and errors identified in earlier reviews continue to be a common problem in subsequent reviews.

- **FCS was slow to respond to the compliance requirements of AB 1695.** Also specified in their CAP, FCS created a “NREFM unit” – a group of child welfare workers dedicated to the assessment of NREFM homes and caregivers. With such a NREFM unit, a small group of employees responsible for the assessments becomes more knowledgeable of the specific regulations, requirements, and some of the practical means to finalize the assessments completely and within the required time limits. Additionally, monitoring and oversight of the assessment function is more effective and direct since regulatory or procedural changes can be efficiently communicated to fewer employees. However, FCS did not mandate that NREFM assessments were to be performed exclusively by the NREFM unit until November 2005. Rather, child welfare workers were conducting these assessments in addition to managing the responsibilities of their regular case workloads. By this time, some California counties had successfully managed similar NREFM units for more than a year and had achieved a higher rate of compliance as a result.
- **FCS management did not make adequate effort to understand the full intent of the AB 1695 law.** Management mistakenly believed that since FCS had a policy to evaluate caregivers’ homes for safety and to conduct criminal background checks on family members living in the foster child’s home, it was in full compliance with the law. FCS management was not aware of the specific state-mandated forms to be used for documenting these procedures, or the need to include in the criminal background check a request to be notified in the event that the adult is arrested at any time in the future. This “subsequent arrest notification” is a critical component of the criminal clearance process in maintaining a safe environment for the foster child.
- **FCS does not use current technologies sufficiently to gain greater efficiencies.** Many child welfare workers take manual notes of their NREFM assessments on preprinted forms and then later input this data in the CWS/CMS system. This is time-consuming and could be more efficient by using computers and other mobile technology. For instance, QuickPads are a less costly, simplified version of a laptop and function only as a word processing unit. They are easy to use and require little or no training. Further, the ease of recording data immediately after a visit with the child or family reduces the need to return to the office after each visit to document the contact. However, there is an attitude and culture at FCS to resist the use of newer technologies to improve efficiency and accuracy. Specifically, although the Department purchased more than 150 QuickPad devices five years ago for the child welfare workers to use to input case notes, case plans, and other documents, less than ten FCS child welfare

workers now use them. Although we made several inquiries, no one in the Department was able to tell us where the remaining QuickPads are located or whether the Department still has them. Some workers told us that although QuickPads were made available to staff, there were inadequate directions and support provided so that they could be used correctly and integrated with existing systems.

FCS could also explore the use of mobile and portable LiveScan machines to electronically scan fingerprints for criminal clearances, as has been done in other counties.

Other counties use laptops, QuickPads, and other mechanisms to a greater extent to reduce the time child welfare workers must spend on administrative tasks, such as transcribing their notes from face-to-face contacts and preparing court reports and other documents. Additional technologies that could be used include speech recognition software, a system that translates spoken words into written documents. Although this requires more effort to adopt, since the software must 'learn' common words and usages, this is an alternative for employees who have difficulties using a computer keyboard to input required documentation.

Impact

Chronic and egregious noncompliance with the law could result in litigation against FCS. In addition to *Higgins v. Saenz*, the Youth Law Center has filed other lawsuits against the California Department of Social Services (CDSS) on behalf of abused and neglected children and in one instance, specifically named Los Angeles County for its failure to approve relative caregiver homes according to legal standards.¹² FCS' continued failure to fully comply with state and federal requirements could place FCS and the Department at risk for possible litigation, due to either an actual incident of harm to a child or a perceived risk to the children in its care.

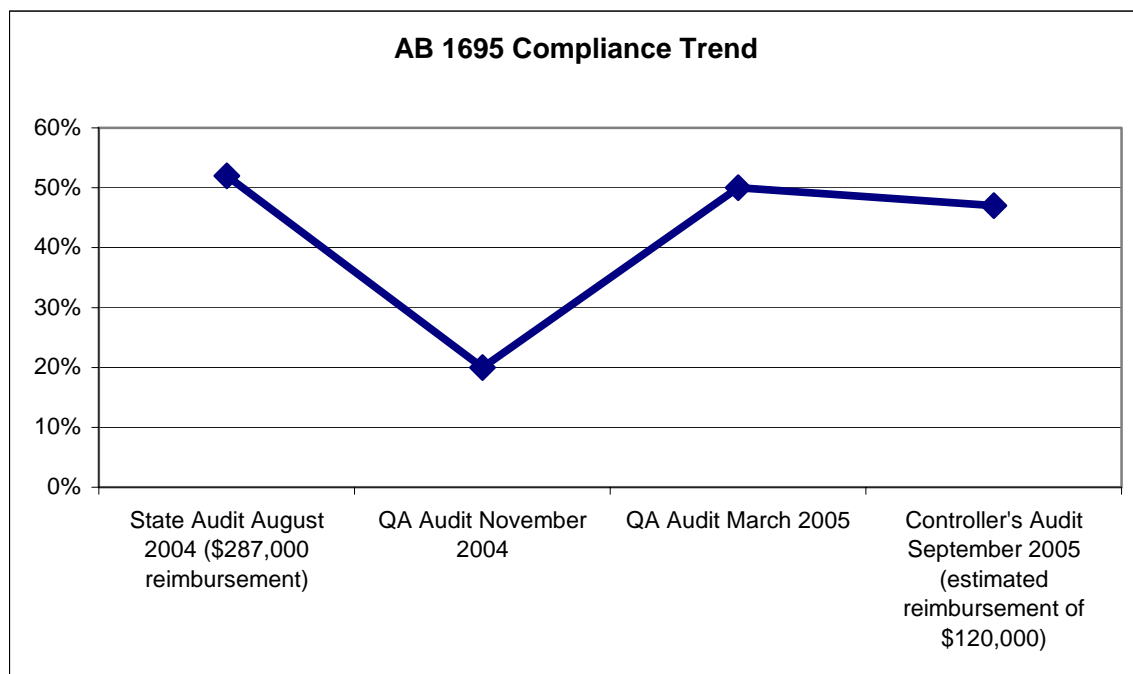
Noncompliance with the law could create the perception that FCS is unable to keep foster children out of harm's way. Aside from the damage to the Department's reputation and credibility, this negative perception could affect current and future partnerships with other public agencies and the community-based organizations that provide much-needed services to these children and their caregivers. Finally, a perceived inability to perform the necessary duties of the FCS' missions and goals could negatively affect its budget requests and allocations.

A clear fiscal impact of FCS' noncompliance with NREFM assessment requirements is costly reimbursements of grant monies. FCS receives 50 percent of the cost of its services from the federal government and 20 percent from the state for cases that meet

¹² In December 2003, the Youth Law Center brought action against Los Angeles County, alleging that federal and state requirements were violated because the Los Angeles Department of Children and Family Services failed to approve relative foster homes according to legal standards.

the AB 1695 requirements. If any aspect of the relative assessment is inaccurate, late, or incomplete, the case is ineligible for federal and state grants. Thus, the Department and ultimately the City could become liable for the full costs of the services provided to the foster child and family with noncompliant assessments.

In 2004, a state audit of FCS' NREFM assessment cases found 48 percent of the cases were out of compliance. As a result, the City had to reimburse the state and federal governments \$287,000. Further, FCS is precluded from requesting grant monies for any cases identified as noncompliant until they are brought into full compliance with laws and regulations. These deficiencies can require many months to correct. In the meantime, the City continues to be fully liable for the costs of services provided. We estimate that the Department could have to reimburse the federal and state governments as much as \$120,000 for the 16 cases in our sample that were out of compliance.



In understanding the financial risk posed to the City as a result of FCS noncompliance, it is critical to note that state regulators may henceforth extrapolate rates of noncompliance in audited samples to all FCS cases receiving Title IV-E funds. This new method of assessing financial penalties for noncompliance with AB 1695 would be applied to their forthcoming audit of 2004 case files. Although this audit has not yet been scheduled, prior internal quality assurance reviews indicate that the compliance rates for these cases could be 50 percent or less. Further, given the lapse of time, it is not feasible to retroactively correct the deficiencies for these cases. Accordingly, should the state extrapolate rates of noncompliance to all FCS cases, the liability for reimbursement to federal and state agencies could exceed several million dollars per year. State regulators have not yet clarified exactly how the rate of noncompliance will

be applied to all cases.¹³ Even so, this additional liability could put added pressure on the budgets of FCS and the Department, and could restrict the allocation of funds to other programs providing services to foster children and their families.

Recommendations

FCS must acknowledge the importance of conducting accurate and timely NREFM assessments to ensure that foster children are placed in homes where they will be safe and well cared for in a healthy environment. To achieve and maintain consistently high compliance rates, we recommend that Department management:

1. Establish a specific mandate to attain a 100 percent compliance rate for NREFM assessments.

Auditee response: Concur. The Division agrees we should strive for 100 percent compliance.

2. Foster accountability by clearly demonstrating to staff, in both policy and procedures, that 100 percent compliance is FCS' goal. Documents provided to the NREFM unit must be complete, accurate, and timely.

Auditee response: Concur.

3. Require that performance evaluations for staff, supervisors, section managers, and program managers convey FCS' goal of 100 percent NREFM compliance.

Auditee response: Concur.

4. Establish policies for staff attendance requirements at unit and other meetings that are used to inform staff of required federal, state, and FCS policies and procedures.

Auditee response: Concur.

5. Establish and enforce a clear policy that quality assurance reviews are a top priority of FCS. Communications from the Quality Assurance unit should be addressed immediately, including any needed changes in procedures to effect accurate and timely NREFM assessments. Procedures should be monitored regularly to ensure continued effectiveness.

Auditee response: Concur.

¹³ Further, the amount of reimbursable of monies to the state, if any, as applied to extrapolated cases has not been fully determined. We also cannot determine a precise reimbursable amount because we did not use a statistical sample. However, based on the fact that the average monthly cost of services provided to foster children and their relative caregivers in the most recent state audit was \$757 per case, we estimated that \$530 of this cost could be reimbursable to the federal and state governments (50 percent of the total cost in federal grants and 20 percent in state grants).

6. Adopt a means of addressing any future changes in the law, regulations or procedures, and make a continued effort to monitor its compliance with these requirements.

Auditee response: Concur.

7. Adopt a policy of using mobile technologies, similar to those used by other California counties, such as QuickPads, laptop computers, and portable LiveScan machines, as a means of enhancing the accuracy of the input, assuring that required procedures are accomplished and that these processes are done using the time and efforts of child welfare workers in the best manner possible. Consider contracting with private companies that offer portable criminal background clearance services, including those specializing in LiveScan checks and criminal clearances. This consideration should evaluate the costs of these services compared to the savings of monies not lost due to noncompliance with AB 1695 mandates.

Auditee response: Partially concur. The Division agrees that it must take advantage of available technology to improve efficiencies and accuracies in data input and reporting. However, because our Child Welfare Services Case Management Information System (CWS/CMS) is “dedicated” rather than “co-existent,” our options for mobile technology are limited.

Over the past few years, HSA [Department] has implemented technological solutions and has provided mobile technologies such as QuickPads for FCS staff. However, the current resources are underutilized. It does not make sense to enhance technology before the current technology (i.e., QuickPads, on-line forms, shared network drives, etc.) is fully understood and utilized.

Auditor comment: During our audit fieldwork, we researched the use of mobile technologies to improve efficiency and accuracy of data input. However, based on the auditees’ response to this recommendation, we conducted additional research relating to the impact of a “dedicated” county status and its ability to use these technologies. Staff from the California CWS/CMS Operations Support unit told us that laptop computers are not only fully compatible with CWS/CMS for “dedicated” and other counties, but to promote the use of this electronic system, the state has provided laptop computers to California counties, including the Department. In 2004, the state gave 11 laptop computers to the Department, all of which were fully configured to be used with CWS/CMS. The state provided this equipment without cost for the purpose of supporting mobile and remote access for child welfare workers. Although the CWS/CMS application cannot be loaded onto the QuickPad devices, word processing software can be used to facilitate the documentation of visits and to record other critical events. With appropriate training and competent support staff, QuickPads can be an important component in enhancing the efficiencies of the documentation process.

CHAPTER 2

FACE-TO-FACE CONTACT COMPLIANCE AND DOCUMENTATION IS NOT EFFICIENT

FCS' compliance rate for face-to-face contacts has improved to 85 percent in recent months. However, this is the result of urgent management directives to staff to update case files and to provide documentation of prior visits. Rather than using a consistent structured program to meet a target of 100 percent compliance, FCS relies on "crisis management" techniques. As a result, contact documentation is haphazard and clear and consistent policies are lacking. Resources that could make the process more efficient – such as clerical staff and technological applications—are not well used and managed. Staff have not been held accountable for substandard performance. As a result, child welfare workers bear unnecessary work burdens, management lacks quality assurance tools, and the current level of compliance may deteriorate as the perceived need to maintain timely documentation of these contacts dissipates.

Federal and state laws and regulations require that children in the foster care system be visited in person by a child welfare worker once each calendar month. The purpose of this legislation is to ensure the well-being and safety of the child, and for child welfare workers to evaluate the progress of the child and family. Such requirements are appropriate given the unstable circumstances many of these children face. The state requires a face-to-face contact compliance rate of at least 90 percent. That is, visits for at least 90 percent of the active cases are required to be conducted and done timely.

In certain circumstances, child welfare workers are allowed to visit these children less than monthly. For example, visits can be reduced to a semiannual or quarterly schedule if a child is placed with a legal guardian or if the home placement is long-term and stable. However, since a monthly visit is a state requirement, any exceptions to this schedule must meet the conditions under which the state allows less frequent visits and be approved by a supervisor. These exceptions are included in the case plans developed by the child welfare worker, reviewed with the caregiver, and approved by a supervisor every six months. Case plans represent the actions to be taken by the caregiver, the child (if appropriate), and the FCS child welfare worker for the benefit of the child and the family.

The state requires that evidence of these required visits be documented. State regulators have stated that this documentation, usually in a narrative written form, may be on paper or input into the statewide electronic data base system, the Child Welfare Services/Case Management System (CWS/CMS). However, because state auditors use both CWS/CMS and the related software, SafeMeasures (a monitoring tool that uses data input into CWS/CMS) for review compliance, electronic documentation is the preferred method.

FCS managers cannot adequately monitor the work of child welfare workers without a disciplined approach to inputting this important data. Since SafeMeasures updates only two days each week from the data recorded into CWS/CMS, prompt input would provide assurance that the SafeMeasures reports are accurate and current.¹⁴ Further, studies have shown that data transcribed or input soon after the event is the most accurate and complete. Vital details fade from memory as time passes.

Case files, which include the child welfare workers' notes, case plans, reports, court records, and other vital information, may be in either electronic or paper format. The case files provide documentation of the services provided and present the reasons for the decisions made for the benefit and well-being of the child and family. As such, this information is critical to the work performed by the child welfare workers, their supervisors, specialists, regulators, and others. In many instances, service providers must be able to act quickly and make swift decisions on behalf of the child. To do so, they must have prompt access to these files, reports, records, and worker case notes.

Case File Testing

To assess whether visits and case plans were timely and complied with state requirements, we sampled case files for November 2004 (36 cases) and August 2005 (34 cases). We also sought to understand the consistency of the documentation systems, so we reviewed the paper documents and reports in the manual case files, the input into the state-sponsored electronic database, CWS/CMS, and the results produced from SafeMeasures.

Manual case files have been the traditional means to manage cases. In 1997, FCS implemented CWS/CMS to provide for easier input, access to commonly used forms and reports, and sharing of case information. This is a system mandated by the California legislature and used by all California counties. However, since the system cannot sort data and compile reports, FCS management began using SafeMeasures in 2004 to assist in quality assurance. By using SafeMeasures, supervisors and managers can identify the compliance rates with face-to-face contacts by case, by unit group, and by child welfare worker over periods of time.

¹⁴ Auditors performed an anecdotal review of the SafeMeasures reporting function, noting that over a period of several weeks, the data from CWS/CMS was updated by SafeMeasures less frequently than the twice weekly requirement stated in the vendor's contract.

Although FCS has attained high compliance rates, it is still not in full compliance with the state standards that 90 percent of face-to-face contacts are conducted timely, and 100 percent of case plans are prepared within the time requirements. Still, compliance for face-to-face visits has improved since November 2004.

Documentation in the manual case files showed the highest compliance rates for timeliness of visits. This was 85 percent in August 2005. Compliance rates in CWS/CMS were a few percentage points lower, and SafeMeasures presented the lowest compliance rate (79 percent) for August 2005.

TESTED SAMPLE COMPLIANCE RATES				
NOVEMBER 2004				
	FACE-TO-FACE CONTACTS		TIMELY CASE PLAN	
	%	#	%	#
MANUAL CASE FILE	81%	29	81%	29
CWS/CMS	78%	28	75%	27
SAFEMEASURES	69%	25	75%	27
AUGUST 2005				
	FACE-TO-FACE CONTACTS		TIMELY CASE PLAN	
	%	#	%	#
MANUAL CASE FILE	85%	29	79%	27
CWS/CMS	82%	28	82%	28
SAFEMEASURES	79%	27	82%	28

The compliance rate differences between the manual case files and the electronic systems were due to omissions. In some files we tested, visits and case plans were documented in the manual case files and never recorded in the CWS/CMS system.¹⁵ In five cases, more than four months elapsed before the face-to-face contacts were input into CWS/CMS.

Differences in compliance rates between CWS/CMS and SafeMeasures result when data is not input into CWS/CMS in a specific format. This is true even though visits and case plans can be retrieved and reviewed in CWS/CMS and all other requirements are satisfied. Specifically, case plan approval and effective dates must match the case start date for the visit to be in compliance, and any exceptions to the monthly visitation schedule must be properly recorded.

The manual case files do not consistently follow the indexing system established to manage these files. Documents were filed in incorrect sections or were simply loosely put into the file, with no apparent intention of using the indexing system at all. The files included multiple copies of reports, case notes, case plans, and series of draft reports. Many of these case files were in total disarray, exacerbating the search for documents and reports.

¹⁵ There were eight occurrences, four each in November 2004 and August 2005, in which the visitation date recorded in the manual case file documentation was significantly later than the date entered into CWS/CMS. There were a total of nine similar occurrences of case plan information not being entered in a timely manner.

FCS has not committed to attaining a structured program to achieve a 100 percent compliance rate for timely visits. Management has focused on the immediacy of improving compliance rates for the purposes of this audit and in response to concerns expressed by the CDSS. Management has not developed a plan or policies and procedures to incorporate compliance into the daily tasks of all child welfare workers, including strategic use of existing resources and holding staff accountable for substandard performance. Specifically:

- **There is no consistent and clear policy for documenting face-to-face visits and the twice-yearly case plans.** For instance, some child welfare workers contend that handwritten case notes in the manual case files sufficiently document the visits; other workers were told by their supervisors that case notes of visits must be input into the CWS/CMS system. Some supervisors require case plan documentation in both hard copy and in CWS/CMS, while others have no such requirements. There is also no definitive time requirement to input face-to-face contacts or case plan information.
- **There is no policy concerning use of SafeMeasures, nor is the software well used.** The department purchased the SafeMeasures program in July 2004. Training has been provided to all supervisors and managers, and access has been extended to all child welfare workers in FCS. However, most managers and supervisors do not use the program to monitor visit compliance. This was evident in SafeMeasures reports that identified staff access and login. In November 2004, fewer than 11 FCS staff accessed this system three or more times during the month. By August 2005, this had increased to 24. This usage represents less than five percent of all child welfare workers in FCS. Many of these managers and their staff rely on daily planners, compliance logs, and checklists to verify that foster children are visited as specified by the approved case plan. Some workers told us they set aside several hours each month to identify the children to visit, list each case, and plan these visits for the upcoming month. These functions and other compliance requirements can be easily and quickly done using SafeMeasures. In fact, those units using SafeMeasures to manage their monthly casework show the highest rates of compliance in FCS. This trend correlates with other California counties we surveyed – the managers from those counties using monitoring tools such as SafeMeasures have consistently attained compliance rates of 75 percent or greater.
- **Business Objects is another quality assurance software that has not been used to its full potential.** Business Objects is a business intelligence software that can be used to produce statistical reports based on queries of data stored in CWS/CMS. Unlike SafeMeasures, which only offers limited and “canned” reports, Business Objects allows reports to be run based on designed queries, and it draws on up-to-date information in the CWS/CMS system. In the five California counties surveyed, managers responsible for these child welfare programs told us that Business Objects reports were critical to maintaining compliance and assisting them in their monitoring efforts. The state has provided

the Department with six licenses. It was intended that this software be fully dedicated to providing Business Objects reports to FCS managers, supervisors, and others as a means of improving the monitoring for compliance. However, there are only two licensees who currently provide FCS with limited Business Objects reporting. The head of FCS' quality assurance unit does not have a license, and senior FCS managers reported that they do not receive Business Objects reports in a timely manner.

- **Clerical staff are not managed effectively or used efficiently.** Currently, unit managers are responsible for not only supervising child welfare workers in their units, but also for managing the clerks who support the workers in the group. We heard from child welfare workers, supervisors, and managers that some clerks are competent, proficient, and willing to do the work expected of them, while others expend minimum effort, are not focused on the accuracy or timeliness of their work product, and contribute little to support the extraordinary workload of the child welfare workers. Further, there is not a system of sharing the work among the clerks or streamlining the administrative efforts, such as using templates and checklists for recurring documents and reports.
- **FCS does not use current technologies sufficiently to gain greater efficiencies.** In great part, this is because FCS has been resistant to adapting to changes in technologies and in understanding how these changes will enhance the efficiency of regularly performed tasks and duties. Technologies that are mobile and portable, relatively easy to use, and allow for the transference of data input into the existing CWS/CMS system, can reduce duplication of effort and assure greater accuracy.
- **There is little accountability for substandard performance.** The federal and state laws and regulations pertaining to foster care visits have been in effect for years, including the more recently enacted California legislation, AB 636, the Child Welfare System Improvement and Accountability Act of 2001. In 2004, prior to FCS' recent efforts to better document face-to-face contacts, recorded compliance rates were only in the high 67th percentile. There is no indication that managers, supervisors, and staff were held accountable for noncompliance with these regulations. For instance, given the prior low compliance rate, few employees were placed on work plans for poor performance.

Impact

The lack of a structured compliance program and inefficient use of existing resources threatens the ability of FCS to maintain compliance on face-to-face contacts.

Without adequate documentation of a face-to-face visit with the foster child, there is no evidence that the visit occurred and that the child's safety and well-being is adequately monitored. Evidence of visits assures management that FCS is in compliance with laws and regulations. Although there are no fiscal sanctions for noncompliance, state

regulators monitor the compliance trends of all California counties regularly. In 1992, the face-to-face contact rates for FCS had dropped to such a low level of compliance that the state threatened to take over the administrative functions of the foster care program. The department hired consultants and other experts and spent a considerable amount of money, time, and effort to reorganize FCS, improve procedures, and bring this area into compliance.

Although adequate documentation is a requirement that the Department has not fully achieved, it has, in some instances, wasted time and resources creating unnecessary documentation. Duplicate documents in the manual case files have created an unnecessary volume of paper in files that often exceed thousands of pages. In particular, it is not necessary to input contact information to CWS/CMS and also store a hard copy in the manual case files. Duplicative documentation is made even more problematic by nonadherence to the file indexing system. In some instances, child welfare workers could be impeded from making quick and vital decisions for the safety of the child because the case files and important information and documents are not easily accessible. Senior program managers agreed that manual case files were often disorganized and expressed their frustrations in locating the needed reports and documents.

Without clear policies and timely electronic data entry, staff will continue to waste time and resources with unnecessary and redundant documentation. When electronic data entry is not up to date or accurate, supervisors and managers cannot use SafeMeasures to efficiently determine whether regular visits are being done as required. Neither can SafeMeasures be well utilized if data entry is not timely: delays in inputting this data into CWS/CMS will result in understated compliance rates for FCS.

Since managers, supervisors and others are essentially not using SafeMeasures, the department has wasted its resources on this valuable software. The department purchased a two-year contract totaling over \$100,000, and expended time and effort in required training for supervisors and managers. The full potential of this monitoring tool will not be attained until the majority of staff regularly use it. FCS has lost an opportunity to implement an efficient compliance program and to use the time and efforts of its social services workforce in the best way possible to ensure the safety of foster children in their care. The failure to use the Business Objects software licenses provided by the state presents similar lost opportunities.

Child welfare workers face increased administrative work burdens – and thus less time to spend with children and families – when FCS fails to capitalize on technology tools and options, such as QuickPads. Similarly, when the clerks are not used effectively, child welfare workers are pressed to complete administrative tasks such as filing and data entry - tasks with which clerks could provide much needed assistance.

Recommendations

FCS must adopt a structured approach and commitment to attain and sustain 100 percent compliance with face-to-face contact requirements. This attitude and focus must be included in a strong, clear message from upper management and incorporated into all aspects of the work functions at FCS. In order to do so, we recommend that Department management:

8. Develop policies and procedures that will identify the method, the timing, and the required format of visit documentation.
 - a) Since certain data and reports input into the CWS/CMS on-line system are acceptable and even used by state auditors in their monitoring practices, this should be the preference whenever possible. Documents and reports maintained in this system should not be unnecessarily duplicated in the manual case files.

Auditee response: Partially concur. The significant workload associated with conducting a comprehensive analysis to identify which documents and reports reside in the CWS/CMS on-line system and thus do not need to be duplicated in manual case files outweighs the workload reduction associated with not copying documents for the manual case files. Accordingly, this recommendation will only be implemented in cases where duplication is clearly unnecessary.

Auditor comment: The intent of the recommendation is to streamline the process, avoid unnecessary waste and duplication of procedures, and allow for rapid access to vital documents. The recommendation does not require a comprehensive study or analysis of case files. Policies and procedures can be implemented on a go-forward basis, identifying documents that can be filed electronically instead of maintained as paper copies. Over time, as more documents are filed in an electronic format, staff will benefit from the convenience and efficiency of accessing documents and reports through the CWS/CMS system. Further, avoidance of duplicate copies in the manual case files will reduce the time required to locate important reports and information.

- b) The manual case files should be maintained in a logical order, using the indexing system established by FCS management. This procedure should be fully communicated to all staff and enforced as a professional practice of FCS. Duplication of paper documents and those documented in the CWS/CMS system should be avoided.

Auditee response: Partially concur. Although FCS has a case file indexing system, it is not clear how strict adherence to this system would assist in our compliance improvement efforts. In addition, the other priorities identified in this audit report, the FCS priorities related to the state mandated Child

Welfare Redesign (AB 636) and the significant workload of the FCS child welfare workers dictate that FCS not prioritize strict adherence to the indexing system. As noted above, the significant workload associated with conducting a comprehensive analysis to identify which documents and reports reside in the CWS/CMS on-line system and thus do not need to be duplicated in manual case files outweighs the workload reduction associated with not copying documents for the manual case files. Accordingly, this recommendation will only be implemented in cases where duplication is clearly unnecessary. Management will also evaluate the usefulness of these policies.

Auditor comment: The recommendation requires FCS management to enforce a current policy that manual case files should be maintained in a logical sequence according to the indexing system established by FCS management. We assessed the indexing system as sound and practical, and a good method of maintaining important documents to ensure completeness, so that documents can be found easily. We observed voluminous cases files with little sense of order, many requiring two or more binders to include all of the papers and documents. FCS management should enforce its policies and procedures.

- c) Timely input is important to accuracy and compliance. Prompt input into CWS/CMS will facilitate the monitoring process, allowing for a meaningful use of SafeMeasures as a monitoring tool. For example, some counties have had success with deadlines of input within three or five business days of the visit.

Auditee response: Concur.

- d) Policies and procedures should be thoughtfully and carefully developed to address compliance, efficiency and effectiveness issues of FCS. These should also include clear consequences for nonadherence.

Auditee response: Concur.

- 9. Better manage and use existing resources in support of sustained face-to-face contact compliance.

- a) Require all supervisors and managers to use SafeMeasures to monitor the compliance with face-to-face contacts by child welfare workers.

Auditee response: Concur.

- b) Perform periodic reviews of performance measures for the SafeMeasures contract ensuring that deliverables and other contractual agreements have been met.

Auditee response: Concur.

- c) Allocate the Business Objects licenses and use this software to its full potential to support FCS managers in making timely and effective decisions on compliance matters.

Auditee response: Partially concur. HSA recognizes the value of Business Objects to analyze data and create reports. However, this responsibility rests with the HSA Planning Unit and HSA IT Division and staff and both have Business Objects licenses.

Auditor comment: The state has provided the Department with six Business Objects licenses for the intended purpose of improving the monitoring function of child welfare workers. We recommend that staff from the HSA Planning Unit and the HSA IT Division work with FCS managers to develop meaningful and useful reports to assist them in their monitoring tasks and responsibilities.

- d) Fully explore and use available technologies, as currently employed by other California counties to promote accuracy and efficiency, thereby allowing child welfare workers to spend as much time as possible providing the necessary social services to foster children in their care. Such technologies include laptop computers, QuickPads, and speech recognition software.

Auditee response: Concur. See auditee response for Recommendation #7.

- e) Pool clerical staff and have them be primarily responsible to one supervisor. The goal of this supervisor should be to raise the competency level of these employees, communicate explicit expectations, promote the importance of the tasks performed by clerks in the support of child welfare workers' case management, and provide a structure so that clerks can be used by all child welfare workers.

Auditee response: Partially concur. It is not clear that "pooling" of clerical staff will result in better clerical (including data entry) support for child welfare workers. HSA and FCS will further analyze the costs and benefits of establishing a clerical pool in lieu of clerks assigned to individual units. Management will also review alternative methods to support child welfare workers.

Auditor comment: The intent of the recommendation is both to elevate the level of competency of support staff and to require full accountability for the

work performed by these staff. The administrative tasks and requirements for child welfare workers can be voluminous and detract them from their primary responsibilities—to support foster children and their families. If the pooling of the clerical staff is not a viable alternative, management should explore and propose other means to assure adequate clerical support to child welfare workers. Plans for improvement should emphasize that accountability of all employees is a management expectation.

**APPENDIX
DEPARTMENT RESPONSE TO AUDIT**

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
<p>1. Establish a specific mandate to attain a 100 percent compliance rate for NREFM assessments.</p>	<p>HSA, Family and Children's Services Division (FCS)</p>	<p>Concur The Division agrees we should strive for 100% compliance.</p>		<p>1a. Expected implementation date: 1/31/06 Deputy Director will issue a memo informing staff of the 100% compliance expectation.</p> <p>1b. Expected implementation date: 2/28/06 Program and section managers and unit supervisors will monitor compliance on a monthly basis to identify and remedy Protective Service Workers (PSWs, also known as child welfare workers), units and sections that fall short of full compliance.</p> <p>1c. Expected implementation date: 2/28/06 Compliance data will be shared with staff during unit meetings, section meetings, SAC and Management Team meetings.</p> <p>1d. Expected implementation date: 2/28/06 Patterns of non-compliance will be addressed by through performance evaluations, staff development/training, and progressive discipline at all levels of the FCS Division as appropriate and necessary.</p> <p>The FCS Management Team will examine other Counties who have achieved a 100% compliance rate or the State minimum compliance of 90% in order to identify best practices, including NREFM unit caseload sizes and case assignment practices, that could be incorporated locally.</p>

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
<p>2. Foster accountability by clearly demonstrating to staff, in both policy and procedures, that 100 percent compliance is FCS' goal. Documents provided to the NREFM unit must be complete, accurate, and timely.</p>	HSA/FCS	Concur		<p>2a. Expected implementation date and plan: see implementation steps 1a – 1d under recommendation #1 above.</p> <p>2b. Expected implementation date: 6/30/06</p> <p>The NREFM Workgroup will develop and issue policies and procedures for referrals from Protective Service Workers (PSWs) or Supervisors to the NREFM Unit.</p> <p>Training will be provided to sections and/or units as necessary to explain the written NREFM referral policies and procedures.</p> <p>The NREFM unit will provide a monthly report to section managers, program managers, and the deputy director that identifies failures to comply with established referral procedures.</p>
<p>3. Require that performance evaluations for staff, supervisors, section managers, and program managers convey FCS' goal of 100 percent NREFM compliance.</p>	HSA/FCS	Concur		<p>Expected implementation date: 3/1/06 (full implementation will not be complete until annual reviews for all relevant FCS staff are completed)</p> <p>Current FCS standardized performance evaluation forms will be revised with expectations for 100% NREFM compliance.</p> <ul style="list-style-type: none"> ▪ PSWs will be evaluated on timely and accurate submission of NREFM Logs and other required documentation to their supervisor. ▪ Supervisors will be evaluated on timely and accurate submission of NREFM Logs and other required documentation to the NREFM Unit Supervisor. ▪ Deputy director will present this change to FCS management team with direction to inform direct reports accordingly. ▪ Unit supervisors will meet with PSWs to inform them of the change to performance evaluation forms to be effective upon date of annual review. ▪ Section managers will meet with unit supervisors to inform them of the change to performance evaluation forms to be effective upon date of annual review.

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
<p>4. Establish policies for staff attendance requirements at unit and other meetings that are used to inform staff of required federal, state, and FCS policies and procedures.</p>	HSA/FCS	Concur		<p>4a. Expected implementation date: 1/31/06 (will be completed by 6/30/06)</p> <p>Deputy director will direct FCS management team to inform staff that they attend unit and other mandatory meetings because these meetings are used to inform staff of required policies and procedures. Recognizing that some staff are not able to attend all meetings due to unavoidable time conflicts, alternative methods (written correspondence, trainings, electronic solutions, etc.) to share information on policies and procedures will be developed.</p> <p>4b. Expected implementation date: 1/31/06 (will be completed by 6/30/06)</p> <p>The importance of attending meetings will be reinforced in meetings, such as SAC, FCS Management Team, and Section and Unit meetings.</p> <p>4c. Expected implementation date: 1/31/06 (will be completed by 6/30/06)</p> <p>Individual employee patterns of non-attendance at mandatory meetings will be identified in one-on-one meetings and during annual performance reviews.</p>

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
<p>5. Establish and enforce a clear policy that quality assurance reviews are a top priority of FCS. Communications from the Quality Assurance unit should be addressed immediately, including any needed changes in procedures to effect accurate and timely NREFM assessments. Procedures should be monitored regularly to ensure continued effectiveness.</p>	HSA/FCS	Concur		<p>5a. Expected implementation date: 1/31/06</p> <p>Effective immediately, all Quality Assurance (QA) unit findings and communications will be presented to the FCS management team, who will then follow up with the affected FCS worker/unit/division. The QA unit will provide copies to the HSA executive director of all written findings and communications that are presented to the FCS management team.</p> <p>The FCS management team will respond to the QA unit findings by providing the unit with a corrective action plan that includes steps to address both the immediate the findings as well as any systemic shortcomings identified. Corrective action plans will include any needed changes to policies and procedures to ensure compliance. Copies of the corrective action plans will be provided to the HSA executive director.</p> <p>5b. Expected implementation date: 3/1/06</p> <p>HSA will examine whether the quality assurance function shall be transferred to the administrative division of HSA, outside of the authority of the FCS division in order to more closely align FCS QA work with the fiscal oversight of HSA and to establish some independence of the FCS QA role. HSA currently has a Quality Assurance/Quality Control unit within the Investigations Program under the administrative division of HSA that is responsible for all QA/QC functions for the agency's self-sufficiency and income support programs.</p>

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
<p>6. Adopt a means of addressing any future changes in the law, regulations or procedures, and make a continued effort to monitor its compliance with these requirements.</p>	HSA/FCS	Concur		<p>Expected implementation date: 3/1/06</p> <p>The current HSA Legislative Analyst will be responsible for providing information to the FCS management team regarding proposed and pending state and federal legislative and regulatory changes that may affect the operations of FCS.</p> <p>As part of this responsibility, the HSA Legislative Analyst will bring proposed changes to the FCS management team for their review and feedback for the purpose of legislative advocacy.</p> <p>Discussion related to any proposed or pending changes in laws and regulations will be standing agenda items at FCS Management Meetings, Unit Meetings, and SAC Meetings.</p> <p>A representative from the City Attorney Child Welfare Team will attend the FCS Management team quarterly to discuss changes in state and federal law and to identify areas of current law that are not correctly implemented by PSWs.</p> <p>The FCS management team and City Attorney Child Welfare team will jointly issue regular updates on laws and regulations to supervisors and line workers, either in written form and/or through presentations at supervisor meetings (SAC).</p> <p>Distribution and explanation of State Department of Social Services All County Letters (ACLs) and All County Information Notices (ACINs) will be a standing agenda item at FCS Management Team meetings. This agenda item will include a discussion of how the information will be shared with the appropriate staff.</p>

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
<p>7. Adopt a policy of using computer and mobile technologies, similar to those adopted by other California counties, such as QuickPads, laptop computers, and portable LiveScan machines, as a means of enhancing the accuracy of the input, assuring that required procedures are accomplished and that these processes are done using the time and efforts of child welfare workers in the best manner possible. Consider contracting with private companies that offer portable criminal background clearance services, including those specializing in LiveScan checks and criminal clearances. This consideration should evaluate the costs of these services compared to the savings of monies not lost due to noncompliance with AB 1695 mandates.</p>	HSA/FCS	Partially Concur	<p>The Division agrees that it must take advantage of available technology to improve efficiencies and accuracies in data input and reporting. However, because our Child Welfare Services Case Management Information System (CWS-CMS) is “dedicated” rather than “co-existent”, our options for mobile technology are limited.</p> <p>Over the past few years, HSA has implemented technological solutions and has provided mobile technologies such as QuickPads for FCS staff. However, the current resources are underutilized. It does not make sense to enhance technology before the current technology (i.e., QuickPads, on-line forms, shared network drives, etc.) is fully understood and utilized.</p>	<p>Expected implementation date: 4/1/06 – 6/30/06</p> <p>FCS will work with the HSA IT Division to conduct a thorough examination of current resources available to FCS staff to support their business needs. This examination will include not only an inventory of current FCS technology and current business needs, but will also include an assessment of FCS staff readiness to use identified technologies.</p> <p>Based on the above examination and assessment, FCS and IT will develop a comprehensive plan for the use of technology within FCS Division. This plan will include recommendations for further staff training of existing technological solutions and will evaluate alternative technological solutions such as laptop computers for PSWs in the field and the use of voice recognition technology.</p> <p>The HSA IT division will review and update the cost/benefit analysis that was conducted several years ago to evaluate whether the CWS-CMS System should be converted from “dedicated” to “co-existent.”</p>

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
8a) Since certain data and reports input into the CWS/CMS on-line system are acceptable and even used by state auditors in their monitoring practices, this should be the preference whenever possible. Documents and reports maintained in this system should not be unnecessarily duplicated in the manual case files.	HSA/FCS	Partially Concur	The significant workload associated with conducting a comprehensive analysis to identify which documents and reports reside in the CWS/CMS on-line system and thus do not need to be duplicated in manual case files outweighs the workload reduction associated with not copying documents for the manual case files. Accordingly, this recommendation will only be implemented in cases where duplication is clearly unnecessary.	<p>Expected implementation date: 6/1/06</p> <p>The State Department of Social Services will soon issue a “Guide to NREFM Compliance Audit” to assist counties in their NREFM compliance. This manual will detail the data elements and CWS/CMS data fields that state auditors examine in conducting their audit. Once this manual is issued, the FCS Management Team will work with the NREFM Unit, FCS QC Unit, and FCS Staff Development Unit to prepare informational materials for line staff to assist them in their relative approval process and CWS/CMS data entry. This information will be incorporated in training curriculum as necessary and appropriate.</p>
8b) The manual case files should be maintained in a logical order, using the indexing system established by FCS management. This procedure should be fully communicated to all staff and enforced as a professional practice of FCS. Duplication of paper documents and those documented in the CWS/CMS system should be avoided.	HSA/FCS	Partially Concur	Although FCS has a case file indexing system, it is not clear how strict adherence to this system would assist in our compliance improvement efforts. In addition, the other priorities identified in this audit report, the FCS priorities related to the state mandated Child Welfare Redesign (AB 636) and the significant workload of the FCS PSWs dictate that FCS not prioritize strict adherence to the indexing system. As noted above, the significant workload associated with conducting a comprehensive analysis to identify which documents and reports reside in the CWS-CMS on-line system and thus do not need to be duplicated in manual case files outweighs the workload reduction associated with not copying documents for the manual case files. Accordingly, this recommendation will only be implemented in cases where duplication is clearly unnecessary. Management will also evaluate the usefulness of these policies.	<p>Expected implementation date: 08/31/06</p> <p>Each section of the six-part folder will be labeled using an indexing system that will identify all paperwork required for that section.</p> <p>The FCS Division will be included as part of the HSA IT division plan to convert HSA from its current paper case file system to an on-line system. This process is expected to occur over the next few years.</p>

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
8c) Timely input is important to accuracy and compliance. Prompt input into CWS/CMS will facilitate the monitoring process, allowing for a meaningful use of SafeMeasures as a monitoring tool. For example, some counties have had success with deadlines of input within three or five business days of the visit.	HSA/FCS	Concur		<p>8c(a) Expected implementation date: 12/29/05</p> <p>Policy was issued in December 2005 requiring the input of all compliance contacts in CMS.</p> <p>8c(b) Expected implementation date: 1/31/06</p> <p>Adherence to this policy will be monitored by the Quality Assurance Unit. The QA Unit's findings will be communicated to the FCS Management team for appropriate follow up as described in implementation step 5a under recommendation #5 of this report.</p>
8d) Policies and procedures should be thoughtfully and carefully developed to address compliance, efficiency and effectiveness issues of FCS. These should also include clear consequences for nonadherence.	HSA/FCS	Concur		<p>Expected implementation date: 1/31/06</p> <p>The FCS Management team will monitor regulatory compliance progress through ongoing reports from the QA Unit. Policies and procedures will be refined and/or developed as necessary to improve compliance shortcomings.</p> <p>The FCS management team will monitor Child Welfare Redesign Performance Improvement Plan (PIP) progress through the AB 636 quarterly reports. Policies and procedures will be refined and/or developed as necessary to improve program performance.</p> <p>Identified non-adherence to established policies and procedures at all levels of the FCS Division will be addressed through performance evaluations, staff development/training, and progressive discipline as appropriate and necessary.</p>

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
9a) Require all supervisors and managers to use SafeMeasures to monitor the compliance with face-to-face contacts by child welfare workers.	HSA/FCS	Concur		<p>Expected implementation date: 6/30/06</p> <p>Mandatory Safe Measures training will be developed and provided to FCS supervisors, managers and line workers. The training will not only teach users how to use the system operationally (the “nuts and bolts”) but will detail how to use Safe Measures to more effectively manage one’s workload (for the PSW) and to more effectively monitor compliance and identify trends (for the supervisor and manager).</p> <p>The memo sent to all staff announcing the mandated training will detail how Safe Measures should be used by supervisors and line staff and will outline the expected value that the system will result from its use. This message will be reinforced in management meetings, division meetings, section meetings, SAC meetings and unit meetings.</p> <p>A Safe Measures information session will be held to allow FCS staff to discuss with the Safe Measures staff ongoing problems with the software.</p> <p>The QA Unit will monitor Safe Measures utilization rates among line staff, supervisors, section managers, program managers and the deputy director. This information will be presented quarterly at FCS Management Team meetings and a copy will be presented to the HSA executive director.</p>
9b) Perform periodic reviews of performance measures for the SafeMeasures contract ensuring that deliverables and other contractual agreements have been met.	HSA/FCS	Concur		<p>Expected implementation date: 6/30/06</p> <p>FCS Contract Manager will work with the HSA Contracts Division, IT Division and Planning Unit to ensure that Safe Measures contract obligations are met.</p>

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
9c) Allocate the Business Objects licenses and use this software to its full potential to support FCS managers in making timely and effective decisions on compliance matters.	HSA/FCS	Partially Concur	HSA recognizes the value of Business Objects to analyze data and create reports. However, this responsibility rests with the HSA Planning Unit and HSA IT Division and staff in both have Business Objects licenses.	HSA’s Planning Unit and IT Division will continue to use Business Objects to produce reports as requested by the FCS Division.
9d) Fully explore and use available technologies, as currently employed by other California counties to promote accuracy and efficiency, thereby allowing child welfare workers to spend as much time as possible providing the necessary social services to foster children in their care. Such technologies include laptop computers, QuickPads, and speech recognition software.	HSA/FCS	Concur		See implementation dates and steps outlined under recommendation #7.

Recommendation	Responsible Agency	Response	If “do not concur” or “partially concur,” please explain below	Implementation Plan
<p>9e) Pool clerical staff and have them be primarily responsible to one supervisor. The goal of this supervisor should be to raise the competency level of these employees, communicate explicit expectations, promote the importance of the tasks performed by clerks in the support of child welfare workers' case management, and provide a structure so that clerks can be used by all child welfare workers.</p>	HSA/FCS	Partially Concur	<p>It is not clear that “pooling” of clerical staff will result in better clerical (including data entry) support for child welfare workers. HSA and FCS will further analyze the costs and benefits of establishing a clerical pool in lieu of clerks assigned to individual units.</p>	<p>Expected implementation date: 3/1/06</p> <p>The FCS Deputy Director will write and distribute an all FCS staff memo reinforcing that data entry falls under the responsibilities of the clerical staff.</p> <p>HSA will conduct a cost/benefit analysis of establishing a clerical pool and a social service technician pool to assess if these will improve support to child welfare worker staff to allow them to focus more on child welfare casework.</p>