

Foster Family Agency

NOTE: The exhibits highlighted in grey are not included in this packet but will be part of the final executed

Contract Exhibits

Exhibit A	Statement of Work (FFA)
Exhibit A-1	Reference Links
<i>Exhibit A-2</i>	Service Delivery Sites
Exhibit A-3	Criminal Record Exemption Notification
Exhibit A-4	Notification of Subsequent Arrest, Conviction, Probation or Parole Violation
Exhibit A-5	Special Incident Reporting Guide for FFAs
Exhibit A-6	FFA Monthly Utilization Report Template
Exhibit A-6a	FFA Monthly Newly Approved Resource Family/Disapproval Report
Exhibit A-7	Safety Performance Outcome Summary
Exhibit A-8	Permanency Performance Outcome Summary
Exhibit A-9	Access to Effective and Caring Services/Well-Being Performance Outcome Summary
Exhibit A-10	Discharge Summary for DCFS: Foster Family Agency
Exhibit A-11	Provider Needs and Services Plan Template
Exhibit A-12	Child Welfare History Review Form
Exhibit A-12a	Applicant's Authorization for Release of Information
Exhibit A-13	Foster Family Agency's Plan of Operation and Program Statement
<i>Exhibit A-13a</i>	CDSS Resource Family Approval (RFA) Implementation Plan Approval Letter
<i>Exhibit A-14</i>	FFA Facility License(s)
<i>Exhibit A-15</i>	FFA Rate Letter
Exhibit A-16	Transfer of Medication Form
<i>Exhibit A-17</i>	Adoption License or MOU
Exhibit A-18	Placement Coordinating Memorandum – Transgender Children/Non-Minor Dependents (NMD) in Out-of-Home Care
Exhibit A-19	DCFS 561 (a) Medical Examination Form
Exhibit A-20	DCFS 561 (b) Dental Examination Form
Exhibit A-21	DCFS 561 (c) Psychological /Other Examination Form
Exhibit A-22	Shared Responsibility Plan
Exhibit A-23	Shared Responsibility Plan – Cover Sheet
Exhibit A-24	DCFS 2281 Clothing Standard
Exhibit A-25	LASC JUV010 Declaration in Support of Access to Juvenile Records
Exhibit A-26	Grievance Review Hearing Request
Exhibit A-27	Grievance Review Hearing Request (Spanish)
Exhibit A-28	DCFS 709 Foster Child Needs and Case Plan Summary
Exhibit A-29	Probation Child Welfare (PCW) Case Plan
Exhibit A-30	Electronics For Youth in Residential Care
<i>Exhibit B</i>	Line Item Budget
Exhibit C	Office of Management and Budget (OMB) Title 2 Code of Federal Regulations (CFR), Part 200 and 2 CFR 1.100, title 2, Part 1
Exhibit C-1	Auditor-Controller Foster Family Agency Contract Accounting and Administration Handbook
Exhibit C-2	Auditor-Controller/Department of Children and Family Services/Probation Department Fiscal/Audit Phases, Fiscal/Audits of FFA Foster Care Services Contractors
Exhibit C-3	LA County Annual Revenue and Expenditure Report FFA
<i>Exhibit D</i>	Contractor Acknowledgment and Confidentiality Agreement
Exhibit D-1	Contractor Employee Acknowledgment and Confidentiality Agreement
Exhibit D-2	Contractor Non-Employee Acknowledgment and Confidentiality Agreement
<i>Exhibit D-3</i>	Confidentiality of Criminal Offender Record Information
Exhibit D-4	Resource Family Parent Acknowledgment and Confidentiality Agreement
Exhibit E	Statement of Dangerous Behaviors and California Department of Social Services Child Welfare Services Manual, Section 31-405
Exhibit F	IRS Notice 1015 - Notice to Employees Regarding Federal Earned Income Credit (FEIC)
Exhibit G	Payment Resolution Notification (COV 71)
Exhibit H	Overpayment Policy
<i>Exhibit I</i>	Contractor's Certification of Compliance with Child, Spousal and Family Support Orders
<i>Exhibit J</i>	Contractor's Certification of Compliance with all Federal and State Employment Reporting Requirements
<i>Exhibit K</i>	Contractor's Equal Employment Opportunity Certification
<i>Exhibit L</i>	Charitable Contributions Certification
<i>Exhibit M</i>	Defaulted Property Tax Certification Form
Exhibit N	DCFS Foster Family Agency Contract Investigation/Monitoring/Audit Remedies and Procedures (As Amended on February 24, 2017)
<i>Exhibit O</i>	Federal Debarment and Suspension Certification Form
<i>Exhibit P</i>	Contractor's Compliance with Encryption Requirements Form
<i>Exhibit Q</i>	Zero Tolerance Human Trafficking Policy Certification Form
<i>Exhibit R</i>	Certification of Compliance with Background Security Investigations
Exhibit S	Intentionally Left Blank
<i>Exhibit T</i>	County of Los Angeles Contractor Employee Jury Service Program Certification Form (Code 2.203)
<i>Exhibit U</i>	County's Administration
<i>Exhibit V</i>	FFA Contractor's Administration
Exhibit W	Sample Report on Outside Employment
Exhibit W-1	Sample Report on Conflict of Interest
Exhibit X	Federal Award Information
Exhibit Y	COVID-19 Vaccination Certification of Compliance
Exhibit Z	Information Security and Privacy Requirements
Exhibit AA	Compliance with Fair Chance Employment Hiring Practices Certification

**COUNTY OF LOS ANGELES
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
AND
PROBATION DEPARTMENT**

MASTER CONTRACT FOR FOSTER FAMILY AGENCY

STATEMENT OF WORK



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TABLE OF CONTENTS

<u>PART</u>	<u>PAGE</u>
PART A – INTRODUCTION	4
1.0 PREAMBLE	4
2.0 OVERVIEW & BACKGROUND	4
3.0 COUNTY PRIORITIES FOR CHILDREN, YOUTH AND NON-MINOR	5
4.0 PROGRAM GOALS.....	7
5.0 TARGET DEMOGRAPHICS.....	7
6.0 CORE PRACTICE MODEL	8
PART B – PROGRAM REQUIREMENTS	8
7.0 SERVICE DELIVERY SITES.....	9
8.0 STAFF QUALIFICATIONS, REQUIREMENTS AND EXEMPTIONS.....	10
9.0 TRAINING	13
10.0 PROGRAM REPORTING REQUIREMENTS	14
11.0 PROGRAM COMPLIANCE AND QUALITY ASSURANCE	19
12.0 PLAN OF OPERATION AND PROGRAM STATEMENT CHANGES.....	20
13.0 INTENTIONALLY LEFT BLANK	20
PART C – PROGRAM SERVICES	20
14.0 CHILD AND FAMILY TEAM	20
15.0 CORE SERVICES AND SUPPORTS.....	21
16.0 RESOURCE FAMILY APPROVAL	44
17.0 MONITORING/OVERSIGHT OF RESOURCE FAMILIES AND OTHERS RESPONSIBLE FOR THE CARE AND SUPERVISION OF CHILDREN, YOUTH AND NON-MINOR DEPENDENTS.....	51
18.0 PLACEMENT PROCESS (INTAKE/DISCHARGE).....	63
19.0 NEEDS AND SERVICES PLAN (NSP)	71
20.0 VISITATION PLAN	75

PART D – PERFORMANCE OUTCOME GOALS AND REQUIREMENTS SUMMARY 78

21.0 SAFETY 78

22.0 PERMANENCY 78

23.0 ACCESS TO EFFECTIVE AND CARING SERVICES FOR WELL-BEING AND SELF-SUFFICIENCY 79

PART A: INTRODUCTION

1.0 PREAMBLE

The County of Los Angeles seeks to collaborate with its community partners to enhance the capacity of the health and human services system to improve the lives of children and families. These efforts require, as a fundamental expectation, that the County's contracting partners share the County and community's commitment to provide health and human services that support achievement of the County's Strategic Plan Mission, Values, Goals and Performance Outcomes.

The County's vision is a value driven culture, characterized by extraordinary employee commitment to enrich lives through effective and caring service, and empower people through knowledge and information. This philosophy of service excellence is anchored in the County's shared values of: 1) Integrity; 2) Inclusivity; 3) Compassion; and 4) Customer Orientation.

These shared values are encompassed in the County's Strategic Plan's three Goals: 1) Make Investments that Transform Lives; 2) Foster, Vibrant and Resilient Communities; and 3) Realize Tomorrow's Government Today.

Improving the well-being of children and families requires coordination, collaboration and integration of services across functional and jurisdictional boundaries, by and between County departments and community and contracting partners.

2.0 OVERVIEW & BACKGROUND

On January 1, 2017, specific sections of Assembly Bills 403 became operative and established new requirements for all Foster Family Agencies (FFA). AB 403 was sponsored by the California Department of Social Services (CDSS) to administer the Continuum of Care Reform (CCR), the main goals of which are to further improve California's child welfare system and its outcomes, by increasing the use of home-based family care and decreasing the length of time to achieve permanency. This will be accomplished in part through the strengthening of cross-agency networks of services and supports, coordinated through an effective CFT process, which support the ultimate goal of finding and maintaining a stable, permanent family.

Foster Family Agencies (FFA) will engage in recruiting, approving, training, and providing professional support to Resource Families who provide out-of-home care in a family home setting for the placement of children, youth, pregnant and parenting teens with children, and Non Minor Dependents (NMDs) who are supervised by Department of Children and Family Services (DCFS) and Probation Child Welfare (PCW) and in need of care. FFAs will coordinate with DCFS and PCW to find homes and provide services and supports to Resource Families and to the placed children, youth and NMDs in accordance to Title 22, Division 6,

Chapter 8.8, Section 88263 and to the extent possible and authorized by local, state and federal law.

2.1 The County of Los Angeles Juvenile Court gives responsibility for the care, custody, and control for each dependent child, youth and NMD to the DCFS and PCW. The Board of Supervisors, through the Contract, gives authorization for the provision of placement services.

2.2 The Community Care Licensing Division (CCLD) regulations (See Exhibit A-1, Reference Links) that apply to FFAs are from the Manual of Policies and Procedures and Title 22, but not limited to:

- (a) Division 6, Chapter 1, Sections 80000-80095 [except as otherwise noted in Section 88200(g-h)](for General Licensing Requirements);
- (b) Division 6, Chapter 8.8, Sections 88000 through 88087 [except as otherwise noted in Section 88200(g-h)] for FFA requirements;
- (c) Division 6, Chapter 8.8, Sections 88200 through 88587.1 for FFA and Resource Family Approval requirements; and
- (d) Division 2, Subchapters 1-9, Sections 35000-35409 (*Adoptions Manual*) for Foster-Adopt FFA requirements.

2.3 The statutes referenced in this Exhibit A, Statement of Work (SOW), from the California Education Code (EDC), California Health and Safety Code (HSC), California Vehicle Code (VEH), Penal Code (PEN) and California Welfare and Institutions Code (WIC) (See Exhibit A-1, Reference Links).

2.4 Discrimination on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity, mental or physical disability or HIV status is prohibited in the California foster care system.

2.4.1 For transgender children, youth and NMD the CONTRACTOR shall provide services in accordance to the guidance and instructions provided in the All County Letter (ACL) 19-27 Gender Affirming Care for Minor and Non-Minor Dependents in Foster Care (See Exhibit A-1, Reference Links) and the Placement Coordinating Memorandum titled Transgender Children/Non-Minor Dependents (NMDs) in Out-of-Home Care (Exhibit A-18) prepared in collaboration between DCFS, PCW, the Department of Mental Health (DMH) and CCLD

3.0 COUNTY PRIORITIES FOR CHILDREN, YOUTH AND NON-MINOR DEPENDENTS

COUNTY has established the following priorities for children, youth and NMDs: (1) Safety; (2) Permanency; and (3) Access to effective and caring services for well-

being/self-sufficiency.

CONTRACTOR shall provide data related to COUNTY'S priorities.

3.1 Safety: Safety is defined as freedom from abuse and neglect as defined in the California Penal Code, Section 11165.5 (See Exhibit A-1, Reference Links). The Performance Outcome Goals and Requirements Summary addressing this priority are found in Part D, Section 21.0 of this SOW.

3.2 Permanency: Permanency is defined as a safe and stable nurturing relationship achieved through maintaining the child, youth and NMD in the home, reunification, adoption, or legal guardianship. The Performance Outcome Goals and Requirements Summary and Service Tasks addressing this priority are found in Part D, Section 22.0 of this SOW.

3.2.1 It is a priority of COUNTY to place children, youth and NMDs with Resource Families. A Resource Family is one that will support the goal of family reunification, and, when reunification is not possible, be approved to provide legal permanence for a child, youth and NMD. It is also a COUNTY priority to use a concurrent planning process if it is uncertain whether the permanency plan of family reunification will be successful. Additionally, it is COUNTY's goal to have many more FFA Resource Families. The use of Resource Families in-concurrent planning in managing cases: (1) allows the adoption planning process to proceed simultaneously with the family reunification process so that the adoption can be completed in less time if the family reunification plan fails; and (2) reduces the number of placement disruptions for the child, youth and NMD by allowing the Resource Family to become the adoptive family. All CONTRACTOR providing adoption services must have an active Exhibit A-17, Adoption License or MOU throughout the term of the contract, if adoptions are not facilitated by the COUNTY.

3.2.2 It is also a priority of COUNTY to place children with their teen parents whenever possible while their teen parents are placed in out-of-home care. A Whole Family Foster Home (WFFH) supports the COUNTY's efforts to achieve timely permanency for children by providing support and services to teen parent family units to strengthen the young family and foster safety and independence. A Whole Family Foster Home is a family home that provides care for a minor parent and his or her child, and is specifically recruited and trained to assist a teen parent in developing the skills necessary to provide a safe, stable, and permanent home for his or her child. Additionally, it is the goal of COUNTY to have many more FFA homes approved as Whole Family Foster Homes. The increase in Whole Family Foster Homes will assist the COUNTY with (1) increasing placement options for a teen parents and their child(ren);

(2) the homes designed to care for teen parents and their children; and (3) removes the current financial disincentive to place teen parents and their children together.

3.3 Access to effective and caring services for Well-Being and Self-Sufficiency: It is the COUNTY's goal to ensure placed children, youth and NMDs receive Core Services as identified through the Child and Family Team in the spirit of the Core Practice Model to improve their level of functioning in the areas of education and career planning, transition out of foster care, physical, behavioral, social and emotional well-being and self-sufficiency. The Performance Outcome Goals and Requirements Summary addressing this priority are found in Part D, Section 23.0 of this SOW.

4.0 PROGRAM GOALS

The COUNTY has incorporated the following program goals consistent with Assembly Bills 403 and 1997:

- Conducting comprehensive initial child, youth and NMD assessments;
- Increasing the use of Home-Based Family Care and the Provision of Services and Supports to Home-Based Family Care and wrap the necessary services around the child, youth and NMD to ensure placement success and prevent replacements; and
- Creating faster paths to Permanency resulting in shorter durations of involvement in the Child Welfare and PCW Systems.

Aligned with the above mentioned goals are program services which shall include the timely provision of an array of appropriate services that are coordinated, comprehensive, and community-based, and which address the needs of children, youth and NMDs with more intensive needs requiring medically necessary specialty mental health services in their own home, or an appropriate homelike setting in order to facilitate reunification and to ensure their safety, permanence, and well-being. These program services shall be trauma informed, culturally relevant, age and developmentally appropriate. Additionally, programs shall collaborate with child welfare and mental health agencies for the provision of coordinated services to children, youth and NMDs, and their family in accordance with the CPM as described in Part A, Section 6.0.

5.0 TARGET DEMOGRAPHICS

CONTRACTOR shall accept and provide services to children, youth and NMDs as indicated in the CONTRACTOR's approved Plan of Operation Program Statement and in accordance to Title 22, Division 6, Chapter 8.8, Sections 88222 and 88222.1.

5.1 The overall target demographics for FFAs is children, youth and NMDs in need of a temporary or permanent family setting. The principal target groups include children, youth and NMDs in which the Case Plan is for: (1) family reunification;

(2) adoption; (3) legal guardianship; (4) permanent placement; (5) sibling group placement; (6) teen parents and their children; (7) neighborhood and school-based placement; (8) self-sufficiency; and (9) children, youth and NMDs with special health care needs as defined in WIC Section 17710(a) (See Exhibit A-1, Reference Links) and in Title 22, Division 6, Chapter 8.8, Article 9, Subchapter 1, Section 88201 (3)(A), for FFAs with Specialized Resource Families.

6.0 CORE PRACTICE MODEL

The Core Practice Model (CPM) prioritizes child, youth and NMD safety by enabling stronger teamwork with children, youth, NMDs and families, grounded in strong community support. The CPM is a deeper way to work with families to improve safety and outcomes for children, youth and NMDs. The model helps children, youth, NMDs and families build supportive teams that enable them to identify their strengths and underlying needs in a trusting, positive environment. These insights become the foundation of more effective action plans for change that are tailored specifically to each child, youth, NMD and family. The strategies of this model include:

- Engagement: This is an opportunity to hear the family, build trust, show empathy and honor the family's voice and choice.
- Teaming: Allows for teamwork to occur; shows how formal and informal supports can work together; promotes shared ownership and opportunity for change.
- Assessment and Understanding: Allows for shared identification of underlying needs and strengths; it is responsive to trauma, culture and empowers families.
- Planning and Intervention: Allows for the crafting of tailored services and attention to individual underlying needs.
- Tracking and Adapting: Allows for continuous monitoring of progress, while being thoughtful about the effectiveness of plans; creates an opportunity to make adjustments using team assessments so plans can evolve to achieve long-term goals.

The CPM is a process that is family centered, solution focused, trauma responsive, strength-based, team driven, and improves outcomes for children, youth, NMDs and families.

For more information, the CONTRACTOR may refer to the Pathways to Mental Health Services Core Practice Model Guide and the COUNTY's CPM website (See Exhibit A-1, Reference Links)

PART B – PROGRAM REQUIREMENTS

7.0 SERVICE DELIVERY SITES

The CONTRACTOR's services described hereunder shall be provided through licensed FFA sites at the locations specified on Exhibit A-2, Service Delivery Sites. All FFA Service Delivery Sites must have an active Exhibit A-14, Facility License and Exhibit A-15, Rate Letter throughout the term of the contract.

7.1 CONTRACTOR shall provide notification to the DCFS Out-of-Home Care Management Division (OHCMD) Chief or designee and the Probation Placement Permanency & Quality Assurance (PPQA) Director in writing a minimum of thirty (30) Days before: (1) terminating services at any location(s); and (2) before commencing services at any other location(s) not previously approved in writing by the DCFS (OHCM) Division Chief or designee and the PCW PPQA Director.

7.2 CONTRACTOR shall not place children, youth and NMDs at a service delivery site not approved on Exhibit A-2. Failure on the part of CONTRACTOR to comply with the provisions of this section shall constitute a material breach of this Contract upon which COUNTY may take all appropriate action including but not limited to, implementation of Hold Status, Do Not Refer Status, or Do Not Use Status, as set forth in Part I – Unique Terms and Conditions, Section 16.0, Hold Status, Do Not Refer Status, Do Not Use Status, Corrective Action Plan. If CONTRACTOR disagrees that there has been a material breach, CONTRACTOR may exercise any and all of its legal rights consistent with Part I, Section 20.0 Dispute Resolution Procedures of this Contract.

7.3 In the event that a CONTRACTOR is put on Do Not Use Status, to ensure continuity of care for children, youth and NMDs, COUNTY may continue placement in the Resource Family Home if the Resource Family Parent applies for licensure by the State, becomes approved by another FFA, or DCFS and PCW approves the home as a Non-Related Extended Family Member (NREFM) RFA home.

7.4 CONTRACTORS shall check the Megan's Law Website (See Exhibit A-1, Reference Links) prior to licensing a new site to ensure that no registered sex offender lives so close that they will be a potential threat to the safety of the children, youth and NMDs.

7.5 CONTRACTOR shall develop a Safety Plan for each service delivery site to ensure the safety of the children.

7.6 CONTRACTOR shall ensure all the following postings are visible and placed in a common area, in accordance with the sections as described below in Title 22, Division 6, Chapter 8.8, HSC, WIC, CDSS publications and forms (See Exhibit A-1, Reference Links):

- Facility License (FFA Section 88209)

- Foster Youth Bill of Rights (Ombudsperson)
- Know Your Sexual and Reproductive Health Rights (PUB 490)
- Foster Youth Mental Health Bill of Rights (PUB 488)
- Foster Care Ombudsman (PUB 379)
- Complaint Procedures (FFA Section 88209)
- Emergency Disaster Plan and Contact Numbers (LIC 610)
- Evacuation Plan (Facility Sketch)
- Visiting Policy Notice (HSC 1512)

8.0 STAFF QUALIFICATIONS, REQUIREMENTS AND EXEMPTIONS

CONTRACTOR shall adhere to Title 22 Division 6, Chapter 8.8, Sections 88264, 88265.2, 88265.3, 88364, 88365.2 and 88365.3 requirements in connection with staff qualifications, requirements, and exemptions.

8.1 California Department of Justice (DOJ) Authorization for Resource Family Approval Assessments

Any FFA implementing Resource Family Approvals must be authorized by the California Department of Justice (DOJ) to obtain criminal history information necessary to complete a Resource Family Approval assessment. To become authorized, an FFA must establish mailing and billing information and obtain an Originating Agency Identifier (ORI) code by completing the application package (See Exhibit A-1, Reference Links).

8.2 Criminal Record Clearance Procedures, Criminal Record Exemptions, and Child Abuse Index Checks

CONTRACTOR shall adhere to the requirements of Part I, Unique Terms and Conditions, Section 8.0 Background and Security Investigations, HSC Section 1522 and as specified in Title 22, Division 6, Chapter 1, Section 80019 (See Exhibit A-1, Reference Links).

8.2.1 CONTRACTOR shall obtain a criminal clearance, an approved criminal record exemption or other official notification in writing, on each individual for whom such clearance or exemption is required, prior to any contact with children, youth, and NMDs. CONTRACTOR shall notify COUNTY of any request for exemptions and exceptions from California Department of Social Services (CDSS) Criminal Background Check Bureau (CBCB) of any Resource Family applicant, all adults residing or regularly present in the home of the Resource Family, prospective employee, current employee, independent contractor, volunteer staff or subcontractor. CONTRACTOR shall inform COUNTY of any approved exemptions, exceptions, and denied exemption requests by CDSS CBCB within two business days of receipt by submitting Exhibit A-3, Criminal Record Exemption Notification along with

any related documentation. Notifications shall be sent to CONTRACTOR's assigned OHCMD, Quality Assurance (QA) Technical Assistance Specialist (TAS) and assigned PCW PPQA RPM. CONTRACTOR shall report any subsequent arrest, conviction, and probation or parole violation for any individual with either a clearance or an exemption, to CCLD, COUNTY Worker, OHCMD, QA TAS and the PCW PPQA RPM within 48 hours.

8.2.1.1 CONTRACTOR shall notify COUNTY of any approved or denied exemption request submitted to the California Department of Social Services (CDSS) Criminal Background Check Bureau (CBCB). Notifications shall be sent to CONTRACTOR's OHCMD, QA TAS and PPQA assigned monitor within 2 business days of receipt by submitting the Criminal Record Exemption Notification (Exhibit A-3) along with any related documentation. The COUNTY has discretion not to utilize an approved resource home that has received a criminal record exemption. CONTRACTOR shall be notified of such decision within five (5) days of DCFS receipt of Exhibit A-3. The CONTRACTOR must receive written approval for anyone with a criminal record exemption prior to having contact with children, youth and NMDs.

8.3 CONTRACTOR shall check the Megan's Law Website (See Exhibit A-1, Reference Links) prior to: the approval of any Resource Family applicant and other adults residing in the home and on the premises of the Resource Family's property, the hiring of any prospective employee(s), the use of agency independent contractor(s), volunteer(s), or subcontractor(s) who may come in unsupervised contact with the children, youth and NMDs in the course of their work, volunteer activity, or performance of the subcontract, and shall maintain records documenting this.

8.4 Subsequent Arrests or Convictions

CONTRACTOR shall notify the OHCMD QA TAS, PCW PPQA RPM assigned monitor, County Worker and CCLD in writing of any known allegations in the Child Abuse Central Index (CACI), arrest, subsequent conviction, and probation or parole violation, other than for minor traffic offenses, of all persons who are not exempt from finger printing, in accordance with HSC, Sections 1522.1 and 1522(b) (See Exhibit A-1, Reference Links) and the following: (1) any Resource Family applicant, all adults residing or regularly present in the home of an applicant, employee, independent contractor, volunteer staff, or subcontractor who comes in contact with children, youth and NMDs while providing services under the contract; (2) any

adult responsible for administration or direct supervision of staff; (3) if the CONTRACTOR is a firm, partnership, association, or corporation, the chief executive officer of CONTRACTOR or other person serving in like capacity; and (4) additional officers of the governing body of the CONTRACTOR or other persons with a financial interest in the applicant, as determined necessary by CDSS and by regulation.

8.4.1 CONTRACTOR shall prepare and submit the Notification of Subsequent Arrest, Conviction, Probation or Parole Notification (Exhibit A-4) to the assigned OHCMD, QA TAS and PPQA monitor along with any related documentation within two (2) working days from the time such information becomes known to the CONTRACTOR. All supplemental documentation received after the Exhibit A-4 submission must be provided as it becomes available.

8.5 CONTRACTOR shall maintain all records related to background checks, criminal record clearance procedures, criminal record exemptions, criminal record statements, Child Abuse Central Index checks, and subsequent arrest request notification documentation, which shall be made available upon request.

8.6 Staff Language Requirements

CONTRACTOR shall, to the extent possible and if resources are available, provide staff and social work personnel who are proficient in both speaking and writing the language of the CONTRACTOR's Resource Family and the children, youth and NMDs.

8.7 Declarations of Part-time Contract Social Workers

CONTRACTOR is responsible for obtaining written declarations from any contract social workers utilized on a part-time basis to the effect that the contract social worker's total contracted caseload with all contracting agencies does not exceed 15 children, youth and NMDs. Contract social workers must meet staff requirements as indicated in Section 8.0 of this SOW.

8.8 Required Services by CONTRACTOR's Social Work Staff

CONTRACTOR's social work staff shall provide services as set forth in the CONTRACTOR's Exhibit A-13 – Plan of Operation and Program Statement in accordance with Sections 2.2 (a) through (d) of this SOW, as applicable; and any additional services identified in this SOW, as applicable. These services shall also include qualified social work personnel to be available on a 24-hour basis to respond to any emergency within a two-hour period.

9.0 TRAINING

CONTRACTOR shall develop comprehensive initial and ongoing training plans for agency staff, volunteers, subcontractors, working directly with children, youth and NMDs in accordance with Title 22, Division 6, Chapter 8.8 and Subchapter 1, Section 88222.1(4) and (5) and 88364(d) and (e), which shall be made available upon request.

9.1 CONTRACTOR shall ensure training is conducted by qualified staff as indicated in Title 22, Division 6, Chapter 8.8, and Subchapter 1, Sections 88222(d)(7)(B)(3); 88264(g)(1)(B) and (5); 88265.2(c)(1); 88364(c) through (e); 88365.2(b); 88365.3(b).

9.2 CONTRACTOR shall maintain the individual records of the training staff qualifications and the training completed by staff, volunteers, subcontractors and Resource Families, which shall be made available upon request.

9.3 In addition to the training topics listed under Title 22, Division 6, Chapter 8.8, Sections 88222.1(b)(4) and 88372(c), the CONTRACTOR shall include the following topics as part of the required annual hours of training:

- College and Career Readiness
- Implicit Bias and Cultural Competency
- Sexual and Reproductive Health Education
- Reduction of Law Enforcement Involvement

9.3.1 CONTRACTOR shall include the Sexual and Reproductive Wellness in Foster Care training curriculum by the California Social Work Education Center as part of the required initial staff training (see Exhibit A-1 Reference Links).

9.3.2 CONTRACTOR shall ensure staff providing direct education support to children, youth and NMDs attending 6-12 grade receive three hours of College and Career Readiness training in accordance with the Turning Dreams Into Degrees in LA County curriculum as referenced in Exhibit A-1 (See training resources at Exhibit A-1-Reference Links). The training shall be tailored to the grade level of each child, youth and NMD (Grades 6-10 or 11-12). Staff who have completed training for children and youth in grades 6-10 must complete additional training tailored to children, youth and NMDs in grades 11-12 upon the child, youth and NMDs' transition to the 11th grade.

9.4 CONTRACTOR shall ensure participation by a minimum of one staff to any trainings provided by the COUNTY. Staff designated to participate in the COUNTY trainings shall be qualified to train the CONTRACTOR's staff.

Any COUNTY facilitated training may be counted toward the annually required training.

- 9.5 The COUNTY reserves the right to designate up to 16 hours of additional training per year as determined by the COUNTY. Training needs shall be researched and implemented by the CONTRACTOR as necessary.

10.0 PROGRAM REPORTING REQUIREMENTS

All CONTRACTOR employees, volunteers, subcontractors and Resource Parents are mandated reporters of child abuse and neglect per PEN Section 11165 (See Exhibit A-1, Reference Links), Child abuse and neglect in out-of-home care are defined in Section 11165.5 (See Exhibit A-1, Reference Links).

- 10.1 The CONTRACTOR and Resource Parents shall report all suspected child abuse and neglect allegations and incidents immediately upon discovery for all children in accordance to Exhibit A-5, Special Incident Reporting Guide.
- 10.2 CONTRACTOR agrees that the safety of the child, youth and NMD will always be the first priority. To ensure the safety of the children, youth and NMD, CONTRACTOR will train Resource Families to immediately, upon discovery, report the suspicion in accordance to Exhibit A-5, Special Incident Report Guide, whenever CONTRACTOR reasonably suspects that a child, youth or NMD has been a victim of abuse and/or is in danger of future abuse. CONTRACTOR will remain with the child, youth or NMD if imminent risk is present. The CONTRACTOR and Resource Families shall not investigate allegations of child abuse or neglect and establish disposition prior to the investigation by the PCW or DCFS Out-of-Home Care Investigation Section (OHCIS) and CCLD. If the CONTRACTOR rescinds a Resource Family Home Approval at the request of the Resource Family during an investigation and prior to disposition, CONTRACTOR shall notify PCW or DCFS of the investigative status within 24 hours of the rescission.
- 10.3 CONTRACTOR shall ensure that all known or suspected instances of child abuse or neglect are reported to a child protective agency as defined in PEN Section 11166 (See Exhibit A-1, Reference Links). This responsibility shall include:
- 10.3.1 CONTRACTORS may use the Child Abuse Reporting Electronic System (CARES) to submit non-urgent reports of suspected child abuse or neglect. The 36-hour follow-up written report is not required when using the online system. For more information about CARES, how to determine if the report is not urgent, and to access the CARES, see Exhibit A-1, Reference Links.

10.3.2 A requirement that all employees, consultants, or agents performing Services under this Contract who are required by PEN Section 11165.7 (See Exhibit A-1, Reference Links), to report child abuse or neglect, sign a statement that he or she knows of the reporting requirements and will comply with them.

10.3.3 To the extent possible and reasonable, CONTRACTOR will educate employees, consultants or agents who are not mandated reporters of child abuse or neglect, as defined in PEN Section 11166 (See Exhibit A-1, Reference Links), on procedures for reporting any reasonable suspicion of child abuse or neglect.

10.4 Special Incident via the I-Track System

The CONTRACTOR shall prepare and submit a Special Incident Report, via the I-Track System, for each child, youth and NMD in accordance with the guidelines and time frames in Exhibit A-5, Special Incident Reporting Guide. In addition to the reporting requirements described in Title 22, Division 6, Chapter 8.8, Subchapter-1, Section 88361, the CONTRACTOR shall also notify the COUNTY of all reportable incidents via the I-Track web-based system (See Exhibit A-1, Reference Links).

For Probation children, youth and NMDs the CONTRACTOR shall also report incidents by telephone to the PPQA Residential Program Monitoring (RPM) Officer of the Day (OD) and a Deputy Probation Officer (DPO) on record the I-Track System. Failure to report via the I-Track system may result in further action as described in Exhibit N, Investigation/Monitoring/Audit Remedies and Procedures.

10.4.1 Each incident will be evaluated by the COUNTY on a case-by-case basis to determine appropriate corrective action.

10.5 Runaway and Child Abduction Procedures and Reporting

10.5.1 Call Law Enforcement

CONTRACTOR shall ensure the Resource Family keeps the contact information of the nearest law enforcement agency on hand and contact them immediately to file a Missing Persons' Report in accordance to the timelines as specified in Exhibit A-5, Special Incident Report Guide. Photographs may be released to law enforcement only in an effort to expedite locating of affected children, youth and NMDs. Identifying information for law enforcement shall only include a photograph of the child, youth or NMD description of clothing when last seen, date of birth, last location of the child, youth or NMD and any distinguishing marks or tattoos. CONTRACTOR

shall inform law enforcement that photographs and other personal identifying information, which includes the child, youth or NMD's social security number, shall not be posted in any communities and document the discussion with law enforcement in the submitted Special Incident Report (SIR) via I-Track.

10.5.1.1 CONTRACTOR shall ensure to get a report number, the name of the person taking the report and follow up by getting a copy of report and document all efforts. All efforts to locate the child, youth and NMD shall be documented and any documentation related to the missing child, youth and NMD must be maintained in the child, youth and NMD's records.

10.5.1.2 CONTRACTOR shall submit the Missing Person's Report and reporting number to the County Worker by the next day after the incident, or as soon as the report is made available by the law enforcement agency.

10.5.1.3 For NMDs, CONTRACTOR shall report to the COUNTY Worker when the NMD has not returned home for a 72-hour period and their whereabouts are unknown.

10.5.2 Call the County

CONTRACTOR shall ensure that Resource Parents, as soon as it is discovered that a child, youth or NMD has been abducted or ran away, must call the County Worker or their supervisor. If after hours or on the weekend, or, unable to reach the County Worker or their supervisor, Resource Parents must call the **DCFS Child Protection Hotline at 1-800-540-4000**. For Probation children, youth and NMDs, Resource Parents must e-mail the PAS Exit Notification at placementexitnotification@probation.lacounty.gov and contact the DPO on record. Any assistance you can provide to the County Worker about neighbors, friends of the child, youth or NMD, school officials and family members would be helpful in gathering more information.

10.5.2.1 COUNTY staff will need as much detailed information as can be provided. For instance: Who did the child, youth or NMD leave the home with? Did someone pick up the child, youth or NMD or did they leave on foot? Which direction did the child, youth or NMD go in? Was there a parent, relative or friend involved? What was the child, youth or NMD's state of mind – angry, depressed? What was the child, youth or NMD wearing? For children, youth and NMDs with a history of or at risk of Commercial Sexual Exploitation the CONTRACTOR shall ensure Resource

Parents document and report to the County Worker any of the following:

- Child, youth or NMD exhibits behaviors or otherwise indicates that they are being controlled or groomed by another person;
- Child, youth or NMD spends time with people known to be involved in commercial sex;
- Child, youth or NMD's use of internet, cell phone, or social media involves social or sexual behavior that is atypical of their age.

10.5.2.2 CONTRACTOR shall ensure Resource Parents document and indicate if the child, youth or NMD fits any of the following descriptions:

- Child, youth or NMD has a history of running away, unstable housing, including multiple foster care placements, or periods of homelessness including couch surfing;
- Child, youth or NMD has had prior involvement with law enforcement or the juvenile justice system;
- Child, youth or NMD is frequently truant;
- Child, youth or NMD's relationships are concerning, placing him/her at risk or in danger of exploitation;
- Child, youth or NMD has a history of substance abuse, specifically narcotics, opiates, crack/cocaine and amphetamines.

10.5.3 CONTRACTOR shall ensure Resource Parents maintain important numbers to have on hand:

- County Worker
- County Workers supervisor
- Child Protection Hotline: (800) 540-4000
- Runaway Outreach Unit: (213) 765-7310
- PCW PAS Reception (323) 730-4466
- PPQA RPM OD (323) 537-6297
- Closest law enforcement agency

10.5.4 I-Track Reporting

CONTRACTOR shall cross report a child abduction or runaway in accordance to the timelines as specified in the SIR Guide (Exhibit A-5) and by completing an I-Track Special Incident Report. CONTRACTOR shall cross report to CCLD, the DCFS OHCMD, QA

Section, Runaway Outreach Unit, PCW PPQA, and to the County Worker. CONTRACTOR shall also report the abduction or runaway to the Probation PAS Exit Notification e-mail at placementexitnotification@probation.lacounty.gov. The report shall include the time and date of the abduction or when the runaway child, youth or NMD was last seen and any significant details leading to the incident.

10.5.5 Supplemental Reporting Information

CONTRACTOR and Resource Families shall be familiar with the CDSS' All County Information Notice (ACIN) I-13-17, "Promising Practices for Youth Who Are Missing or Run Away From Foster Care" (See Exhibit A-1, Reference Links) shall assist the County Worker in completing the following forms: Substitute Care Provider Incident Report, the Special Incident Report-Runaway Addendum, the Safety Support Plan, and Missing/Runaway Youth De-briefing Form as instructed in the ACIN I-13-17.

10.5.6 CONTRACTOR shall keep all copies of reports and documentation for at least six (6) months.

10.6 Foster Care Search System (FCSS) and Provider Management Information System (PMIS)

CONTRACTOR shall notify COUNTY of any and all updates and/or changes to the agency, vacancy information and placement homes, including when the Resource Family Home is approved or has its approval rescinded. CONTRACTOR shall report these updates and changes using the Foster Care Search System (FCSS). FCSS shall be utilized until the PMIS replaces it, at which point CONTRACTOR shall ensure the PMIS system is updated regularly. Notification of a Resource Family Approval shall occur prior to placement. Notification of a Rescission of Resource Family Approval shall occur within 72 hours following the date of rescission and shall include the name of the resource parent(s), date of birth, social security number and reason for rescission. These notices shall be sent to the DCFS' Revenue Enhancement Division via email to DCFS_REUNIT@dcfs.lacounty.gov or uploaded on the FCSS. Failure to provide this information to the COUNTY may result in a Do Not Refer Status being placed on the FFA. Furthermore, the agency must provide an LIC 9185, LIC 05A, or RFA 06 (See Exhibit A-1, Reference Links) or equivalent forms, as applicable and in accordance with Title 22, Division 6, Chapter 8.8, Section 88331.8 and 88371(d).

As indicated by Assembly Bill 79, biennially, a Foster Family Agency shall update the approval of a Resource Family no sooner than 60 calendar days prior to the 24-month anniversary date and shall be completed no later than

30 calendar days after the 24-month anniversary date. The 24-month anniversary date shall be either: (1) 24 months from the approval date, if an update has not occurred; or (2) 24 months from the date an update was completed. CONTRACTOR shall ensure that form RFA 06: Resource Family Approval Update Report or an equivalent form is uploaded to FCSS no sooner than 60 calendar days prior to the 24-month anniversary date or no later than 30 calendar days after the 24-month anniversary date. Failure to upload a copy of form RFA 06 to FCSS timely will result in the RFA home to be placed on hold. The hold shall remain in place until a copy of the RFA 06 is uploaded to FCSS and Revenue Enhancement has processed any reported changes accordingly.

CONTRACTOR shall register in the FCSS (See Exhibit A-1, Reference Links) to create an account and access instructional training videos on the use of FCSS. FCSS shall be utilized until the PMIS replaces it, at which point CONTRACTOR shall ensure the PMIS system is updated regularly.

10.6.1 CONTRACTOR shall designate at minimum one staff per facility to update FCSS and PMIS regularly, at a minimum weekly, to ensure information pertaining to the agency, staffing, caregiver preferences, population served, placement availability, RFA and RFA Rescission is current and accurate.

10.6.2 CONTRACTOR shall assign one Administrator for PMIS to manage the user roles for their staff. Each PMIS user should have an individual user name, email and password. User accounts should not be shared.

10.7 Utilization Report

CONTRACTOR shall provide OHCMD the total number of Resource Family Homes (Approved and Rescinded) and total number of bed vacancies on a monthly basis, by completing the monthly utilization reports (Exhibits A-6 and A-6a). CONTRACTOR shall submit the Monthly Utilization Report via e-mail at: DevO@dcfs.lacounty.gov no later than the 10th day of each month or next business day if the 10th falls on a holiday or the weekend. This section will no longer be applicable once the PMIS automated reporting capability is fully operational. COUNTY will notify CONTRACTORS in writing when the Utilization Report is no longer required.

11.0 PROGRAM COMPLIANCE AND QUALITY ASSURANCE

CONTRACTOR shall develop and implement a continuous quality improvement plan in accordance with Title 22, Division 6, Chapter 8.8, Section 88263, 88263.1, and ACIN No. I-48-19 (see Exhibit A-1, Reference Links), which shall include internal controls and monitoring that comply with this Contract and the Office of Management and Budget (OMB) Super-Circular.

11.1 Throughout the term of this contract, the COUNTY will monitor the CONTRACTOR's performance. Any failure by the CONTRACTOR to comply with the terms of this contract, including any failure to meet the performance targets described on each Performance Outcome Summary which follows, may result in COUNTY's termination of the whole or any part of the contract in accordance with Part II, Standard Terms and Conditions, Section 17.0, and placement of the CONTRACTOR on "Hold", "Do Not Refer" (DNR), or "Do Not Use" (DNU) Status or any other remedy specified in the Contract and as described in Exhibit N, Non-Compliance Remedies and Procedures.

11.2 Evidence-Based Practices

CONTRACTORS shall employ Trauma-Informed Evidence-Based Practices whenever possible, in accordance with Title 22, Division 6, Chapter 8.8, Section 88222(e) & (d)(7)(B)(2) and 88222.1(a), in an effort to increase achievement of the COUNTY's Performance Outcome Goals as described in Exhibits A-7, A-8 and A-9. For information on Evidence Based Practices CONTRACTOR may refer to the ACIN No. I-28-18 (See Exhibit A-1, Reference Links).

12.0 PLAN OF OPERATION AND PROGRAM STATEMENT CHANGES

Any changes and addenda CONTRACTOR makes to the Plan of Operation and Program Statement must be submitted to the COUNTY and CCLD for approval. Changes may not be implemented until written approval from COUNTY is received. CONTRACTOR shall allow for sixty (60) days for COUNTY approval.

12.1 COUNTY may request that CONTRACTOR make revisions to its Plan of Operation and Program Statement by notifying CONTRACTOR in writing, thirty (30) days in advance, of any proposed changes.

12.2 CONTRACTOR shall coordinate with OHCMD and PPQA staff to submit any changes via electronic submission through the web based electronic Program Statement Submission System (ePSSS) (See Exhibit A-1, Reference Links).

13.0 INTENTIONALLY LEFT BLANK

PART C – PROGRAM SERVICES

14.0 CHILD AND FAMILY TEAM

CONTRACTOR shall develop and maintain a process to participate and collaborate with the CFT to decrease the length of time to achieve permanency

through the strengthening of family engagement and cross-agency networks of services and supports in accordance with WIC Section 16501(a)(4) (See Exhibit A-1, Reference Links).

14.1 The CFT process shall be aligned with the values of the County of Los Angeles Shared Core Practice Model (CPM) (See Exhibit A-1, Reference Links).

14.1.1 The CPM and the CFT process shall be family-centered to identify: (1) The family's strengths and underlying needs; (2) Collaborative case planning; (3) Decision making; (4) The consideration of the long-term success of the family.

14.1.2 For further guidance when developing the CFT process, the CONTRACTOR shall refer to the COUNTY's policy on CFT (See Exhibit A-1, Reference Links).

14.2 CONTRACTOR shall follow the CFT guidelines as described in WIC Code section 16501(a)(4) and as described in the ACL No. 16-84 (See Exhibit A-1, Reference Links).

14.3 The CFT process is a solution-focused approach meant to draw on the family's history of protection and ability to solve problems. The information assists families develop their vision for their future and assists them in gathering a formal and informal support network that will be available to them after termination of formal services.

14.4 An effective CFT continues the process of engagement with the family, child, youth or NMD and caregivers, includes persons who participate in the child, youth or NMD's education and provides a process for transparent communication to ensure that services are well coordinated in collaboration with service providers.

14.5 CONTRACTOR shall ensure participation in the CFT by the Resource Families and any other staff identified by the CONTRACTOR.

15.0 CORE SERVICES AND SUPPORTS

CONTRACTOR shall make Core Services and Supports available to children, youth and NMDs either directly or secured through formal agreements with other agencies, which are trauma-informed and culturally relevant as described in WIC 11463(b)(5), Title 22, Division 6, Chapter 8.8, Section 88278.1 and with the program statement. All children, youth and NMDs shall have a right to fair and equal access to all available services, placement, care, treatment, and benefits.

15.1 Specialty Mental Health and Additional Treatment Services

CONTRACTOR shall make Specialty Mental Health Services available to children, youth and NMDs who meet medical necessity criteria for specialty mental health services under the Medi-Cal Early and Periodic Screening, Diagnosis, and Treatment program, as the criteria are described in Section 1830.210 of Title 9, of the California Code of Regulations (See Exhibit A-1, Reference Links) and to the extent that funding and services are available and as identified in the Needs and Services Plan (NSP) in collaboration with the CFT and in accordance with Title 22, Division 6, Chapter 8.8, Section 88289.1.

15.1.1 Psychiatric Assessment and Psychotropic Medication

CONTRACTOR shall take all necessary steps to ensure that any child, youth and NMD in its care with a known history of psychiatric problems (including hospitalizations) receives a psychiatric assessment within thirty (30) days of admission, provided that such evaluation is authorized by DMH, conducted by a licensed mental health professional; and submit to the County Worker the written results of such tests and any other mental health treatment records when obtained by the CONTRACTOR.

15.1.1.1 Whenever psychotropic medication is prescribed as a result of the psychiatric assessment, the CONTRACTOR shall monitor psychotropic medications in accordance with Title 22, Division 6, Chapter 8.8, Subchapter 1, Section 88487.15.

15.1.1.2 CONTRACTOR shall follow the psychotropic medication guidelines JV-217-INFO (See Exhibit A-1, Reference Links) and ensure that any prescribing physician submitting an application for psychotropic medication authorization (JV-220A, JV-220B) for a foster child, youth and NMD in residential placement, seeking an order pursuant to WIC 369.5 (see Exhibit A-1, Reference Links), is credentialed by the DMH.

15.1.1.3 For each psychotropic medication prescribed to a child, youth or NMD the CONTRACTOR, in conjunction with the County Worker, shall monitor to ensure that: (1) the prescribing physician submits a request and obtains court authorization; and (2) these requests and orders are renewed every six (6) months (JV-220 form) (See Exhibit A-1, Reference Links). Upon receipt from the County Worker or physician, the CONTRACTOR shall maintain copies of the court authorizations in the child, youth and NMD's case record.

- 15.1.1.4 CONTRACTOR shall incorporate into the treatment plan all psychotropic medication(s) the child, youth and NMD receives per Foster Youth Mental Health Bill of Rights and Foster Youth Bill of Rights (See Exhibit A-1, Reference Links).
- 15.1.1.5 CONTRACTOR shall follow COUNTY Policy as it relates to the Resource Parents as prescribed in DCFS Policy # 0600-514.10 (See Exhibit A-1, Reference Links) and Title 22, Division 6, Chapter 8.8, Subchapter 1, Section 88487.16(g) regarding psychotropic medication: authorization, review, and monitoring for a DCFS supervised child, youth and NMDs.
- 15.1.1.6 CONTRACTOR shall educate and assist the Resource Family and children, youth and NMDs regarding Psychotropic Medication use in accordance to DCFS Psychotropic Medication Policy No. 0600-514.10 (See Exhibit A-1, Reference Links), and document any pertinent observations of symptoms etc. for the completion and submission of court forms JV 218 and JV 219 (See Exhibit A-1, Reference Links). CONTRACTOR shall provide the JV 218 and JV 219 forms to the child, youth or NMD and Resource Parent(s). Although use of the forms is optional, CONTRACTOR as part of educating Resource Families shall encourage the completion of the forms, which may be used to inform the court how they feel about the use of psychotropic medication, effectiveness of the medicine, and any side effects of the medicine. If the Resource Parent(s) opt(s) not to complete the JV-219 form, the Resource Parent(s) may send a letter to the Judge, confer with the judge at the hearing, or ask the social worker or Court Appointed Special Advocate to tell the judge how they feel. Upon request from the COUNTY, the Resource Parent(s) shall provide verbal responses to the questions in the JV-219 form.
- 15.1.1.7 At the time of a child, youth and NMD's replacement, the CONTRACTOR shall follow the procedures for the transfer of psychotropic medication, as indicated in this SOW, Section 15.3.12.3.
- 15.1.1.8 CONTRACTOR shall ensure all documentation for the child, youth and NMD's mental health, psychological and psychiatric evaluations, including hospitalizations shall be maintained in the child, youth and NMD's file as described

in Title 22, Division 6, Chapter 8, Sections 88270 and 88270.1.

15.1.2 Additional Treatment Services

CONTRACTOR shall assist in locating and referring children, youth and NMDs to School-Based Mental Health Services, Day Rehabilitation, Day Treatment Intensive, Crisis Stabilization and Therapeutic Behavioral Services, in collaboration with the CFT and whenever identified in the NSP, to be included as part of the treatment plan.

15.2 Transition Services

CONTRACTOR shall provide transition support services for children, youth, NMDs and families upon initial entry and placement changes and for families who assume permanency through reunification, adoption, or guardianship and as identified in the NSP in collaboration with the CFT and in accordance with Title 22, Division 6, Chapter 8.8, Sections 88268.2, 88268.21 and 88268.3.

15.3 Education, Physical, Behavioral, Mental Health, Extracurricular Supports

CONTRACTOR shall provide educational and physical, behavioral, and mental health supports, including extracurricular activities and social supports as identified in the NSP in collaboration with the CFT.

15.3.1 Stable School Placements

CONTRACTOR shall ensure that Resource Parents collaborate with the County Worker to ensure stable school placements in accordance with WIC Section 16501.1(d)(4), and (g)(8)(B) (See Exhibit A-1, Reference Links). CONTRACTOR shall also ensure that Resource Parents collaborate with the County Worker and the pertinent educational institution in accordance with Education Code Section 48850(a) and (b) (See Exhibit A-1, Reference Links).

15.3.2 Right of Children, Youth and NMDs to Remain in School of Origin

CONTRACTOR shall ensure Resource Parents work in collaboration with the CFT and make every effort to maintain children, youth and NMDs in their school of origin, if in the best interest of the child, youth and NMD as determined by the child, youth and NMD's education rights holder and in accordance with EDC Sections 48853.5(e)(1)-(4), 48853.5(d)(1 and 2), and 48853.5(d)(4)(A) (See Exhibit A-1, Reference Links).

15.3.2.1 CONTRACTOR shall transport children, youth and NMDs to their school of origin or utilize alternate systems for transportation put in place by DCFS, PCW and school districts.

15.3.3 Immediate Enrollment of Children, Youth and NMDs in School

If the educational rights holder has made a determination that it is in the best interest of the child, youth and NMD to transfer from their school of origin, the CONTRACTOR shall ensure Resource Parents immediately enroll the child, youth and NMD in their local school in accordance with EDC, Section 48853.5(f)(8)(B) (see Exhibit A-1, Reference Links).

15.3.3.1 The CONTRACTOR shall ensure Resource Parents actively begin the enrollment process of the child, youth and NMD immediately, in order to engage the school for possible assistance with an acute issue and arrange for home-hospital instruction or homeschooling.

15.3.3.2 In the event immediate enrollment is not possible due to an acute issue with the child, youth or NMD the CONTRACTOR shall ensure Resource Parents provide a written certification from a mental health or medical provider to the County Worker that there is an acute issue requiring a specific amount of time for resolution; or, the CONTRACTOR shall provide proof that the education rights holder agrees that the delay in school enrollment is in the child, youth or NMD's best interest.

15.3.3.2.1 The acute issue experienced by the child, youth or NMD causing the delay in school enrollment, shall be documented in a SIR and in the child, youth or NMD's case file.

15.3.3.3 CONTRACTOR shall ensure the Resource Parents, in collaboration with the child, youth or NMD's education rights holder, DCFS, PCW and the school district, ensure that the child, youth or NMD is enrolled in classes that are appropriate to the child, youth or NMD's academic level, that will fulfill graduation requirements, and that are on a comprehensive campus unless there is a current expulsion order, an Individualized Education Plan (IEP) that requires an alternative school setting, or the education rights holder consents to a different school setting. If the CONTRACTOR believes the child, youth or NMD needs an initial or updated IEP, the CONTRACTOR shall work

with the child, youth or NMD's education rights holder and the school district to initiate the IEP process. CONTRACTOR shall document all educational barriers in the Education Section of the NSP, Exhibit A-11.

- 15.3.3.4 CONTRACTOR shall ensure children, youth and NMDs participate in educational enrichment activities while awaiting school enrollment.

15.3.4 Resource Foster Parents' Participation in Child, Youth and NMD's School Program

The CONTRACTOR shall ensure Resource Parents work with the child or youth's education rights holder or with the NMD and the school district in supporting the educational needs and rights of the child, youth or NMD. All efforts must be documented and reported in the Education Section of the NSP, Exhibit A-11.

- 15.3.4.1 CONTRACTOR shall ensure that the Resource Parent(s), in coordination with the child or youth's education rights holder if the Resource Parent is not the education rights holder or NMD, are: (1) representing the child, youth or NMD at parent meetings, open houses, etc.; (2) working with the child, youth or NMD's teachers and academic counselor to monitor educational progress, attendance, development, educational level, behavior, assessment of strengths and weaknesses, and the overall academic achievement; (3) encouraging and assisting the child, youth or NMD to participate in school activities; and (4) arranging appropriate transportation to and from school as indicated in Title 22, Division 6, Chapter 8.8, Subchapter 1, Section 88487.10.

- 15.3.4.2 The child, youth or NMD has the right to be enrolled in the least restrictive environment at school. The child, youth or MMD's education rights holder, school district, DCFS, PCW and the CONTRACTOR shall work together to ensure the child, youth or NMD is enrolled in the appropriate academic level of classes to progress the child, youth or NMD to a timely high school graduation.

- 15.3.4.3 The CONTRACTOR along with the Resource Parents shall work with the education rights holder and the County Worker to determine the most effective transportation method, assist the caregiver in obtaining transportation cost reimbursement from DCFS and PCW if needed, and identify other transportation options if the Resource

Parents cannot transport the child, youth or NMD to the school of origin.

15.3.4.4 CONTRACTOR shall ensure Resource Parents assist youth ages 16 and older and NMDs in collaboration with the assigned County Worker in identifying the appropriate person to support the youth or NMD with college applications, including financial aid applications in accordance with ACL 18-104 Additional Case Plan Documentation for Postsecondary Education Support (see Exhibit A-1, Reference Links).

15.3.4.5 CONTRACTOR shall ensure that each child, youth and NMD receives school photos and uniforms when appropriate. CONTRACTOR shall ensure that each child, youth and NMD is given the opportunity to attend their prom and graduation.

15.3.5 Daily Homework and Cognitive and Developmental Stimulation

CONTRACTOR shall ensure Resource Parents provide daily homework assistance and make every attempt to engage the children, youth and NMDs in completing homework and studies to ensure completion thereof. This assistance should include positive reward systems access to each class' homework assignment from the school (teacher email and/or parent portal) and reviewing the child, youth or NMD's work. CONTRACTOR shall ensure Resource Parents communicate with the school regularly to ensure homework completion and academic progress. In addition, CONTRACTOR shall ensure Resource Parents arrange for a quiet working area with appropriate school supplies and computer(s).

15.3.5.1 CONTRACTOR shall ensure Resource Parents provide sufficient computer access in terms of amount of time and number of computers that are updated and maintained with internet access with parental controls and current technology.

15.3.5.2 CONTRACTOR shall ensure Resource Parents schedule at minimum one-hour per day during the summer break for children, youth and NMDs to work on literacy and math.—CONTRACTOR shall assist and ensure Resource Parents explore all resources available with children, youth and NMDs in accordance to ACIN I-15-19 Available Education-Related Resources, including but not limited to the California Foster Youth Education Hub (See Exhibit A-1, Reference Links).

CONTRACTOR shall document reasons for a child, youth or NMD not participating in the scheduled activities in the Education Section of the NSP, Exhibit A-11.

- 15.3.5.3 CONTRACTOR shall ensure that Resource Parents engage the child, youth and NMD in age and developmentally appropriate activities. These may include computer access time, tutoring, homework assistance, visits to the library or museums, reading, arts, crafts, music, dramas, extracurricular activities and other educational enrichment. CONTRACTOR shall document reasons for a child, youth or NMD not participating in developmental appropriate activities in the Education Section of the NSP, Exhibit A-11.

15.3.6 Tutoring

CONTRACTOR shall ensure Resource Parents work with the school district in determining the need for tutoring and if any tutoring is available at the child, youth or NMD's school.

- 15.3.6.1 CONTRACTOR shall make the tutoring arrangements and provide the necessary supports for participation before or after-school.

- 15.3.6.2 CONTRACTOR may consider Los Angeles County Office of Education (LACOE) Foster Youth Service Coordinating Program (FYSCP) Tutoring Program and other community-based tutoring resources (See Exhibit A-1, Reference Links).

- 15.3.6.3 CONTRACTOR shall provide tutoring when the child, youth or NMD is struggling in their class work and homework, receiving D's or F's, working below grade level in reading, writing, math or, if determined necessary by the CFT and the school's Student Study Team, to improve the child, youth or NMD's basic reading, writing, and math skills.

- 15.3.6.4 The CONTRACTOR is not obligated to pay for items covered by public funds.

15.3.7 Educational Information

CONTRACTOR shall document in the NSP and report to the County Worker and the educational rights holder the following information:

1) child, youth or NMD's attendance; 2) child, youth or NMD's academic and extra-curricular achievements; 3) issues of concern related to school matters; 4) child, youth or NMD's behavior; 5) school officials' concerns about the child, youth or NMD's health; 6) suspension or discipline of the child, youth or NMD; 7) academic credits; 8) strengths of the child, youth or NMD; 9) child, youth or NMD's progress towards grade specific college planning milestones across 8th-12th grade and 10) if the child, youth or NMD is at risk of suspension or expulsion, or there is a concern related to the current or potential special education needs of the student, the CONTRACTOR shall additionally report them to the attorney for the child, youth or NMD.

15.3.8 College and Career Readiness

CONTRACTOR shall provide the youth and NMDs with existing information regarding available vocational, secondary and postsecondary educational options, including, but not limited to the following, which shall be documented in the youth and NMD's NSP, in accordance with ACIN I-15-19 Available Education-Related Resources and ACL 18-104 Additional Case Plan Documentation for Postsecondary Education Support (See Exhibit A-1, Reference Links):

- Financial aid information, including information about federal, state and school-specific aid, grants and loans, as well as aid available specifically to current or former foster youth and NMDs and contact information for the California Student Aid Commission.
- Postsecondary educational pathway information, including career and technical education
- Career exploration tools and opportunities, such as extracurricular activities that promote career exploration and career interest assessments
- Access to 100 hours of paid work experience before the age of 16; 300 hours before age 18.

15.3.8.1 CONTRACTOR shall provide the youth and NMDs with assistance with educational planning milestones, as indicated in the NSP, including, but not limited to, the following:

- Information about "A-G" courses in 8th grade
- Enrollment in "A-G" courses in 9-12th grade
- Completion of the PSAT in 10th grade
- Completion of the SAT or ACT in 11th and 12th grade

15.3.8.2 Upon request of the youth or NMD, CONTRACTOR in conjunction with County Worker shall assist the youth or NMD with the following steps to attending college:

- a. Application for admission;
- b. Financial Aid applications, such as the FAFSA, CA Dream Act Application, Chafee Grant application, WebGrants account and GPA verification form;
- c. Contact with Foster Youth Success Initiative (FYSI) Liaison, if attending a community college;
- d. Participation in Extended Opportunity Programs and Services (EOPS) or Extended Opportunity Program (EOP), if applicable;
- e. Participation in Disability Support Programs and Services (DSPS), if applicable;
- f. Assessment;
- g. College orientation and course planning;
- h. Enrollment and information on how to access priority registration at community colleges, CSU's and UC's;
- i. Payment of fees;
- j. Information about academic support, such as Next Up, Guardian or Renaissance Scholar programs available to foster youth and MMDs attending college;
- k. Priority housing for foster youth and NMDs at CSU's and UC's; and
- l. Access to miscellaneous higher education resources.

Resources available to assist with educational planning:

- Free *Foster Educational Planning Guide* available in English and Spanish (See Exhibit A-1, Reference Links).
- Free *Financial Aid Guide for CA Foster Youth* (See Exhibit A-1, Reference Links).
- ILP Online, California College Pathways and California Career Zone (See Exhibit A-1, Reference Links).

Resources to assist with career planning:

- Web-Based Career Assessment Tools: O*Net Online, Study.com, California Community Colleges-My Path, My Next_Move (See Exhibit A-1, Reference Links)
- Wage Reality Testing: Living Wage Calculator and Salary Surfer (See Exhibit A-1, Reference Links)

15.3.9 Maintenance of the education portion of the Health and Education Passport (HEP) or the Equivalent

CONTRACTOR shall file and maintain copies of updated relevant records in the HEP when received from the COUNTY, in accordance with Title 22, Division 6, Chapter 8.8, Sections 88270 and 88270.1 and WIC Section 16010 (See Exhibit A-1, Reference Links).

15.3.10 Extracurricular, Enrichment, Cultural, and Social Activities

CONTRACTOR shall ensure that Resource Families encourage, allow and provide children, youth and NMDs opportunities to participate in age and developmentally appropriate cultural, extracurricular, enrichment, and social activities in accordance with WIC 362.05 (See Exhibit A-1, Reference Links) and Title 22, Division 6, Chapter 8.8, Section 88487.14, and document in the NSP: (1) group interaction activities, both at the Resource Family Home and in the community; (2) school based and physical activities such as games, sports, and exercise, both at the Resource Family Home and in the community; (3) individual and family-oriented leisure time activities; (4) educational activities such as assistance with homework, college tours, college planning activities, etc.; (5) career exploration activities such as access to professionals (from in-demand employment sectors) presenting their roles to youth and NMDs, summer camps, opportunities for paid work experience or career shadowing; (6) daily living skills activities such as bathing, dressing, grooming, manners, shopping, cooking, money management, and use of public transportation; and (7) for a youth ages 12 or older and NMDs, a Resource Family shall provide access to information regarding available vocational and postsecondary educational options. The child, youth or NMD shall not be required to perform activities that interfere with school, training, treatment programs or family visits.

15.3.10.1 Resource Parents shall apply the Reasonable and Prudent Parent Standard as described and defined in Title 22, Division 6, Chapter 8.8, Section 88201(r)(1), when making decisions about allowing children, youth and NMD's participation in age and developmentally appropriate cultural, extracurricular, enrichment, and social activities.

15.3.10.2 CONTRACTOR shall provide instruction to the Resource Family on developing cultural humility, competency and sensitivity and related best practices to provide adequate care for children, youth and NMDs across diverse ethnic and racial backgrounds, as well as children, youth and NMDs identifying as lesbian, gay, bisexual, or transgender and further develop ways to provide opportunities to

encourage the development of the child, youth or NMD's cultural awareness, ethnic, racial and sexual identity, thereby increasing self-esteem.

15.3.10.3 CONTRACTOR shall explore ways for Resource Families to develop cultural humility and help identify, promote and engage in supportive, culturally appropriate, child, youth and NMD centered practices that respect Native American history, culture, retention of tribal membership and connection to the tribal community and traditions for children, youth and NMDs.

15.3.10.4 CONTRACTOR shall ensure Resource Parents encourage and allow children, youth and NMDs to participate in culturally appropriate, child, youth and NMD centered activities relevant to the child, youth and NMD's ethnic, racial and sexual identity, which may also include recreational extracurricular activities such as dance, art, sports, music, entertainment, etc.

15.3.11 Balanced Diet, Snacks, Special Diets, and Physical Activity

CONTRACTOR shall ensure that Resource Families provide a balanced diet in sufficient quantities as defined in Title 22, Division 6, Chapter 1, Section 80076; Chapter 4, Section 83076; and Chapter 8.8, Subchapter 1, 88487.11. A variety of nutritious meals, snacks, and beverages shall be made reasonably available unless specified in the NSP.

15.3.11.1 CONTRACTOR shall ensure Resource Parents provide for the special dietary needs of children, youth and NMDs including but not limited to vegetarian, vegan, religious and health based diets; and shall be documented in the child, youth or NMD's NSP as recommended by the child, youth or NMD's physician or nutritionist. CONTRACTOR shall inform the County Worker when special dietary needs arise due to medical problems and conditions. The quantity and quality of food available to household members shall be equally available to placed children, youth and NMDs.

15.3.11.2 CONTRACTOR shall ensure Resource Families use the most current age-appropriate nutritional and physical activity guidelines as recommended by the Centers for Disease Control, Division of Nutrition, Physical Activity, Obesity and the American Academy of Pediatrics (See Exhibit A-1, Reference Links). CONTRACTOR shall

include monitoring processes to ensure compliance with these guidelines.

15.3.12 Food Preparation and Storage

CONTRACTOR shall monitor for Compliance with Title 22, Division 6, Section 80076, for food storage, food preparation, and sanitation procedures to prevent transmission of infectious illnesses.

15.3.12.1 CONTRACTOR shall monitor for compliance that Resource Families do not serve frozen or powdered milk for drinking.

15.4 Healthcare Services

The CONTRACTOR shall ensure that all children, youth and NMDs receive first aid, medical, dental, vision, and mental healthcare, and related services; unless a NMD refuses such care in accordance with Title 22, Division 6, Chapter 8.8, Section 88487.15(a).

15.4.1 Medical Examinations, Routine Healthcare, and Immunizations

CONTRACTOR shall monitor the provision of the medical examinations, immunizations and routine/on-going healthcare of children, youth and NMD in accordance with the Child Health Disability Prevention (CHDP) Program (See Exhibit A-1, Reference Links).

15.4.1.1 CONTRACTOR shall, utilize a Child Health Disability Prevention (CHDP) provider or other provider who conducts CHDP equivalent medical and dental exams, care, and follow through, in accordance to the CHDP Program Policy No. 0600-506.10 (see Exhibit A-1, Reference Links). CONTRACTOR shall follow the Medical/Dental Exams Periodicity Schedule for children, youth and NMDs (See Exhibit A-1, Reference Links). For the initial medical examination, CONTRACTOR is to coordinate with COUNTY to ensure that children, youth and NMDs receive their initial medical exam at a Medical Hub. CONTRACTOR shall use DCFS 561(a) Medical Examination Form (Exhibit A-19), DCFS 561(b) Dental Examination Form (Exhibit A-20), and DCFS 561(c) Psychological/Other Examination Form (Exhibit A-21) for initial and routine visits.

15.4.1.1.1 CONTRACTOR shall coordinate with COUNTY to ensure an initial medical examination is conducted

within the timelines listed in DCFS Policy 0600-500.00 (See Exhibit A-1, Reference Links) for newly detained and CSEC children, youth or NMDs. COUNTY shall obtain medical clearances for placement through the Medical Hubs for newly detained children, youth and NMDs and CSEC only, which may or may not include an expedited initial medical examination.

15.4.1.1.2 CONTRACTOR shall ensure all Medical Hub appointments for the initial medical examination, and other CHDP equivalent appointments, are kept or rescheduled and coordinated with an appropriate CHDP equivalent provider.

15.4.1.2 If CONTRACTOR needs assistance in locating a CHDP provider doctor/ and dentist, CONTRACTOR may (1) log onto the web site of the Los Angeles County Department of Public Health (See Exhibit A-1, Reference Links); (2) contact the child, youth or NMD's County Worker; (3) contact a COUNTY Public Health Nurse; or (4) contact the DCFS Medical Director's Office at (213) 351-5614.

15.4.2 Medical, Dental, and Sexual and Reproductive Healthcare Services

CONTRACTOR shall ensure that the necessary medical, dental, psychiatric and sexual and reproductive health needs of the child, youth and NMD are met according to the Medi-Cal program, and Title 22, Division 6, Chapter 1, Section 80075, and Chapter 8.8, Subchapter 1, Sections 88487.15, 88565.1, 88569.1 and 88572.2.

15.4.2.1 CONTRACTOR shall ensure that Resource Foster Parents have plans for emergency medical, dental and psychiatric treatment for children, youth and NMDs. Each Resource Family shall be trained in the procedures to activate such plans prior to receiving a Resource Family Approval Certificate.

15.4.2.2 CONTRACTOR shall ensure children, youth and NMDs receive medical, dental services and sexual and reproductive healthcare services from the provider of their choice, if payment is authorized under Medi-Cal or otherwise available at no cost to the child, youth, NMD, CONTRACTOR or the COUNTY.

15.4.2.3 CONTRACTOR shall ensure youth and NMDs have access and receive sexual and reproductive health services and age-appropriate, medically accurate

information, as requested by the youth or NMD. CONTRACTOR shall also ensure the confidentiality rights of youth and NMDs pertaining to their sexual and reproductive healthcare and their related sexual and reproductive health rights are respected and protected; The youth and NMD has the right to personally consent to such services, which shall be provided confidentially and maintained as confidential between the provider and youth or NMD to the extent required by the Health Insurance Portability and Accountability Act and the California Confidentiality of Medical Information Act (See Exhibit A-1, Reference Links), unless disclosed through written consent of the foster youth or NMD or through a court order. When a youth or NMD has the right to consent, there shall be privacy for examination or treatment by a medical provider, unless the youth or NMD specifically requests otherwise, in accordance to ACLs No. 16-82 and No. 16-88 (See Exhibit A-1, Reference Links). This includes the right to receive sexual and reproductive health services in a timely manner, and from the provider of their choice, if payment is authorized under Medi-Cal or otherwise available at no cost to the youth, NMD, CONTRACTOR or the COUNTY. For further guidance, CONTRACTOR may refer to additional information found at CDSS website regarding resources for caregivers, mentors, social workers and probation officers (See Exhibit A-1, Reference Links).

15.4.3 Reimbursement for Medical, Dental, and Psychiatric Costs

CONTRACTOR shall utilize the Medi-Cal program for all eligible medical, dental, and psychiatric care costs for children, youth and NMDs.

- 15.4.3.1 To the extent reimbursed by Medi-Cal or private insurance or otherwise reimbursed by the COUNTY, the CONTRACTOR shall ensure that each child, youth and NMD receives routine physical and dental exams, any needed medical or dental care, and information and instructions on any ongoing medical or dental treatment or medications needed within a three-month period prior to self-sufficiency.
- 15.4.3.2 If a child, youth and NMD does not have valid proof of Medi-Cal coverage, the CONTRACTOR shall

immediately contact the Foster Care Payment Hotline (800-697-4444) and notify the County Worker.

15.4.3.3 For any services not eligible for Medi-Cal reimbursement and not covered by private insurance, the CONTRACTOR shall, to the extent feasible, obtain medical, dental, or psychiatric care services for the child, youth and NMD through a COUNTY or COUNTY contracted facility. Information for COUNTY or COUNTY contracted providers (See Exhibit A-1, Reference Links).

15.4.3.4 For any non-emergency services not eligible for Medi-Cal reimbursement, not covered by private insurance, and not obtainable at a COUNTY or COUNTY contract facility, the CONTRACTOR must request, by email or facsimile, prior written approval from the County Worker or the County Worker's supervisor. If the County Worker does not respond to CONTRACTOR's written request within three (3) business days, CONTRACTOR shall attempt to contact the County Worker's supervisor. CONTRACTOR shall maintain written documentation of attempts to obtain said written approval.

15.4.4 Administration of Prescription and Non-Prescription Medications

CONTRACTOR shall ensure that Resource Parents record the date and time of all prescription and non-prescription medication administered to the child, youth or NMD in accordance with Title 22, Division 6, Chapter 1, Section 80075 and Chapter 8.8, Subchapter 1, Section 88487.1.

15.4.4.1 CONTRACTOR shall ensure Resource Parents provide all necessary instructions to the person responsible for the care of the child, youth or NMD when the child, youth or NMD is away from the Resource Family Home for visits in order for the child, youth or NMD to remain medication compliant as prescribed by a physician. Resource Parents shall encourage the person responsible for the care of the child, youth or NMD to maintain a record of the date and time of all prescription and non-prescription medication administered to the child, youth or NMD. CONTRACTOR shall ensure the Resource Parents maintain a record of the parties responsible for providing the child, youth or NMD medication when the child, youth or NMD is away from the Resource Family Home during visits.

- 15.4.4.2 In accordance with Title 22, Division 6, Chapter 1, Section 80087(h), medicine shall be stored as specified in Section 80075(j) and (k) and kept as separately from other items specified in Section 80087(g). The items specified in Section 80087(g) shall not be stored in food storage areas or in storage areas used by or for children, youth or NMDs.
- 15.4.4.2.1 CONTRACTORS provide and respect private storage space and personal belongings of the youth and NMDs as it relates to their sexual and reproductive healthcare, including storage of birth control, in accordance with Foster Youth Bill of Rights (see Exhibit A-1, Reference Links) and Title 22, Division 6, Chapter 1, Section 87075(1)(b).
- 15.4.4.3 At the time of a child, youth or NMD's replacement, the CONTRACTOR shall give any medications and court authorizations, including psychotropic medications to the County Worker. If the medications and court authorizations are not available at the time of replacement (outside the current agency), CONTRACTOR shall arrange for the transfer of medication within 24 hours to the child, youth or NMD's new placement. CONTRACTOR shall use Exhibit A-16 to record the type of medication being transferred, the amount of medication, and the receiving party and transferring party's information, which shall minimally include, name, title, address, telephone number, date and signatures.
- 15.4.4.4 CONTRACTOR shall ensure appropriate disposal of discontinued medication by following the standards required by its national accreditation. If the national accreditation agency does not provide specific standards, CONTRACTORS shall follow the recommendations available at the Don't Rush to Flush Website (see Exhibit A-1, Reference Links).
- 15.4.4.5 CONTRACTOR shall ensure appropriate disposal of confiscated controlled substances by first contacting the local law enforcement agency; If the local law enforcement agency refuses to accept, then

CONTRACTOR shall follow the recommendations available at the US Department of Justice, Drug Enforcement Administration, Diversion Control Division, Drug Disposal Information website (see Exhibit A-1, Reference Links).

- 15.4.5 Maintenance of the medical portion of the Health and Education Passport (HEP) or the equivalent.

CONTRACTOR shall file and maintain copies of updated relevant records in the HEP when received from the COUNTY, in accordance with Title 22, Division 6, Chapter 8.8, Sections 88270 and 88270.1 and WIC Section 16010 (See Exhibit A-1, Reference Links).

15.5 Transition to Adulthood Services

CONTRACTOR shall assist and ensure Resource Families provide activities designed to support transition-age youth and NMDs in achieving a successful adulthood as identified in the NSP in collaboration with the CFT as described in Title 22, Division 6, Chapter 8.8, Section 88222.1 (b)(2)(C).

- 15.5.1 For a youth, 16 years of age or older and NMDs, the CONTRACTOR shall initiate family finding and engagement practices upon placement to assist the youth or NMD and the County Worker in identifying biological or non-related family members to support lifelong connections that will help the youth or NMD prepare for transition from foster care to independent living.

15.5.2 The Transition Independent Living Program (TILP)

CONTRACTOR shall participate with the County Worker in the development of a Transitional Independent Living Plan (TILP) for each youth 14 years or older or NMD, and should receive an updated, signed TILP for any youth or NMD every 6 months after the initial TILP is received. CONTRACTOR shall have a copy of the TILP from the County Worker on file. CONTRACTOR and Resource Parents co-operate with the County Worker to implement the youth or NMD's TILP as appropriate.

15.5.3 Cooperation with the COUNTY's Youth Development Services (YDS)

CONTRACTOR shall ensure that Resource Parents facilitate participation by youth ages 16 years and older and NMDs in the COUNTY's YDS.

15.5.4 Participation in the COUNTY's YDS Independent Living Program (ILP)

CONTRACTOR shall assist with and ensure that Resource Parents facilitate participation by youth, ages 16 and older and NMDs in the COUNTY's YDS ILP and Individualized Transitional Skills Program (ITSP), including career and vocational training, work experience, and higher education opportunities.

15.5.4.1 Contractor shall assist and ensure that Resource Parents provide information to youth, ages 16 and older and NMDs about ILP's Teen Club.

15.5.5 Independent Living Skills

CONTRACTOR shall develop an individualized plan for each youth and NMD to learn basic living skills within the context of the family home setting, which shall be incorporated into the NSP and aligned with the TILP. Such skills may include, as age appropriate: (1) learning to plan, shop for, and prepare balanced meals; (2) purchase and care of clothing; (3) basic housekeeping skills; (4) budgeting; (5) use of public transportation as appropriate; (6) personal safety; (7) healthcare and personal hygiene; (8) relationship and communication skills; and (9) landlord and renters' rights and skills for being a good tenant.

15.5.5.1 CONTRACTOR shall assist with and ensure that Resource Parents facilitate participation in COUNTY approved independent living services for self-sufficiency and participate in community based independent living services similar to the COUNTY's Independent Living Program for youth and NMDs unable to participate in the COUNTY'S Independent Living Program or approved services.

15.5.5.2 CONTRACTOR shall assist with and ensure that Resource Parents teach the youth and NMDs how to set short-term and long-term goals and objectives appropriate to the developmental level of the youth or NMD. CONTRACTOR shall assist with and ensure that Resource Parents discuss possible short-term and long-term goals and objectives with the youth and NMDs as they relate to the NSP, career plans, strengths and interests, and educational possibilities. These discussions of life goals are to help prepare the youth or NMD for self-sufficiency and adulthood, and, where the permanency plan is for family reunification, adoption or legal guardianship.

15.5.5.3 CONTRACTOR shall ensure that youth or NMDs are not disciplined by preventing them from attending career and vocational training programs, or working on the job, or college planning activities, such as taking the SAT and ACT or attending a college tour.

15.5.5.4 CONTRACTOR shall facilitate participation with the America's Jobs Centers of California (AJCC's) and the Youth Source Centers (YSC), whenever possible and as appropriate and aligned with the youth and NMD's career and educational goals, to ensure youth, ages 14 and older, and NMDs have access and services to promote educational and career readiness skills.

15.5.5.5 CONTRACTOR shall assist youth ages, 14 and older, and NMDs to obtain a California Identification or Real ID.

15.5.5.6 CONTRACTOR shall assist youth, ages 14 and older, and NMDs to explore resources to acquire information on independent living skills, including but not limited to the following: ILP Online, Opportunity Youth Collaborative and Know Before You Go (See Exhibit A-1, Reference Links).

15.6 Permanency Support Services

CONTRACTOR shall assist with and ensure Resource Parents provide services to achieve permanency, including supporting efforts to reunify or achieve adoption or guardianship and efforts to maintain or establish relationships with parents, siblings, extended family members, tribes, or others important to the child, youth or NMD, as appropriate; and as identified in the NSP, in collaboration with the CFT, in accordance with Title 22, Division 6, Chapter 8.8, Subchapter 1, Sections 88331.4.

15.6.1 Permanency Planning

CONTRACTOR shall assess the strengths, training, skills, and interests of each Resource Family in order to match them, to the extent possible and appropriate, to each child, youth or NMD's:

- Permanency plan for family reunification and relative placement, adoption, legal guardianship, or planned permanent living arrangement.
- Need for sibling group placement, neighborhood and school-based placement, or special healthcare needs placement.

15.6.1.1 Facilitating Legal Permanency Plans

CONTRACTOR, in collaboration with the CFT and the County Worker, shall facilitate the implementation of any permanent placement, such as family reunification, adoption, or legal guardianship, as determined by the COUNTY in collaboration with the CFT for a child, youth or NMD under the CONTRACTOR's care. CONTRACTOR shall ensure that the Resource Family cooperates with the COUNTY in the facilitation of the identified permanency plan.

15.6.1.1.1 CONTRACTOR shall attend all CFT meetings to discuss permanency planning. The County Worker will provide as much advance notice of the meetings as possible.

15.6.1.2 Once a guardianship is finalized or an adoptive placement of a child, youth or NMD in an approved home occurs, COUNTY shall notify CONTRACTOR.

15.6.1.3 Family Finding, Identifying, Developing, and Maintaining Important Relationships.

CONTRACTOR in collaboration with the COUNTY shall initiate family finding and engagement practices upon placement in order to assist the child, youth or NMD in identifying, developing and maintaining important relationships with family, and non-related extended family members, provided that these relationships are in the child, youth or NMD's best interests and are consistent with the COUNTY Case Plan. CONTRACTOR shall assist the County Worker in identifying these individuals as potential permanency resources. CONTRACTOR shall, to the extent possible, partner with existing mentoring programs or develop their own mentoring resources to enable children, youth or NMDs to develop a connection with a caring adult, when important relationships are lacking, in accordance with WIC Section 16001.9(a)(15) and the Foster Youth Bill of Rights (See Exhibit A-1, Reference Links).

15.6.1.3.1 For a youth 16 years of age or older, or NMD the CONTRACTOR shall assist the youth, or NMD and the County Worker in identifying a caring

adult that will help the youth or NMD prepare for transition to self-sufficiency.

15.6.1.4 Teen Parents and their Children

Teen parents and their non-dependent children shall be placed together whenever possible and appropriate. A WFFH supports the Department's efforts to achieve timely permanency for children by providing support and services to teen parent family units in order to strengthen the young family and foster safety and independence.

15.6.2 Family Reunification

If the permanency plan is for family reunification, the CONTRACTOR shall assist the COUNTY in reunification efforts by: (1) placing a child, youth or NMD at an RFA Home in their own neighborhood to the extent possible; (2) facilitating visits and arranging transportation for the child, youth or NMD with the family consistent with the orders of the court and the NSP; (3) offering and/or supporting other reunification services such as family counseling; (4) monitoring the visits with the family consistent with the CFT recommendations, the case plan and court orders. CONTRACTOR shall ensure that the Resource Family cooperates with such reunification efforts and visitation.

15.6.3 Legal Guardianship and Adoption

15.6.3.1 If the child, youth or NMD's permanency plan is for legal guardianship or adoption, the CONTRACTOR shall participate with the County Worker to assess both the strengths and special needs of a child, youth or NMD to assist in determining an appropriate match.

15.6.3.2 CONTRACTOR shall facilitate the child, youth or NMD's involvement in legal guardianship or adoption-related activities and visits with the COUNTY identified proposed prospective family. CONTRACTOR shall provide counseling, support, and education for the child, youth or NMD and the child, youth or NMD's Resource Family in making decisions and transitions related to legal guardianship, adoption or to any other legally permanent placement.

15.6.3.3 The COUNTY shall provide information, and the CONTRACTOR shall be fully informed, about the Adoption

Assistance Program and the differences between legal guardianship, adoption, and foster care.

If the permanency plan is for relative legal guardianship, other legal guardianship, or adoption, the CONTRACTOR shall assist the COUNTY by: 1) facilitating visits and arranging transportation of the child, youth or NMD with the COUNTY identified proposed prospective family consistent with the NSP; 2) offering support services such as family counseling to the child, youth or NMD and the COUNTY identified proposed prospective family; and 3) monitoring visits with the COUNTY identified proposed prospective family as needed.

15.6.4 Post Permanency

CONTRACTOR shall provide transition and post permanency support services for children, youth and NMDs following reunification, guardianship, or adoption to sustain permanency in accordance with Title 22, Division 6, Chapter 8.8, Sections 88278.1 (a)(2)(5) and (b)(1).

15.7 Indian Child, Youth and NMD Services

CONTRACTOR, whenever serving Indian children, youth and NMDs as defined in subdivisions (a) and (b) of WIC Section 224.1, shall provide the core services inclusive to eligible children, youth and NMDs consistent with active efforts pursuant to WIC Section 361.7 and in accordance to the Federal Indian Child Welfare Act (25 U.S.C. Sec. 1901 et seq.) (See Exhibit A-1, Reference Links), its historical significance, the rights of children, youth and NMDs covered by the act, and the best interests of Indian children, youth and NMDs as including culturally appropriate, child, youth and NMD centered practices that respect Native American history, culture, retention of tribal membership, and connection to the tribal community and traditions.

15.7.1 CONTRACTOR shall provide unique services to Indian children, youth and NMDs as identified in the NSP, in close collaboration with the CFT and the DCFS American Indian Unit in collaboration with COUNTY and in accordance with the federal Indian Child Welfare Act (ICWA) (See Exhibit A-1, Reference Links).

15.7.2 CONTRACTOR shall refer to the National Indian Child Welfare Association for further guidance (See Exhibit A-1, Reference Links).

15.8 Reduce Law Enforcement Involvement

CONTRACTOR should engage and collaborate with community-based organizations and local law enforcement agencies to improve outcomes through effective intervention strategies for high-risk children, youth and NMDs. CONTRACTOR shall ensure direct care staff receive annual training and develop intervention strategies to help reduce law enforcement involvement and prevent children, youth and NMDs from entering the juvenile justice system.

15.9 Referrals to Commercial Sexual Exploitation of Children (CSEC) Services

If during placement, the CONTRACTOR identifies that a child, youth or NMD is a victim or at risk of commercial sexual exploitation, the CONTRACTOR shall report the discovery to the CSW to assist in linking the child, youth or NMD to commercial sexual exploitation services. CONTRACTOR shall also request a CFT meeting to discuss and update the NSP.

16.0 RESOURCE FAMILY APPROVAL

CONTRACTOR shall abide by all regulations pertaining to the Resource Family recruitment, application, clearance, approval process, training, monitoring of continuing requirements and provide professional support of Resource Family Homes according to Title 22, Division 6, Chapter 8.8, Subchapter 1, and this SOW, including any future amendments thereto.

16.1 The approval of the resource parent(s) by CONTRACTOR does not create a volunteer, subcontractor, employment, agency, partnership or joint-venture relationship between CONTRACTOR and the Resource Family Parent. CONTRACTOR's role includes, but is not limited to, approving the resource parent(s); making the placement match between COUNTY placing agency and the Resource Family Parent(s); and signing a placement Contract with the Resource Family Parent(s) for each child, youth and NMD in the Resource Family Home. CONTRACTOR shall also provide support services to the Resource Families, the child, youth and NMD and the child, youth and NMD's family in accordance with CONTRACTOR's Plan of Operation and Program Statement (Exhibit A-13), and the child, youth and NMD's Case Plan/Case Plan update.

16.1.1 CONTRACTOR shall ensure that Resource Families reside at legal addresses and do not utilize P.O. Boxes for their mailing addresses.

16.1.2 CONTRACTOR shall ensure that Resource Families have a telephone number with a local area code available in the home at all times in accordance with Title 22, Division 6, Chapter 9.5, Article 2, Section 39373 and Chapter 8.8, Subchapter 1, Section 88487.9.

16.1.3 COUNTY does not have any licensing, approval or certification relationship with CONTRACTOR's Resource Family Home. A FFA

Resource Parent home may not be approved by more than one FFA at any given time.

16.1.3.1 As Resource Family Homes are approved with CONTRACTOR, it is CONTRACTOR's responsibility to submit disapproval for cause notices to COUNTY, in the event of a Hold status. COUNTY shall remove, or cause to be removed, all children, youth and NMD from the Resource Family Home. CONTRACTOR shall not direct Resource Parents to contact COUNTY in the event of an imposed Hold action on a Resource Family Home. Further, as this Foster Care Agreement is with CONTRACTOR, Resource Family Homes, in such event a Hold status is imposed, no COUNTY local agency grievance policies and procedures will occur.

16.1.3.2 Sub-section 16.1.3 above shall not prohibit COUNTY or FFA staff from giving individuals, including approved/licensed foster parents, appropriate information about licensing, approval, legal guardianship and adoption upon request or in compliance with State adoption regulations.

16.1.4 COUNTY shall notify CONTRACTOR of its intent to place children, youth or NMDs in a home of a relative or extended family member in a Resource Family Home.

16.2 Pre-Approval Training

CONTRACTOR shall ensure prospective Resource Families receive pre-approval training as described in Title 22, Division 6, Chapter 8.8, Subchapter 1, Sections 88331.4(a)(1), 88331.6, 88331.7(b)(7) and 88431.3(a).

16.2.1 CONTRACTOR shall train Resource Families to meet the children, youth and NMD's needs and understand the Case Plan goals of: (1) family reunification; (2) adoption; (3) legal guardianship; (4) permanent placement; (5) placement of sibling groups in the same home; (6) teen parents and their children, youth and NMDs; (7) neighborhood and school-based placements; or (8) placement of children, youth and NMDs with special healthcare needs; or (9) self-sufficiency of youth and NMDs. CONTRACTOR shall recruit Resource Families with these objectives in mind.

16.3 Resource Family Approval Assessment Process

CONTRACTOR shall ensure applicants meet all requirements as indicated on Title 22, Division 6, Chapter 8.8, Subchapter 1.

16.3.1 CONTRACTOR shall complete all recruitment, clearances, application process and necessary assessments for the approval of each prospective Resource Family in accordance with all sections found in Title 22, Division 6, Chapter 8.8, Subchapter 1.

16.3.2 CONTRACTOR shall provide OHCMD and PPQA Program Manager's designee a copy of each Resource Family Approval Certificate.

16.3.3 CONTRACTOR shall retain all documents associated to the Resource Family Approval process and made available upon request.

16.4 Child Welfare History Review Prior to Placement

16.4.1 No child, youth or NMD shall be placed with a Resource Family until the FFA has completed the RFA process as indicated in Title 22, Division 6, Chapter 8.8, Subchapter 1, in the Interim Licensing Standards commencing with Section 88330 and the Resource Family Home has obtained a Resource Family Approval Certificate.

16.4.2 CONTRACTOR shall complete a child welfare history review in collaboration with the COUNTY in accordance with HSC 1517(h) (see Exhibit A-1, Reference Links), prior to placement with a newly approved Resource Family. The CONTRACTOR shall complete and submit the Child Welfare History Review Form (Exhibit A-12) to their assigned OHCMD, QA TAS for each prospective RFA applicant, alternative caregiver, other adults residing or regularly present in the household, and any other adult who regularly cares for the child, youth or NMD outside of the Resource Family's home. Child welfare history results are to be used as part of the FFA's Comprehensive Assessment of the prospective resource family and shall not solely be used to deny or approve a Resource Family Home. Upon completion of the process to approve the Resource Family, CONTRACTOR shall upload the certificate of approval to the FCSS.

16.4.2.1 An alternative caregiver means a person who is at least 18 years of age and provides alternative care for a foster child in either their home or the home of the caregiver for more than 24 consecutive hours, but not more than 72 consecutive hours in accordance with WIC 16501.02(a)(2).

16.4.3 The CONTRACTOR shall require the applicant(s) of the Resource Family living in the household to sign a Release of Information form (Exhibit A-12a), which shall be submitted with the Child Welfare

History Review form (Exhibit A-12) to the CONTRACTOR's assigned OHCMD, QA TAS. Based on the information provided to the assigned TAS, the COUNTY shall provide CONTRACTOR with data contained in the statewide child welfare database to help determine whether it is safe and appropriate to approve an applicant to be a resource family and help the CONTRACTOR make a determination on the suitability of the Resource Family's ability to provide care and supervision of children, youth and NMDs requiring out-of-home placement. The CONTRACTOR shall be provided such information for up to two adults within ten (10) business days or within fifteen (15) business days for more than two adults of COUNTY receipt of the Child Welfare History Review Form.

16.4.4 The Child Welfare History Review Form process may change based on any subsequent requirements or guidance provided by CDSS or Federal authorities. COUNTY will notify CONTRACTOR in writing when there are any changes to this process.

16.5 Assessment Prior to the Placement of More Than Two Children, Youth or NMDs in a Resource Family Home.

Prior to more than a total of two (2) children, youth or NMDs being placed in a Resource Family Home, the CONTRACTOR's supervising social worker shall assess the placement to determine that the Resource Family: (1) are providing quality care for the currently placed children, youth or NMDs; and (2) will be able to meet the needs of additional foster children, youth or NMDs.

This assessment shall be included in the NSP or other document in the child, youth or NMD's file; the Resource Family's File and shall be readily accessible to the County Worker and/or audit staff.

16.5.1 CONTRACTOR shall reassess a Resource Family Home with more than two children, youth or NMDs whenever there is a major event in the family (death, divorce, birth of another child, serious illness, etc.) or serious incident (as defined in Exhibit A-5, Special Incident Reporting Guide, Item #5) with the foster children, youth or NMDs that raises concerns about their care and supervision. CONTRACTOR shall retain the reassessments, document any problems, and record how the problems were resolved.

16.5.2 CONTRACTOR shall determine each RFA Home's capacity in accordance to Title 22, Division 6, Chapter 8.8, Subchapter 1, Section 88362.

16.5.2.1 CONTRACTOR shall ensure the RFA home follows Title 22, Division 6, Chapter 8.8, Subchapter 1, Section

88487.1, including provisions regarding bedroom sharing, Documented Alternative Plans (DAPs), and any required modifications necessary to accommodate children, youth and NMDs with developmental, mental, or physical disabilities. CONTRACTOR shall ensure DAPs are established in accordance with Title 22, Division 6, Chapter 8.8, Subchapter 1, Section 88347.

16.6 Monitoring Compliance of Continuing Requirements for Resource Families

CONTRACTOR shall monitor Resource Families to ensure they remain compliant as described in Title 22, Division 6, Chapter 8.8, Subchapter 1, for Specialized Resource Families, when applicable.

16.7 Annual Training Requirements for Resource Families

CONTRACTOR shall ensure Resource Families receive annual training as specified in Title 22, Division 6, Chapter 8.8, Subchapter 1, Section 88372. CONTRACTOR shall ensure Resource Families receive specialized training, as relevant, for the purpose of preparing the Resource Family to meet the needs of a particular child, youth or NMD in care.

CONTRACTOR shall include the following topics as part of their annual training:

- A minimum of 3 hours of College and Career Readiness for Resource Parents caring for children 12 years and older (See training resources at Exhibit A-1-Reference Links)
- Implicit Bias and Cultural Competency
- Sexual and Reproductive Health Wellness in Foster Care training curriculum by the California Social Work Education Center for Resource Parents caring for children, youth and NMDs age 10 and older (see Exhibit A-1 Reference Links)

16.7.1 CONTRACTOR shall ensure Resource Parents caring for children, youth and NMDs attending 6-12 grade receive College and Career Readiness training in accordance with the Turning Dreams Into Degrees in LA County curriculum as referenced in Exhibit A-1 (See training resources at Exhibit A-1-Reference Links). The training shall be tailored to the grade level of each child, youth and NMD in the Resource Parent's care (Grades 6-10 or 11-12). Resource Parents who have completed training for children and youth in grades 6-10 must complete additional training tailored to children, youth and NMDs in grades 11-12 upon the child, youth and NMD's transition to the 11th grade.

16.7.2 The COUNTY reserves the right to designate up to 16 hours of training for approved Resource Families per year as determined by the COUNTY. The 16 hours would be in addition to the standard training requirements. Up to 16 hours may or may not be required by DCFS in any given year. Training curriculum, based on COUNTY identified needs, shall be researched, developed and implemented by the CONTRACTOR as necessary.

16.7.3 CONTRACTOR shall ensure a licensed healthcare professional periodically reviews, corrects, or updates training for Resource Families to administer emergency medical assistance and injections in accordance with HSC 1507.25 (See Exhibit A-1, Reference Links) and Title 22, Division 6, Chapter 8.8, Subchapter 1, Section 88487.16.

16.7.4 CONTRACTOR shall ensure approved Specialized Resource Families receive training as indicated in Title 22, Division 6, Chapter 8.8, Subchapter 1, Sections 88487.16(c); and 88565.1(b), and maintain records of training in accordance to Section 88566(a). Training records shall be made available upon request.

16.7.5 CONTRACTOR shall provide specialized training for any emerging population(s) and or children, youth and NMDs with unique treatment needs.

16.8 Recruitment and Retention of Resource Families

CONTRACTOR shall use positive recruitment strategies of Resource Families by using best practices, while being culturally sensitive toward children, youth, NMDs and families and by using a strength-based approach to recruitment.

Strategies for recruitment and retention can be found at the US Department of Health and Human Services, Administration for Children and Families, Child Welfare Information Gateway and Adopt US Kids (See Exhibit A-1, Reference Links).

16.9 Whole Family Foster Homes (WFFH)

CONTRACTORS who choose to develop Whole Family Foster Homes (WFFH), must have a COUNTY and CCLD approved program providing services to the identified target population of teen parents and their children (teen and baby).

16.9.1 CONTRACTOR must ensure the approved homes are specifically recruited and trained as WFFH.

16.9.2 CONTRACTOR shall ensure that caregivers are trained and approved as a WFFH through a COUNTY approved WFFH curriculum. COUNTY approved WFFH approval training is provided free of charge by the Community Colleges. You may find an online list of Community Colleges at the California Community Colleges Registry (See Exhibit A-1, Reference Links).

16.9.2.1 Upon completion of the training, the caregiver will receive a WFFH approval document to present to CONTRACTOR for placement in the Resource Family's file. Contractor shall submit copy of the WFFH approval to the placing County Worker at the time of placement agreement for a parenting teen and their non-dependent child(ren), for appropriate coding and processing of a WFFH placement.

16.9.3 CONTRACTOR will ensure WFFH Resource Parents complete the required annual WFFH updated approval.

16.9.4 Payment to cover the costs of the care and supervision provided to foster teens and their non-dependent child(ren) placed in a WFFH will be higher than payment for FFA Homes that are not certified as WFFH. The infant supplement rate paid for a non-dependent child placed with the minor dependent parent in a WFFH will be increased to the equivalent of the County's basic AFDC-FC rate for the age of the child. Additionally, the infant supplement payment in a WFFH where the caregiver and the minor dependent parent have developed a Shared Responsibility Plan by using the Shared Responsibility Plan Template (SRP) (Exhibit A-23) (See DCFS Policy for Services for Teen Parents, No. 0100-510.40, Exhibit A-1, Reference Links) in collaboration with the county social worker shall be enhanced by an additional infant supplement payment of \$200. (If placement involves more than one non-dependent child, a SRP must be developed for each child to obtain the additional infant supplement payment for each child). For the development of the SRP, CONTRACTOR may refer to the SRP Instructions (Exhibit A-22).

16.9.4.1 CONTRACTOR shall pass on to the Resource Parent the additional infant supplement payment to care for a nondependent child placed with the minor dependent parent in a certified home, where the certified foster parent and the minor dependent parent have a SRP.

16.10 Transfer of Approved Resource Families (Portability)

CONTRACTOR shall allow portability or resource family homes as defined in Title 22, Division 6, Chapter 8.8, 88301(p)(2) and in accordance with Title 22, Division 6, Chapter 8.8, Sections 88335, 88336 and 88336.1.

- 16.10.1 CONTRACTOR may only use a county approved resource family home in accordance to Title 22, Division 6, Chapter 8.8, Section 88235.
 - 16.10.1.1 COUNTY approved resource families may be approved by the CONTRACTOR in accordance to HSC 1517.5 (b) (See Exhibit A-1, Reference Links).
- 16.10.2 A resource family approved by the CONTRACTOR may transfer their approval to the COUNTY, and CONTRACTOR shall further collaborate with the COUNTY to successfully transfer a resource family in accordance with WIC 16519.58 (See Exhibit A-1, Reference Links).
- 16.10.3 Resource families approved by a CONTRACTOR may transfer to another FFA in accordance to HSC 1517.5 (See Exhibit A-1, Reference Links).
 - 16.10.3.1 CONTRACTOR shall notify the assigned OHCMD, QA TAS and PPQA Monitor of the transfer and further coordinate transition of any placed child, youth or NMD with the assistance of the assigned OHCMD, QA TAS and PPQA Monitor as necessary.

17.0 MONITORING AND OVERSIGHT OF RESOURCE FAMILIES AND OTHERS RESPONSIBLE FOR THE CARE AND SUPERVISION OF CHILDREN, YOUTH AND NON-MINOR DEPENDENTS

CONTRACTOR shall monitor for compliance that Resource Families and others who supervise children, youth and NMDs meet all the requirements and perform all the duties specified in Title 22, Division 6, Chapter 1, Sections 80065(d)(2), 80065(e), and 80065(g) through (m); Chapter 8.8, Subchapter 1, Section 88370; WIC Code, Section 16501.25; and ACL No. 06-04 (See Exhibit A-1, Reference Links).

- 17.1 CONTRACTOR shall document an inspection of each Resource Family Home for compliance no less than once every three months in accordance with Title 22, Division 6, Chapter 8.8, Sections 88331.2, 88347, 88362, 88362.1, 88370, 88487.1, 88487.2, 88487.3, 88487.5, 88487.9, 88487.11, and for Specialized Resource Family Homes, Sections 88510.1, 88510.2 and 88587.1.
- 17.2 Required Visits by Social Work Staff with Children, Youth, NMDs and Resource Families

CONTRACTOR's social work staff shall make weekly face-to-face contacts with the children, youth and NMDs during the first three months of placement. Two of the weekly contacts each month shall occur in the Resource Family Home. CONTRACTOR's social work staff shall make at minimum twice per month, approximately 14 days apart, face-to-face contacts with each child, youth or NMD and Resource Parents after the first three months, all of which shall occur in the Resource Family's Home.

17.2.1 The FFA social workers shall interview the children, youth and NMDs privately during each weekly visit regarding quality of life issues and shall document the results of these interviews.

17.2.2 CONTRACTOR's social work staff shall document each visit with the children, youth and NMDs and the Resource Family and include the following information at minimum: (1) name or initials of the person recording; (2) both the date recorded and the date of the visit; (3) problems reported by the children, youth and NMDs; (4) problems reported by the Resource Family; and (5) how the reported problems are being resolved.

17.2.3 CONTRACTOR shall ensure that the FFA social worker visits with the children, youth and NMDs shall not occur at the CONTRACTOR's offices more than once every three months and documentation of all visits shall be maintained.

17.2.4 Visits made with the Resource Family and the children, youth and NMDs who attend trainings, meetings, or other business-related meetings are not to be considered as a visit with the children, youth, NMDs or Resource Family. Visits that occur prior or after such aforementioned meeting are acceptable as long as all other visitation criteria is met. Such visits shall not occur more than once every three months and documentation of all visits are maintained.

17.2.4.1 An office visit or a visit before or after training, meeting, or other business-related meeting shall not occur within the same three-month period.

17.3 Supervision of Children, Youth and NMDs

CONTRACTOR shall ensure, in accordance with Title 22, Division 6, Chapter 8.8, Subchapter 1, Sections 88487.12, 88487.13, 88487.14, the NSP (as developed and modified by the CFT) and the Child Welfare Case Plan, that Resource Families and caretakers will, to the best of their ability under the Prudent Parent Standard, know where children, youth and NMDs are at all times and are able to identify who is responsible for supervising the children, youth and NMDs at all times. The children, youth or NMDs may leave the

Resource Family Home unaccompanied, if age appropriate, for specific purposes in accordance with the NSP.

- 17.4 Housing, Furniture, Housekeeping, and Home Environment for Health, Safety, Appropriateness, Maintenance, Cleanliness and Storage of Medication.

CONTRACTOR shall monitor Resource Families for compliance in accordance to Title 22, Division 6, Chapter 8.8, Subchapter 1, Sections 88331.2, 88347, 88487.1 through 88487.5, and 88587.1 for approved Specialized Resources Families; Title 22, Division 6, Chapter 1, Sections 80087 and 80088, and Chapter 4, Sections 83087, 83087.1 through 83087.4, and 83088 for Specialized Resource Families.

- 17.5 Tobacco, Alcohol, Drugs and Illegal Substances

CONTRACTOR shall monitor for compliance and ensure that: (1) children, youth and NMDs are not exposed to smoking, second-hand smoke, vaping and marijuana; (2) children, youth and NMDs under twenty-one (21) years of age are not permitted to use any tobacco, vaping, or marijuana products under any circumstances; and (3) children, youth and NMDs are not permitted to drink any alcoholic beverages or use any drugs, narcotics, or illegal substances under any circumstances.

17.5.1 CONTRACTOR shall ensure adults in the Resource Family Home do not smoke tobacco products, marijuana, and vape in any room or enclosed space such as the garage, including when the children, youth and NMDs are not home.

17.5.2 CONTRACTOR shall document the Resource Family's compliance with this section and take necessary corrective action to ensure compliance. "Second-hand smoke" and "Smoking" shall apply as defined in the Business and Professions Code sections 22950.5(c) and (d) (See Exhibit A-1, Reference Links).

- 17.6 Child, Youth and NMD's Allowance, Logs, Security, Use of Allowance, Earnings, and Other Income

CONTRACTOR shall abide by the requirements outlined in Title 22, Division 6, Chapter 1, Sections 80025, 80026 and adhere to their own Plan of Operation and Program Statement.

17.6.1 CONTRACTOR shall monitor for compliance that Resource Families provide each child, youth and NMD a base allowance appropriate to age and reasonably commensurate with peer group standards. The base amount shall not be less than the following amounts: \$7.76 (5-7 years); \$11.00 (8-10 years); \$14.30 (11-13 years); \$16.54 (14-15

years); \$19.81 (16-17 years); and \$27.57 (18-20 years) per week, starting with the first full week of placement. Allowances may be increased beyond the base amount according to CONTRACTOR's Plan of Operation and Program Statement. If a child, youth or NMD is unable to handle money, the CONTRACTOR shall ensure Resource Parents provide the child, youth or NMD with assistance and instruction on how to handle money. Any unspent money must be deposited in the child, youth or NMD's account or held in a secured place until the child, youth or NMD is able to handle their money independently or shall accompany the child, youth or NMD when the child, youth or NMD's placement is terminated.

17.6.1.1 CONTRACTOR shall increase personal allowances each and every time there is an Aid to Families with Dependent Children-Foster Care (AFDC-FC) rate and California Necessities Index (CNI) increase. The AFDC-FC rate and CNI increase percentage must be equally applied to the personal allowance schedule. Personal allowances increases shall be applied and calculated based on any AFDC-FC and CNI increase.

17.6.1.2 CONTRACTOR shall monitor for compliance that the Resource Family maintains a log indicating the date, the amount of weekly monetary allowance the child, youth or NMD receives, and the child, youth or NMD's signature (when age appropriate) acknowledging receipt of the weekly monetary allowance.

17.6.1.3 CONTRACTOR shall ensure Resource Parents do not substitute monetary allowances with non-monetary items such as clothing, food, and other items that the CONTRACTOR is required to provide.

17.6.1.4 The weekly monetary allowances shall not be withheld from the child, youth or NMD by the CONTRACTOR.

17.6.1.5 CONTRACTOR shall work with the Resource Families and the County Worker to mutually agree on a method of securing the child, youth or NMD's income and monitoring the child, youth or NMD's use of funds, including the establishment of a bank account where appropriate. Resource Families shall encourage children and youth, age fourteen (14) and older, and NMDs to save their earnings for transitioning to adulthood or self-sufficiency.

17.6.1.6 CONTRACTOR shall ensure Resource Parents do not require a child, youth or NMD to use their allowance or

earnings to purchase items the Resource Parents or the CONTRACTOR are required to provide. These items include: (1) clothing; (2) personal care and hygiene items; (3) activities; (4) diapers, baby clothes, babysitter, etc., for children placed with a minor parent if the CONTRACTOR receives infant supplement money; (5) school supplies; and (6) snacks and meals.

17.6.1.7 The child, youth or NMD's allowance, earnings, or other income may be applied toward special clothing items, tools, and other personal property above the basic services to be provided by the CONTRACTOR herein. Beyond supervision of spending for appropriateness, age, safety, and health, the CONTRACTOR shall ensure that Resource Families permit the child, youth or NMD to spend their allowance, earnings, and other income in accordance with the NSP and as the child, youth or NMD desires.

17.6.1.8 CONTRACTOR shall prorate the child, youth or NMD's allowance during a child, youth or NMD's runaway period until the placement is terminated, not to exceed seven (7) days in accordance with DCFS Policy No. 0100-570.11 (See Exhibit A-1, Reference Links).

17.6.1.8.1 CONTRACTOR shall deliver any accumulated allowance owed to the child, youth or NMD to the assigned County Worker within 30 days after the child, youth or NMD's placement is terminated.

17.6.2 Monetary Consequences

CONTRACTOR shall ensure that a child, youth or NMD's cash resources are not taken in the form of fines unless the following requirements are met: (1) All fines levied shall be recorded and explained in the child, youth or NMD 's file, including the amount of the fine and the reason for the fine; (2) Such fines shall be maintained in an account separate from the personal or business accounts of the licensee or facility; (3) Records shall be maintained accounting for any interest earned and expenditures from the account. (4) All fines collected shall be used for the benefit of the individual child, youth or NMD or all children, youth and NMDs in placement; and (5) The circumstances under which fines are to be imposed shall be specified in writing.

- 17.6.2.1 Resource Families may apply monetary consequences but not in conflict with the child, youth or NMD's personal rights as indicated in Title 22, Division 6, Chapter 8.8, Subchapter 1, Section 88487.8. Independent Living Program (ILP) incentive money is considered "income" to the child, youth or NMD and shall not be withheld from the child, youth or NMD by the CONTRACTOR or Resource Parents.
- 17.6.2.2 Portions of a child, youth or NMD's allowance may be withheld through a fining system that has been previously approved by the licensing agency's Plan of Operation and Program Statement. Such records shall be made available upon request. When the child, youth or NMD leaves the facility, monies accumulated in the child, youth or NMD's account must be released to the child, youth or NMD as the child, youth or NMD's property.
- 17.6.2.3 For Probation children, youth and NMDs only, Court ordered restitution may be withheld from earnings only if agreed upon by the CFT and documented in the NSP.

17.7 Chores

CONTRACTOR shall ensure Resource Families assign children, youth and NMDs and supervise performance of chores with consideration to child, youth and NMD's age and maturity and as they may apply within the context of a family setting. CONTRACTOR shall ensure Resource Families adequately apply the Reasonable and Prudent Parent Standard, as specified in Title 22, Division 6, Chapter 8.8, Subchapter 1, Section 88487.12, in determining if it is age or developmentally appropriate for a child, youth or NMD to have access to electric appliances, equipment, use of disinfectants and cleaning solutions for use in performing household chores.

17.8 Clothing Allowance, Standards, Inventories, Selection, Personal Belongings and Monitoring

CONTRACTOR shall monitor to verify that Resource Families provide a regular monthly clothing allocation starting not more than 30 days following the date of placement in the amount of at least \$77.30 to be spent on clothing within the same 30-day period. Donated clothing may supplement but not replace the \$77.30.

- 17.8.1 CONTRACTOR shall increase the clothing allowance each and every time there is an Aid to Families with Dependent Children-Foster Care (AFDC-FC) rate and California Necessities Index (CNI) increase. The AFDC-FC rate and CNI increase percentage must

be equally applied to the clothing allowance. The clothing allowance increase shall be applied and calculated based on any AFDC-FC and CNI increases.

- 17.8.2 CONTRACTOR shall work with the Resource Family to ensure that each child, youth and NMD has the amount of clothing listed within the timeframes stated in the DCFS 2281, Sufficient Clothing Supply List (Clothing Standard) (Exhibit A-24), at all times during the child, youth or NMD's placement, including replacement of any lost or stolen clothing in accordance to the DCFS Clothing Standard, including instances when children, youth or NMDs return from runaway status. Replacement of any lost or stolen clothing for children, youth or NMDs who runaway chronically shall be handled on a case by case basis in collaboration with the CFT.
- 17.8.3 CONTRACTOR shall maintain a written inventory of each child, youth or NMD's clothing. CONTRACTOR shall update clothing inventories at least every six (6) months. CONTRACTOR shall maintain for each child, youth or NMD: 1) a written inventory of clothing; and 2) clothing receipts with a description of the item(s) purchased written on each receipt. CONTRACTOR shall update clothing inventories whenever clothing items are added from any source or removed for any reason from the child, youth or NMD's clothing supply.
- 17.8.4 After reaching the Clothing Standard, the child, youth or NMD may decide to carry over any accrued amount of clothing allowance for use in the following months and can be spent on clothing, shoes and accessories. If an expensive item(s) is desired that is not within the child, youth or NMD's clothing allowance budget, the child, youth or NMD may purchase the desired item(s) voluntarily using their own funds. Any amount not spent must be deposited in the child, youth or NMD's account and shall accompany the child, youth or NMD when the child, youth or NMD's placement is terminated.
- 17.8.5 Clothing shall fit according to industry size charts and shall never be too small or more than two sizes larger than actual measurements indicate. The clothing shall also be clean, in good condition, and appropriate for the intended use and season, including the school dress code. CONTRACTOR shall not provide second hand underwear or shoes. CONTRACTOR may use donations of new clothing to meet the DCFS Clothing Standard (Exhibit A-24). The child, youth or NMD shall be involved in the selection of clothing based on the developmental level and gender expression of the child, youth or NMD. The clothing is the property of the child, youth or NMD and shall be retained by the child, youth or NMD or the child, youth or NMD's representative upon termination of placement.

CONTRACTOR shall ensure the Resource Family provides for laundry, dry cleaning, and mending of clothing in accordance with the Plan of Operation and Program Statement.

17.8.6 Special Clothing Needs

CONTRACTOR shall ensure that the Resource Family plans with the child, youth or NMD and arrange for the purchase (as appropriate) of school uniforms, sports clothing, sports equipment, special occasion clothing, work uniforms, appropriate clothing for college, internships and job interviews, and other necessary items for dances, proms, employment interviews and graduation.

17.8.7 Clothing Storage and Security

CONTRACTOR shall ensure that the Resource Family provides in each bedroom portable or permanent closets and drawer space to accommodate the child, youth or NMD's clothing and personal belongings. The COUNTY understands that clothing may disappear and clothing security is not entirely within CONTRACTOR's control. All losses shall be documented as part of the clothing inventory, including a brief description of the circumstances involved. CONTRACTOR shall report two or more instances of clothing loss in a six-month period to the County Worker.

17.8.8 Monthly Clothing Allowance Logs

CONTRACTOR shall maintain logs which includes the date and amount of monthly clothing allowance the child, youth or NMD receives. The log must also include the child, youth or NMD's signature (when age appropriate), acknowledging receipt of the monthly clothing allowance.

17.8.9 Clothing Inventory

Resource Family shall maintain for each child: 1) a written inventory of clothing; and 2) clothing receipts with a description of the item(s) purchased written on each receipt. Resource family shall update clothing inventories whenever clothing items are added from any source or removed for any reason from the child's clothing supply.

17.9 Cell Phones and Other Electronic Devices

The CONTRACTOR must provide for safe use and storage of personal belongings, including cell phones and other electronic devices in accordance to Exhibit A-30, Electronics For Youth In Out-of-Home

Care. Placed children, youth and NMDs have the right to possess personal electronics for the purpose of communication, education and recreation, unless the child, youth or NMD's NSP explicitly prohibits the possession or use of electronic devices. Each child, youth or NMD must be assessed individually as to whether it is appropriate for the child, youth or NMD to use or possess an electronic device. If personal electronics are deemed inappropriate by the CFT, it shall be recorded in the child, youth or NMD's NSP. If an agreed upon resolution cannot be achieved, the CFT will try various strategies to come to a common agreement, including consultation with managerial and administrative staff, if necessary, and the final resolution will be documented in the child, youth or NMD's NSP.

17.9.1 Determining the Appropriateness of Access to Personal Electronics for Children, Youth, and NMDs

The CFT will take into account each child, youth or NMD's personal history, maturity level and risk level to determine the appropriateness of electronic device use, including cell phones. CONTRACTOR shall work with resource parents to afford a certain amount of trust to children, youth and NMDs for whom the use or possession of personal electronic devices is deemed appropriate, while simultaneously following the Reasonable and Prudent Parent Standard. Prudent parenting may include, but is not limited to, provision of education regarding social media safety and responsibility, supervision of electronic device use and rules of possession regarding electronic devices for both resource parents and child, youth or NMD. The right to use or possess personal electronic devices may be temporarily revoked on a case by case basis in order to ensure the safety and well-being of the child, youth or NMD, in accordance with Title 22, Division 6, Chapter 8.8, Section 88487.8 (b)(3)(A) and (d)(1)(A). If the CFT deems it inappropriate for the child, youth or NMD to use or possess personal electronic devices, their reasons shall be documented in the NSP. The CONTRACTOR should have a protocol or plan in place for circumstances when a child, youth or NMD is uncooperative and refuses to turn over the electronic device.

17.9.1.1 If an incident escalates as a result of the continued use of the electronic device, placing the child, youth, NMD or others in the facility at imminent safety risk, the CONTRACTOR shall follow their emergency communication protocols, in accordance with Title 22, Division 6, Chapter 8.8, Sections 88223(c)(5).

17.9.2 Cell Phones

The CONTRACTOR is not required to pay for the child, youth or NMD's cell phone service, and may impose reasonable time limits and other rules for cell phone use. The CONTRACTOR may not, however, prohibit a child, youth or NMD from possessing or using cell phones unless prohibited by the County Worker in collaboration with the CFT and as documented in the child, youth or NMD's NSP. The CONTRACTOR shall document in the NSP any restrictions that would create a serious risk of harm to the child, youth or NMD and other persons. CONTRACTOR may and should apply the Reasonable and Prudent Parent Standard to cell phone access and usage.

17.9.3 Access to Computers (desktop or laptop)

It is the right of each child, youth and NMD to have access to education and social resources in accordance with Title 22, Division 6, Chapter 8.8, Section 88487.14 (c)(9) and (10). CONTRACTOR must have a working computer with internet access on-site. In accordance with the Reasonable and Prudent Parent Standard, all children, youth and NMDs must have access to the on-site computer within reasonable timeframes, and the CONTRACTOR shall reasonably monitor the internet activity of all children, youth and NMDs. All internet settings must have appropriate parental controls and filters.

17.10 Hygiene and Personal Care Items

CONTRACTOR shall ensure that Resource Families: (1) supply each child, youth or NMD initially and replace as needed, with new personal hygiene and personal care items. These shall include the child, youth or NMD's own toothbrush, toothpaste, comb and other hair-care items, shampoo, soap, deodorant, sanitary napkins, etc.; (2) offer choice among brands as long as the cost is reasonable; (3) give consideration to specific cultural and ethnic needs; (4) provide specific brands necessary for health reasons; and (5) monitor the use of all products in aerosol or glass containers to ensure safe use.

17.10.1 CONTRACTOR shall ensure that Resource Parents provide children, youth and NMDs age-appropriate instructions in proper grooming and personal hygiene.

17.10.2 CONTRACTOR shall ensure that personal care and hygiene items and appropriate grooming, including hair care, shall be provided and individualized according to the child, youth or NMD's culture, sex, sexual orientation, gender identity and expression, and ethnicity. CONTRACTOR shall satisfy this requirement in accordance to

section 17.10, which may include taking the child, youth or NMD to the salon, barber, purchasing special hair care products, etc.

17.11 Supply, Cleanliness, and Condition of Linens, Blankets, Window Treatments, etc.

CONTRACTOR shall ensure that Resource Families: (1) supply clean face cloths, towels, and sheets; (2) provide clean and serviceable blankets and bedspreads; and (3) replace worn, torn or frayed face cloths, towels, sheets, blankets, bedspreads, and window treatment(s) as needed.

17.12 Life Book and Photo Album

CONTRACTOR shall ensure Resource Families encourage and assist each child, youth and NMD in creating and updating a life book and photo album (may be a digitally stored album) of items that relate to childhood memories. If the child, youth or NMD has not taken the life book with them, the CONTRACTOR shall provide the child, youth or NMD's life book either to the County Worker at the time the child, youth or NMD departs from CONTRACTOR's care or, when the County Worker is not present, to the duty County Worker within three (3) business days of the time of the child, youth or NMD's departure.

17.13 Transportation Services

No child, youth or NMD shall miss going to school, court, therapeutic or medical appointments because the CONTRACTOR does not provide or arrange transportation.

17.13.1 CONTRACTOR shall provide or arrange transportation for children, youth and NMDs to participate in activities as agreed with the COUNTY in collaboration with the CFT and as identified in the NSP and Shared Living Agreement, when applicable. These activities may include school, school-based sports, college tours, financial aid workshops, PSAT, SAT or ACT exams, band, performing arts, clubs, ILP activities, teen clubs, place of child, youth or NMD's employment, adoption-related events, visits with the family, relatives and prospective adoptive families, job training, cultural, extra-curricular and recreational activities, therapy, medical and dental appointments including sexual and reproductive healthcare and education, religious service of the child, youth or NMD's preference, sibling visits, etc. This can include teaching the child, youth or NMD to take public transportation, and arranging transportation with other care providers or outreach advisors, ILP coordinators, County Workers, etc.

- 17.13.1.1 CONTRACTOR shall additionally provide transportation, to include transportation costs when applicable, as indicated in Exhibit A-13, CONTRACTOR's Plan of Operation and Program Statement.
- 17.13.1.2 For Probation children, youth and NMDs, the CONTRACTOR shall make the necessary arrangements for transporting children, youth and NMDs to and from court hearings.
- 17.13.1.3 When transporting youth and NMDs for sexual or reproductive healthcare and education in accordance to Section 15.3.10.2 of this SOW, CONTRACTOR shall respect the youth and NMD's right to not disclose specifics regarding the appointments and their right to receive sexual and reproductive health services in a timely manner, from the provider of their choice, if payment is authorized under Medi-Cal or otherwise available at no cost to the youth, NMD, the CONTRACTOR or the COUNTY.

17.13.2 Driver Licenses, Vehicle Safety, and Vehicle Equipment

CONTRACTOR shall monitor and maintain the necessary records to meet the transportation requirements of Title 22, Division 6, Chapter 1, Section 80074; Chapter 8.8, Subchapter 1, Section 88487.10; and VEH Code Sections 27360 and 27360.5.

- 17.13.2.1 CONTRACTOR shall monitor and maintain records to verify that FFA Social Workers, Volunteers, Resource Families or any designated driver(s) who transport children, youth and NMDs: (1) have and maintain a valid California driver's license with the California Department of Motor Vehicles; and (2) insure their vehicles, if used to transport the children, youth and NMDs, at or above the minimum bodily injury and property damage limits required by the State of California. Such records shall be made available upon request.
- 17.13.2.2 CONTRACTOR shall maintain non-owned auto liability coverage for their social workers and other staff that use their vehicles to transport children, youth and NMDs in accordance with the Contract, Part I, Section 5.0 General Insurance Requirements, and Section 6.0 Insurance Coverage Requirements.

18.0 PLACEMENT PROCESS (INTAKE AND DISCHARGE)

CONTRACTOR shall comply with the intake requirements of Title 22, Division 6, Chapter 8.8, Sections 88068.1, 88268.1 and 88268.11.

- 18.1 Whenever possible the CONTRACTOR shall participate in the CFT for the initial and any subsequent placement transition to help determine the most appropriate placement for the child, youth or NMD.
- 18.2 CONTRACTOR shall ensure non-discrimination on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, tribal affiliation, color, religion, sex, sexual orientation, gender identity, mental or physical disability or HIV status.
- 18.3 Acceptance of All Children, Youth and NMDs Who Meet CONTRACTOR's Plan of Operation and Program Statement Criteria

CONTRACTOR shall accept all children, youth and NMDs who meet the CONTRACTOR's Plan of Operation and Program Statement criteria, shares common needs with the current population, and when an appropriate vacancy is available. The CONTRACTOR's social work staff shall assess the FFA's ability to: (1) provide the required services to meet the child, youth and NMD's needs in the child, youth and NMD's own neighborhood as appropriate based upon the information received from the CFT and as identified in the child, youth and NMD's NSP; and (2) facilitate family participation in treatment as appropriate based upon the information received from the CFT and as identified in the child, youth and NMD's NSP.

18.4 Pre-Placement Visits

The County Worker shall arrange a visit to the proposed CONTRACTOR's Resource Family prior to the children, youth and NMDs' placement whenever possible. The County Worker shall: (1) provide information to the CONTRACTOR regarding the children, youth and NMDs' needs, including all court reports and social studies, in conformity with COUNTY policy and confidentiality laws; (2) discuss the plan for the children, youth and NMDs' to stay in the same neighborhood and school district, including the transportation arrangement to the children, youth and NMDs' home school(s); and (3) provide the Resource Parents information of any known or suspected dangerous behavior of the child, youth and NMD being placed.

18.4.1 CONTRACTOR shall: (1) discuss with the County Worker the children, youth and NMD currently living in the proposed Resource Family Home, including children, youth and NMDs' ages, backgrounds, and placing agencies; (2) discuss with both the County Worker and the children, youth and NMDs to be placed, when age appropriate, the school programs, social work services, and family

and recreational activities that are available; (3) discuss the type of services the child, youth and NMD requires; (4) provide the County Worker information concerning the proposed Resource Family's work schedules and outside commitments and day care plan for the child, youth and NMD (if appropriate); and (5) provide the County Worker information relating to any child, youth or NMD abuse and/neglect referrals and allegations which have been made concerning the proposed Resource Family Home, and describe action the CONTRACTOR has taken in response to such referrals and allegations.

18.5 Sibling-Group Placements

Children, youth and NMDs who are accepted as a sibling group and placed together, shall remain together unless otherwise indicated by the CFT. For sibling groups placed in different Resource Family Homes within the same FFA, in collaboration with the CFT and County Worker, the CONTRACTOR shall document efforts to reunite siblings into one Resource Family Home, or the reasons it is inappropriate, in the children, youth or NMD's case records.

18.6 Commingling of Children, Youth and NMDs

CONTRACTOR may place both DCFS, Probation and dual jurisdiction children, youth and NMDs (WIC 300, 601 or 602 status) in the same Resource Family Home once the assigned County Worker(s) from both departments, in collaboration with the CONTRACTOR, provided that the identified Resource Family can meet the specific needs of the child, youth or NMD and there is a commonality of needs with the other placed children, youth and NMDs in accordance with WIC 16514(c) and CDSS All County Information Notice (ACIN) No. I-75-16 (see Exhibit A-1, Reference Links). CONTRACTOR must consider the safety and needs of the children, youth and NMDs in the Resource Family Home and the public safety of the community.

18.7 Requirement for Intake

All CONTRACTORS with 30 (thirty) or more approved Resource Family Homes shall provide non-emergent intake services from 8:00 a.m. to 8:00 p.m. daily, including weekends and holidays.

18.7.1 CONTRACTORS with less than 30 (thirty) approved Resource Family Homes shall provide non-emergent intake services Monday through Friday from 8:00 a.m. to 8:00 p.m.

18.8 Health and Education Passport (HEP) or Equivalent

If the CONTRACTOR does not receive the HEP within thirty (30) days of initial placement or within forty-eight (48) hours of a replacement, the CONTRACTOR shall initiate the HEP as described in WIC Sections 10601 (See Exhibit A-1, Reference Links) and immediately report lack of receipt of the HEP to the DCFS Regional Administrator and PAS Supervisor via e-mail. If the Probation HEP is not provided at the time of placement, the CONTRACTOR shall follow the same procedure as for DCFS, but the CONTRACTOR shall notify the PAS OD.

18.8.1 CONTRACTOR shall not be held responsible in an audit for failure to have documents that were in existence at the time of placement but were not provided to the CONTRACTOR by the COUNTY.

18.8.2 CONTRACTOR shall provide the updated HEP information to the COUNTY Worker at the time a child, youth or NMD departs from the CONTRACTOR'S program. If the COUNTY Worker is not present at the time of child, youth or NMD's departure, the CONTRACTOR shall provide the HEP information within forty-eight (48) hours to: 1) the COUNTY Worker or the COUNTY Worker's office for DCFS; or 2) PAS Supervisor or Designee for Probation. CONTRACTOR shall update and be responsible for the HEP information only during the course of the placement.

18.9 Denial of Placement of Children, Youth and NMDs Who Do Not Meet the License or Program Statement Criteria

CONTRACTOR is responsible for denying placement of children, youth and NMDs within the limitations of the information provided at the time of placement, who do not meet the license or the Plan of Operation and Program Statement criteria for the FFA. If the CONTRACTOR determines that a referred child, youth or NMD does not meet the criteria, the CONTRACTOR shall immediately notify the County Worker and the assigned OHCMD, QA TAS and the PAS Supervisor and provide an explanation in writing via email within two days.

18.9.1 CONTRACTOR shall not accept children, youth or NMDs with special healthcare needs, within the limitations of the information provided at the time of placement, unless an appropriate placement is available in a specialized Resource Family Home as specified in Title 22, Division 6, Chapter 8.8, Subchapter 1. Special healthcare needs include, but is not limited to medical conditions requiring specialized in-home healthcare. Special healthcare needs include medical technology dependence and other medical conditions that could deteriorate rapidly, causing permanent injury or death, as defined in WIC 17710(a).

18.10 Declaration in Support of Access to Juvenile Records Form

CONTRACTOR shall complete and submit the LAJUV010, Declaration In Support of Access to Juvenile Records Form (Exhibit A-25) in accordance to DCFS Policy 0500-501.20 (See Exhibit A-1, Reference Links), in order for the County Worker to release any juvenile records. CONTRACTOR will ensure that only persons permitted by law have access to records.

18.11 Orientation of Newly Placed Children, Youth and NMDs

CONTRACTOR shall provide each newly placed child, youth or NMD in an age-appropriate manner, a comprehensive overview of the CONTRACTOR's program and procedures as described in the CONTRACTOR's Plan of Operation and Program Statement (Exhibit A-13), Personal Rights in accordance with Title 22, Division 6, Chapter 8.8, Section 88268.1(c)(4)(C and D), and the Foster Youth Bill of Rights (see Exhibit A-1, Reference Links). Such overview shall also include: (1) opportunities for achievement; (2) career, vocational and job training; (3) life-skills training; (4) recreation; (5) religious, spiritual, or ethical development in the faith of the child, youth or NMDs' choice or the child, youth or NMDs' parents' choice; (6) identification of the child, youth or NMD's FFA social worker; (7) child, youth and NMD's clothing and weekly allowance; (8) Resource Family's house rules including discipline practices and grievance and complaint procedures; (9) school attendance requirements including school dress code and academic expectations; (10) discharge procedures and (11) For children, youth and NMDs in the 8th grade or above CONTRACTOR shall provide access to existing information regarding the available educational options, including, but not limited to, the coursework necessary for vocational and postsecondary educational programs, and relevant information regarding financial aid for postsecondary education.

18.11.1 CONTRACTOR must clearly articulate its personal electronics policy to newly placed children, youth and NMDs during the orientation process. The policy shall be reviewed and signed by the child, youth or NMD and the parent or legal guardian, if involved in the case plan, and a copy shall be provided to them. The policy shall address how resource parents apply the Reasonable and Prudent Parent Standard, which may include viewing texts and pictures. Furthermore, children, youth and NMDs shall be notified that their conduct may impact their right to use or possess personal electronic devices and that right may be revoked on a case-by-case basis.

18.11.2 CONTRACTOR shall have the child, youth or NMD, or the child, youth or NMD's authorized representative sign an acknowledgement of completion of the orientation and the receipt of written copies of the child, youth and NMD's personal rights, as

indicated in sections 18.11 and 18.11.1, including but not limited to house rules, discipline practices, personal electronic devices and cell phones, grievance and complaint procedures, and discharge procedures.

18.11.2.1 CONTRACTOR shall review and discuss in an age appropriate manner the child, youth and NMD's personal rights, house rules, discipline practices, personal electronic devices and cell phones, grievance and complaint procedures, vocational and postsecondary educational program information, and discharge procedures in six (6) months from initial placement and every six months thereafter to ensure the child, youth or NMD understands. CONTRACTOR shall have the child, youth or NMD, or the child, youth or NMDs' authorized representative signs an acknowledgement after completion of each review. CONTRACTOR shall retain copies of the acknowledgement in the child, youth or NMD's records file, which shall be made available to COUNTY upon request.

18.12 Readmission of a Child, Youth or NMD After Discharge from a Medical or Psychiatric Hospitalization

CONTRACTOR shall readmit any child, youth or NMD after discharge from a medical or psychiatric hospitalization. Exceptions to this rule are if: (1) the CONTRACTOR in consultation with the CFT mutually agree that the child, youth or NMD's readmission jeopardizes the health and safety of that child, youth or NMD, or others in the facility; or (2) a mutual treatment decision is reached with the CFT not to return the child, youth or NMD to the facility. CONTRACTOR shall immediately notify the child, youth or NMDs' County Worker of the decision not to readmit.

18.12.1 CONTRACTOR shall participate in CFT meetings for children, youth and NMDs in a psychiatric hospital when requested by COUNTY.

18.12.2 CONTRACTOR shall collaborate with the County Worker to discuss if a bed hold is necessary to determine if the child, youth or NMD should return to the facility. The bed hold shall not exceed seven (7) days.

18.13 Movement of Children, Youth and NMD, Removal and Intent to Discharge Procedures and Notification Requirements

CONTRACTOR shall develop a placement preservation strategy in collaboration with the assigned County Worker and the CFT and document any interventions and remedies in accordance with ACL19-26 and WIC 16010.7 (See Exhibit A-1, Reference Links), including consideration of a move within the CONTRACTOR's placement facilities, if available, prior to making a placement change.

Before CONTRACTOR removes a child, youth or NMD who has been adjudged to be a dependent of the Juvenile Court from a Resource Family home and places the child, youth or NMD into another placement under CONTRACTOR's CDSS license, CONTRACTOR shall provide the current Resource Family Parent 14-day prior notice as required by Welfare and Institutions Code section 16010.7. If the child, youth or NMD has not yet been adjudged a dependent of the Juvenile Court, CONTRACTOR shall provide the current Resource Family Parent 7-day prior notice before replacing the child, youth or NMD into another placement under CONTRACTOR's CDSS license. CONTRACTOR is not required to provide prior notice to the caregiver when the removal of the child, youth or NMD is at the request of the caregiver.

This requirement does not apply to Emergency Replacements as indicated in Section 18.13.3 of this SOW, or for planned placement changes as informed by the child, youth or NMD's CFT and as described in the child, youth or NMD's NSP. This requirement may also be waived by unanimous agreement (full agreement by everyone involved) by the child, youth or NMD's CFT and the child, youth or NMD (if 10 years or older); or the child, youth and NMD's CFT and the child, youth and NMD's attorney (if the child is under age 10).

18.13.1 COUNTY and CONTRACTOR mutually agree that the lack of stability in placement is harmful to children, youth and NMDs, and that the goal of this section is to maximize communication to lead to increased stability for children, youth and NMDs. All reasonable efforts shall be made to stabilize a child, youth or NMD's placement and to determine through the CFT process whether additional services may prevent an unnecessary and traumatizing replacement of a child, youth or NMD from the CONTRACTOR's Resource Family Home. Any transition or discharge shall additionally be conducted in accordance with Title 22, Division 6, Section 88268.4.

18.13.2 Prior to discharging a child, youth or NMD, CONTRACTOR must notify the COUNTY of issues potentially affecting the stability of a child, youth or NMD's continued placement in CONTRACTOR's Program, COUNTY and CONTRACTOR shall convene a CFT meeting to determine whether the child, youth or NMD's placement may be stabilized and additional services may be provided without removing the child, youth or NMD from the CONTRACTOR's Program. CONTRACTOR shall provide the DCFS Regional Administrator and PCW Director, the County Worker, and the

County Worker's Supervisor, in accordance with Title 22, Division 6, Chapter 8.8, Section 88268.4(d), a Notice of Intent to Discharge that documents efforts to stabilize the placement, including police calls and mental health services, in advance of any anticipated replacement. The Notice of Intent to Discharge may be provided by way of e-mail.

18.13.2.1 For Probation youth and NMDs the CONTRACTOR shall provide e-mail notification to the PAS Exit Notification e-mail once the youth and NMDs has been discharged.

18.13.2.2 In instances where RFA parents receive a Notice of Intent to Terminate Placement (Form DCFS 489-3) from the child, youth or NMD's assigned County Worker, the CONTRACTOR shall assist the RFA parent(s) in completing a DCFS 4161 Grievance Review Hearing Request (Exhibit A-26, also available in Spanish, Exhibit A-27) as necessary, if applicable, in accordance with DCFS Policy No. 0100-502.52 (See Exhibit A-1, Reference Links).

18.13.2.3 Placement changes must not be made between the hours of 9:00 pm and 7:00 am, unless mutual agreement is reached at minimum by the CONTRACTOR, the child, youth or NMD's representative, the child, youth or NMD's current caregiver, the prospective caregiver, the child, youth or NMD's social worker, and the child, youth or NMD (only if the child is 10 years or older) or the child, youth or NMD's attorney (if the child is under age 10). This requirement does not apply to Emergency Replacements as indicated below in Section 18.13.3, or for planned placement changes as informed by the child, youth or NMD's CFT and as described in the child, youth or NMD's NSP.

18.13.3 Procedure for Emergency Replacement:

In the event of an emergency, the CONTRACTOR may move a child, youth or NMD without prior authorization from the County Worker and conduct a CFT no later than 72 hours. The FFA shall make every effort to keep the child, youth or NMD in the same school, if in the best interest of the child, youth or NMD as determined by the child, youth or NMD's education rights holder. For the purposes of this paragraph, an

emergency is defined as any situation that threatens the health and safety of the child, youth and NMD or others in the Resource Family Home.

- 18.13.3.1 CONTRACTOR shall notify either the child, youth or NMD's County Worker, the County Worker's supervisor, or the County Worker's administrator. For DCFS children, youth and NMDs, if after working hours, CONTRACTOR shall call the Child Protection Hotline (800-540-4000), of the emergency replacement. For Probation, the CONTRACTOR shall call PCW Director as instructed in Exhibit A-5 and send notice to the PAS Exit Notification e-mail. Notification shall be made as soon as possible but no later than 24 hours after the child, youth or NMD is moved. CONTRACTOR shall then discuss the situation with the County Worker or the County Worker's supervisor and document the conversation and decision in the child, youth or NMD's record.
- 18.13.3.2 CONTRACTOR shall inform the CFT immediately or not later than 72 hours after emergency replacement.
- 18.13.3.3 A child, youth or NMD shall not be moved from an approved Resource Family home to a non-approved Resource Family home. This includes changing a Resource Family home from a contracted site to a non-contracted site.

18.14 Collection and Storage of Personal Belongings at Termination of Placement

When the child, youth or NMD is discharged, the CONTRACTOR shall ensure that the child, youth or NMD's clothing accompanies the child, youth or NMD to the next placement. The child, youth or NMD's clothing and personal belongings shall be neatly packed in adequate luggage or duffel bags that are in good or fair condition. Under no condition should the child, youth or NMD's belongings be placed in anything less than a suitcase or duffel bag. CONTRACTOR shall ensure that the Resource Family does not pack the child, youth or NMD's clothing and personal belongings in trash bags. If the child, youth or NMD runs away, the CONTRACTOR shall ensure that the Resource Family collect and secure the child, youth or NMD's personal belongings and notify the County Worker. Once the CONTRACTOR has determined that the child, youth or NMD is not returning to placement, the CONTRACTOR must inform the County Worker, no later than seven (7) days after the child, youth or NMD runs away, the child, youth or NMD's personal belongings are at the resource home and will be stored for up to 10 calendar days. If the County Worker does not

collect the belongings, after 10 days, the CONTRACTOR shall contact and inform the County Worker that the personal belongings will be mailed to the COUNTY at the COUNTY'S expense unless an alternate plan is agreed upon.

18.14.1 For the Probation child, youth or NMD, CONTRACTOR shall hold clothing and personal belongings for up to thirty (30) days and make diligent efforts to contact parents or guardians to pick them up.

18.15 CONTRACTOR shall prepare and submit a Discharge Summary (Exhibit A-10) to a child, youth or NMD's County Worker within 30 Days from the date the child, youth or NMD's placement was terminated. The Discharge Summary shall include, but not be limited to, a closing summary of CONTRACTOR's records relating to the child, youth or NMD, including the type of placement to which the child, youth or NMD was discharged (such as reunification with parent(s), relative, adoptive home, legal guardianship, licensed foster home, FFA approved home, small family home, a STRTP, specified or specialized placement or hospital). A copy of Exhibit A-10 shall be retained in the child, youth or NMD's records file and made available to COUNTY upon request.

19.0 NEEDS AND SERVICES PLAN (NSP)

CONTRACTOR shall ensure that NSPs are completed in accordance to Title 22, Division 6, Chapter 8.8, Sections 88268.2, and 88268.21.

19.1 Required Use of the Provider Needs and Services Plan Template

CONTRACTOR shall use the Provider Needs and Services Plan (NSP) template (Exhibit A-11), and in accordance with Title 22, Division 6, Chapter 8.8, Sections 88268.2, and 88268.21.

19.1.1 The DCFS 709 form, Foster Child's Needs and Case Plan Summary (Exhibit A-28) and the PCW 1385, Foster Care Case Plan (Exhibit A-29), are to be used in the development of the NSP, but are not to serve as the sole case plan.

19.1.2 The CONTRACTOR's social worker shall prepare and submit a signed, comprehensive individualized NSP, based on the information received through the CFT, the County Worker, and CONTRACTOR'S initial assessment, by the 30th day of placement. The CONTRACTOR's social worker shall develop a comprehensive, individualized NSP, based upon the information provided by the County Worker, CFT, the CONTRACTOR's initial assessment and

collect all required signatures by the 30th day of placement. The CONTRACTOR shall ensure service goals identified in the CFT safety plan are promptly incorporated in the NSP and implemented according to the CFT safety plan timeframes to ensure CONTRACTOR is meeting the child, youth or NMD's needs.

19.1.2.1 Document current status of child, youth or NMD's physical and psychological health [Include the date of each medical and dental appointment, diagnosis, recommended treatment, follow-up, and medication the child, youth or NMD received during the quarter. Include health and safety related Services provided to the child, youth or NMD, specifying the dates of service(s) for each occurrence.];

19.1.2.2 Document any reassessment of the child, youth or NMD's adjustment to the Resource Family Home, program, peers, school, and staff [Include copy of the school report card(s), school attendance, and IEP when applicable. Specify the type of school (i.e., public, private, non-public, on-grounds, community-based, etc.) and educational program provided.];

19.1.2.3 Document progress toward short-term objectives and long-range goals including tasks that have been performed to reach these objectives and goals [Include the status of the permanency plan and, when applicable, the Transitional Independent Living Plan (TILP) including homemaking skills, status of vocational training and ~~or~~ job experience, artistic abilities, etc. Include the most recent copy of the updated TILP for each youth, age 14 years and older, and NMDs.];

19.1.2.4 Document any reassessment of unmet needs and efforts made to meet these needs;

19.1.2.5 Document any modifications of treatment plan, tasks to be performed and the likelihood of family reunification; and

19.1.2.6 Document any Involvement of the child, youth or NMD and their parent in treatment program [Include dates and type of contact with the County Worker during the quarter, including telephone calls].

19.1.3 All required signatures, which shall at minimum include, the CONTRACTOR's social worker, the child, youth or NMD (when age and developmentally appropriate), the child, youth or NMD's assigned County Worker, and the Resource Parents shall be obtained for all

initial NSPs. The CONTRACTOR shall make at least two attempts to contact the County Worker to obtain the required signatures on the NSP. If after the first attempts the CONTRACTOR is not able to obtain the required signatures, the CONTRACTOR shall email the designated Regional Office NSP in-box or contact the PCW Supervisor or Director for assistance. In the event CONTRACTOR is unable to meet this requirement, CONTRACTOR shall provide documentation of all efforts and reasons for their inability to meet this requirement and attach to the NSP. Exceptions to this requirement may be granted only in cases where the CONTRACTOR is not responsible for the delay. This procedure shall only be followed until the NSP electronic system is in place.

19.1.3.1 The initial NSP with all required signatures shall be submitted by the CONTRACTOR's staff to the County Worker within five (5) days of completion.

19.1.3.2 The NSP shall be updated and modified every ninety (90) days thereafter. The updated and modified NSP with all required signatures shall be submitted by the CONTRACTOR's staff to the County Worker within five (5) days of completion. The CONTRACTOR shall also ensure service goals identified in the CFT safety plan(s) are promptly incorporated in the NSP and implemented according to the CFT safety plan(s) timeframes to ensure CONTRACTOR is meeting the child, youth or NMD's needs.

19.1.4 Updates and modifications to the NSP shall address: (1) the child, youth or NMD's need for continuing services; (2) the need for (any) modification in services; and (3) the recommendation of the FFA staff regarding the feasibility of the child, youth or NMD's return to their home, placement in another facility, or move to independent living.

19.1.4.1 All required signatures, which shall at minimum include, the CONTRACTOR's social worker, the child, youth or NMD (when age and developmentally appropriate), the child, youth or NMD's assigned County Worker, and the Resource Parents shall be obtained for all updated and modified NSPs. In the event CONTRACTOR is unable to meet this requirement, CONTRACTOR shall provide documentation of all efforts and reasons for their inability to meet this requirement and attach to the NSP. Exceptions to this requirement may be granted only in cases where the CONTRACTOR is not responsible for the delay.

19.1.4.2 The completed updated and modified NSPs shall be submitted by the CONTRACTOR's staff to the placement worker by the 95th day of continuing placement, and every 95 days thereafter.

19.1.5 The child, youth and NMD's case file shall include complete documentation of all attempts to comply with the above (dates, times, methods, attempts, escalation and results). e.g., email, FAX, US Postal Service - times attempted (separate times).

19.2 Participation by the Child, Youth, NMD, County Worker, Resource Family, and CFT

CONTRACTOR shall ensure that: (1) the child, youth and NMD, age and maturity permitting, the County Worker, and the Resource Family are offered the opportunity to participate in the development of NSP through the CFT; (2) the County Worker gives written approval of the NSP and any modifications thereto; (3) the child, youth and NMD, age and maturity permitting, the County Worker and the Resource Family receive copies of the approved NSP and any modifications thereto.

19.3 Shared Responsibility Plan (SRP)

The development of the SRP applies to those CONTRACTORS who have elected to have FFA Homes trained and approved as Whole Family Foster Homes (WFFH).

19.3.1 WFFH Resource Parents and the teen parent have the option to develop a SRP. CONTRACTOR shall refer to the instructions for developing an SRP (Exhibit A-22) when developing and SRP by using the SRP Template (Exhibit A-23). The SRP is an agreement between the caregiver and the dependent teen parent which (a) outlines the duties, rights and responsibilities of the teen parent and the caregiver with regard to the teen parent's non-dependent child; (b) identifies supportive services to be offered to the teen parent by the caregiver and the agency providing direct and immediate supervision to the caregiver, or both; and (c) shall be written for the express purpose of aiding the teen parent and the caregiver to reach agreements aimed at reducing conflict and misunderstandings. The SRP shall in no way limit the teen parent's legal right to make decisions regarding the care, custody, and control of their dependent child.

19.3.2 The CONTRACTOR's social worker shall develop the SRP (Exhibit A-23) within 30 days of placement of the teen parent and their dependent children or the birth of the pregnant teen's child. The SRP

shall be developed between the teen parent, caregiver, and CONTRACTOR's social worker in collaboration with the County Worker. Additional input may be provided through the CFT, which may include any individuals identified by the teen parent, the non-custodial parent, if appropriate, and other extended family members.

19.3.3 The SRP shall include, but not be limited to, all of the following: (a) feeding; (b) clothing; (c) hygiene; (d) purchase of any necessary items, including, but not limited to, safety items, food, clothing, and developmentally appropriate toys and books. This includes both at one-time purchases and items needed on an ongoing basis; (e) healthcare; (f) transportation to healthcare appointments, child care, and school, as appropriate; (g) provision of child care and babysitting; (h) discipline; (i) sleeping arrangements; and (j) visits among the child, his or her non-custodial parent, and other appropriate family members, including the responsibilities of the teen parent, the caregiver and CONTRACTOR, as appropriate, for facilitating the visitation.

19.3.3.1 The SRP shall not conflict with the teen parent's case plan and any visitation orders made by the court.

19.3.3.2 The initial SRP, as well as any updates, must be approved by the County Worker.

19.3.4 The SRP shall be updated, as needed, to account for the changing needs of infants and toddlers, and in accordance with the teen parent's changing school, employment, or other outside responsibilities, but not less than every six months. Upon completion of the SRP and any subsequent updates, CONTRACTOR shall provide a copy to the teen parent, the caregiver, and the County Worker, within 3 business days.

20.0 VISITATION PLAN

CONTRACTOR shall assist and ensure Resource Parents collaborate with the County Worker to develop a comprehensive family visitation plan by incorporating the CFT recommendations and court orders, in accordance with:

- a) DCFS Child Welfare Policy No. 0400-504.00 (See Exhibit A-1, Reference Links).
- b) The Juvenile Court Visitation Committee's Family Visitation Guidelines (See Exhibit A-1, Reference Links).
- c) Title 22, Division 6, Chapter 8.8, Sections 88222.1 (20)(d).

20.1 Visitation Plan

CONTRACTOR shall ensure the Family Visitation Plan (FVP) is recorded and updated in the NSP, as indicated in Section 19.0 of this SOW.

20.2 Family Visitation Guidelines

The Juvenile Court Visitation Committee of the Los Angeles County Superior Court has issued requirements in a document called *Family Visitation Guidelines* (See Exhibit A-1, Reference Links). The following requirements include, but are not limited to:

- (a) Family Visitation Plans (FVPs) shall be developed by the CFT consistent with the dependency and criminal court orders;
- (b) The FVP must include detailed, specified information;
- (c) Resource Parents, including FFA staff, are required to perform specified tasks [See Section 20.3 below];
- (d) Length and frequency of visitation should correspond to the child, youth or NMD's age and developmental stage and be consistent with the family's permanency goal [See Section 20.4 below]; and
- (e) The FVP must provide for regular and frequent visitation between siblings, unless inappropriate.

20.3 CONTRACTOR and Resource Parents' Requirements

Resource Parents, including CONTRACTOR's staff, are required to:

- (a) ensure the well-being of the child, youth and NMD including the provision of emotional support;
- (b) comply with the finalized and/or court approved FVP;
- (c) participate in the CFT meeting to develop and review the FVP as appropriate;
- (d) be familiar with the Case Plan;
- (e) inform the County Worker of any problems in complying with the FVP (scheduling conflicts, etc.);
- (f) respect the importance of communication between the child, youth and NMD and the child, youth and NMD's family, and make every effort to ensure appropriate communication and interaction (not in conflict with court orders) between the child, youth and NMD and the family to the greatest extent possible. Where appropriate, this communication and

Interaction should include phone calls, text messages, mail, social media, and e-mail;

- (g) accommodate adjustments to the FVP to the greatest extent possible;
- (h) maintain contact with the County Worker regarding visitation progress. This should include an objective description of the child, youth or NMD's behavior before and after visitation;
- (i) maintain objectivity, and remain committed to the permanency plan;
- (j) share with the parent and COUNTY worker any changes or concerns related to the child, youth or NMD's health and education;
- (k) prepare the child, youth or NMD for visits. This should include describing the location of the visit to the child, youth or NMD and what type of contact the child, youth or NMD can expect during the visit to the greatest extent possible;
- (l) ensure child, youth or NMD is dressed in accordance with visitation facility (e.g., jails, drug treatment facilities) regulations as informed by the County Worker or the facility;
- (m) provide transportation as negotiated in the FVP; and
- (n) notify County Worker of any unplanned contacts between the child, youth, NMD and parent or caregiver and parent.
- (o) Monitor visitation in accordance with court orders and the County Worker's instructions.

20.4 Frequency and Length of Visitation Guidelines

CONTRACTOR shall at minimum follow the visitation frequency described in the following chart pertaining to face-to-face visits unless the Court orders or CFT recommends otherwise:

- (a) For 0-6 months, families should visit at least three times a week for 30-60 minutes.
- (b) For 6-12 months, families should visit at least three times a week for one hour.
- (c) For 1-4 years, families should visit at least twice per week for 1 ½ hours.
- (d) For 5-15 years, families should visit at least once per week for two or more hours.

- (e) For 16-20 years, there is no recommendation except the child, youth and NMD's desires should be strongly considered in creating the FVP

20.5 Honoring the Visitation Rights of Children, Youth and NMDs

CONTRACTOR shall honor the visitation rights of the child, youth and NMD at all times unless one of the following two conditions exists: (1) a specified court order is in effect which prohibits or restricts the visitation rights of the child, youth or NMD; or (2) the FVP developed by the CFT specifically prohibits or restricts visitation rights based upon existing court orders, legal authority and/or documented reasons such as the belief that the visits would be detrimental to the child, youth or NMD.

20.5.1 CONTRACTOR must allow visitation for the caseworker, attorney, and Court Appointed Special Advocate (CASA). The County Worker shall provide CONTRACTOR with copies of court orders regarding court ordered visitation and the FVP.

20.5.2 The FVP shall be discussed with the Resource Family to facilitate understanding of the COUNTY'S and the CONTRACTOR's expectations of the Resource Family, including the transportation arrangements and the birth parent and guardian visiting the child, youth or NMD in the Resource Family Home when applicable. A copy of the FVP shall be given to the Resource Family.

PART D – PERFORMANCE OUTCOME GOALS AND REQUIREMENTS SUMMARY

(Requires updates when information is available)

Failure to meet performance target as outlined in the Performance Outcome Summary(ies) could result in a program review and implementation of an administrative remedy(ies) as outlined in Exhibit N.

21.0 SAFETY

CONTRACTOR shall ensure a safe environment, which provides for the well-being of each child, youth and NMD and leads to permanence for each child, youth and NMD. Specifically, the CONTRACTOR shall provide all services related to safety described in this Contract and Statement of Work, including but not limited to Exhibit A-7, Safety Performance Outcome Summary. In addition, the CONTRACTOR shall meet or exceed the performance targets described in Exhibit A-7, Safety Performance Outcome Summary.

22.0 PERMANENCY

CONTRACTOR shall provide the necessary services to ensure permanency is achieved by facilitating safe and nurturing relationships, which will lead to reunification, adoption, or legal guardianship as described in this Contract and Statement of Work, including but not limited to Exhibit A-8, Permanency Performance Outcome Summary. In addition, the CONTRACTOR shall meet or exceed the performance targets described in Exhibit A-8, Permanency Performance Outcomes Summary.

23.0 ACCESS TO EFFECTIVE AND CARING SERVICES FOR WELL-BEING AND SELF-SUFFICIENCY

CONTRACTOR shall ensure children, youth and NMDs receive services as identified through the Child and Family Team in the spirit of the Core Practice Model to improve their level of functioning in the areas of education and/career planning, transition and preparation for self-sufficiency, physical, behavioral, social and emotional well-being and self-sufficiency as described in this Contract and Statement of Work, including but not limited to Exhibit A-9, Access to Effective and Caring Services and Well-Being Performance Outcome Summary. In addition, the CONTRACTOR shall meet or exceed the performance targets described in Exhibit A-9, Access to Effective and Caring Services and Well-Being Performance Outcome Summary.

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
2.2 (a)	Title 22, Division 6, Chapter 1, Sections 80000-80095 [except as otherwise noted in Section 88200(g-h)] (<i>General Licensing Requirements</i>): https://www.cdss.ca.gov/inforesources/letters-regulations/legislation-and-regulations/community-care-licensing-regulations/residential
2.2 (b)	Title 22, Division 6, Chapter 8.8, Sections 88000 through 88087 [except as otherwise noted in Section 88200(g-h)] (<i>Foster Family Agencies</i>): http://www.cdss.ca.gov/Portals/9/CCR/FFA/VERSION%204%20FFA%20LS_04.12.2019.pdf?ver=2019-04-12-144144-390
2.2 (c)	Title 22, Division 6, Chapter 8.8, Sections 88200 through 88587.1 (<i>Foster Family Agencies Interim Licensing Standards</i>): http://www.cdss.ca.gov/Portals/9/CCR/FFA/VERSION%204%20FFA%20LS_04.12.2019.pdf?ver=2019-04-12-144144-390
2.2 (d)	Title 22, Division 2, Subchapters 1-9, Sections 35000-35409 (<i>Adoptions Manual</i>) for Foster-Adopt FFA requirements: http://www.cdss.ca.gov/inforesources/Letters-Regulations/Legislation-and-Regulations/Adoptions-Regulations
2.3	California Education Code (EDC), California Health and Safety Code (HSC), California Vehicle Code (VEH), Penal Code (PEN) and California Welfare and Institutions Code (WIC): http://leginfo.legislature.ca.gov/faces/codes.xhtml .
2.4.1	All County Letter (ACL) 19-27 Gender Affirming Care for Minor and Non-Minor Dependents in Foster Care: http://www.cdss.ca.gov/Portals/9/ACL/2019/19-27.pdf?ver=2019-05-09-101636-810
3.1 & 10.0	Child abuse and neglect in out-of-home care are definition in Penal Code Section 11165.5: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=PEN&sectionNum=11165.5
5.1	WIC Section 17710 (a): http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=17710.&lawCode=WIC
6.0	Pathways to Mental Health Service Core Practice Model Guide: https://www.cdss.ca.gov/inforesources/the-integrated-core-practice-model
6.0	Los Angeles County Core Practice Model (CPM): www.gettothecore.org .

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
7.4 & 8.3	Megan’s Law Website: http://meganslaw.ca.gov
7.6, 15.1.1.4, 15.3.12.2.1, 15.6.1.3 & 18.11	Foster Youth Bill of Rights: https://fosteryouthhelp.ca.gov/foster-youth-rights/
7.6	Know Your Sexual and Reproductive Health Rights (PUB 490), dated 4/2018: http://www.cdss.ca.gov/Portals/9/FMUForms/M-P/PUB490.pdf?ver=2018-05-25-112132-840
7.6 & 15.1.1.4	Foster Youth Mental Health Bill of Rights (PUB 488), dated 2/2016: http://www.cdss.ca.gov/cdssweb/entres/forms/English/PUB488.pdf
7.6 & 18.11	Foster Care Ombudsman (PUB 379), dated 1/2004: http://www.cdss.ca.gov/cdssweb/entres/forms/English/pub379.pdf
7.6 & 18.11	Emergency Disaster Plan (LIC610), dated 10/2003: http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC610C.PDF
7.6	Visiting Policy Notice (HSC 1512): https://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=1512.&lawCode=HSC
8.1	Department of Justice Applicant Information and Certification Program: http://oag.ca.gov/sites/all/files/agweb/pdfs/fingerprints/forms/all-others.pdf
8.1	Attorney General Information for Applicant Agencies: http://oag.ca.gov/fingerprints/agencies .
8.2	HSC Section 1522: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=HSC&sectionNum=1522 .
8.4	HSC Section 1522(b): http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=HSC&sectionNum=1522
8.4	HSC Section 1522.1: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=1522.1.&lawCode=HSC

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
9.4.1 15.3.10.3 16.7.1	Sexual and Reproductive Wellness in Foster Care training. California Social Work Education Center (CalSWEC): <u>CDSS Available Senate Bill 89 Trainings</u>
9.4.2 16.7, & 16.7.2	Turning Dreams Into Degrees in LA County: A Training to Empower Los Angeles Caregivers to Support Foster Youth to Enroll & Succeed in College: <u>https://www.jbaforyouth.org/la-caregiver-higher-ed-training/</u>
10.0 & 10.3.21	Child Abuse and Neglect Reporting Act (CANRA) Mandated Reporter Definition in Penal Code Section (PEN) 11165.7: <u>http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=PEN&sectionNum=11165.7</u>
10.3 & 10.3.32	PEN Section 11166: <u>http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=11166.&lawCode=PEN</u>
10.3.1	Child Abuse Reporting Electronic System (CARES) Tutorial: <u>https://vimeo.com/494513169</u>
10.3.1	CARES: <u>https://reportchildabusela.org/</u>
10.4	I-Track: <u>https://itrack.dcfslacounty.gov</u>
10.5.5	All County Information Notice (ACIN) I-13-17 “Promising Practices for Youth Who Are Missing or Run Away From Foster Care”: <u>http://www.cdss.ca.gov/Portals/9/ACIN/2017/I-13_17.pdf?ver=2017-05-01-151257-900</u>
10.6	LIC 9185 (8/08) - Foster Family Agency Certified Home: <u>http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC9185.PDF</u>
10.6	LIC 05A (7/17) - Resource Family Approval Certificate: <u>http://www.cdss.ca.gov/Portals/9/FMUForms/I-L/LIC%2005A.pdf?ver=2017-08-02-081625-743</u>
10.6	RFA-06 (11/18) – Resource Family Written Update Report <u>http://www.cdss.ca.gov/inforesources/Forms-Brochures/Forms-Alphabetic-List/Q-T</u>
10.6	Foster Care Search System (FCSS): <u>https://fcss.dcfslacounty.gov/Login.aspx</u>

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
11.0	ACIN No. I-48-19, Updated Child Welfare Services Continuous Quality Improvement Guidelines: https://www.cdss.ca.gov/Portals/9/ACIN/2019/I-48_19.pdf?ver=2019-08-01-123353-200
11.2	ACIN No. I-28-18, “Requirements for Trauma-Informed Core Services and Training for Short-Term Residential Therapeutic Programs (STRTPs) and Foster Family Agencies (FFAs)”: http://www.cdss.ca.gov/Portals/9/ACIN/2018/I-28_18.pdf?ver=2018-05-11-110112-093
12.2	Program Statement Submission System (ePSSS): https://myapps.dcfslacounty.gov/epsss.html
14.0	Welfare and Institutions Code (WIC) 16501(a)(4) http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16501.&lawCode=WIC
14.1	County of Los Angeles Shared Core Practice Model (CPM): http://lakids.dcfslacounty.gov/dcfscpm/documents/Los%20Angeles%20County%20Shared%20Child%20Welfare-Mental%20Health%20Core%20Practice%20Model.pdf
14.1.2	LA County DCFS Policy on the Child and Family Team Process (Policy No. 0070-548.01): http://policy.dcfslacounty.gov/Default.htm#Child_and_Family_Teams.htm?Highlight=chi
14.2	Welfare and Institutions Code (WIC) section 16501(a)(4): http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16501.&lawCode=WIC
14.2	ACL No. 16-84: http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2016/16-84.pdf
15.0	WIC 11463(b)(5), which can be found at: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=11463.&lawCode=WIC
15.1	California Code of Regulations, Title 9, Division 1, Chapter 11, Subchapter 3, Article 2: https://govt.westlaw.com/calregs/Document/IF4D60C40DF4A11E4A54FF

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
	22613B56E19?originationContext=Search+Result&listSource=Search&viewType=FullText&navigationPath=Search%2fv3%2fsearch%2fresults%2fnavigation%2fi0ad720f20000015e5a24479c2a655f05%3fstartIndex%3d1%26Nav%3dREGULATION_PUBLICVIEW%26contextData%3d(sc.Default)&rank=1&list=REGULATION_PUBLICVIEW&transitionType=SearchItem&contextData=(sc.Search)&t T2=1830.210+&t S1=CA+ADC+s
15.1.1.2, 15.1.1.3 & 15.1.16	Psychotropic Medication Forms (JV-217-INFO, JV 218, JV 219, JV 220 and JV-220B): http://www.courts.ca.gov/formnumber.htm
15.1.1.2	WIC 369.5: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=369.5.&lawCode=WIC
15.1.1.3, 15.1.1.5 and 15.1.1.6	Psychotropic Medication: Authorization, Review, and Monitoring for DCFS Supervised Children DCFS Policy No. 0600-514.10: http://policy.dcfslacounty.gov/Default.htm#Psychotropic_Meds.htm
15.3.1	WIC Sections 16501.1(d)(4), and (g)(8)(B): http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=WIC&sectionNum=16501.1
15.3.1	EDC Sections 48850(a) and (b): http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=48850.&lawCode=EDC
15.3.2 & 15.3.3	EDC Section 48853.5(f)(8)(B): http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=48853.5.&lawCode=EDC
15.3.4.4 & 15.3.8	ACL 18-104 Additional Case Plan Documentation for Postsecondary Education Support: http://www.cdss.ca.gov/Portals/9/ACL/2018/18-104.pdf?ver=2018-09-14-125746-300
15.3.5.2	California Foster Youth Education Resource Hub: http://www.cdss.ca.gov/inforesources/California-Foster-Youth-Education-Resource-Hub
15.3.5.2 & 15.3.8	ACIN I-15-19 Available Education-Related Resources http://www.cdss.ca.gov/Portals/9/ACIN/2019/I-15_19.pdf?ver=2019-05-06-072250-567

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
15.3.6.2	Los Angeles County Office of Education (LACOE), Foster Youth Service Coordinating Program (FYSCP) Tutoring Program and other community-based tutoring resources: https://www.lacoe.edu/Student-Services/Homeless-Children-Youth/Foster-Youth/Tutoring
15.3.8.2	Foster Educational Planning Guide: https://www.jbaforyouth.org/fy-ed-planning-guide/
15.3.8.2	California Community Colleges-My Path: https://www.cccmypath.org/uPortal/f/u2711s1000/normal/render.uP
15.3.8.2	Free Financial Aid Guide for CA Foster Youth: https://www.jbaforyouth.org/ca-fy-financial-aid-guide/
15.3.8.2	California College Pathways www.cacollegepathways.org
15.3.8.2	Web-Based Career Assessment Tools O*Net Online: https://www.onetonline.org/
15.3.8.2	Study.com : https://study.com/directory/category/index.html
15.3.8.2	My Next Move: https://www.mynextmove.org/
15.3.8.2	Wage Reality Testing Living Wage Calculator: http://livingwage.mit.edu/
15.3.8.2	Salary Surfer: https://salarysurfer.cccco.edu/SalarySurfer.aspx
15.3.9, 15.4.5 & 18.8	WIC Section 16010: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16010.&lawCode=WIC
15.3.10	WIC Section 362.05: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=362.05.&lawCode=WIC
15.3.11.2	Centers for Disease Control, Division of Nutrition, Physical Activity, Obesity: https://www.cdc.gov/nccdphp/dnpao/
15.4.1	Child Health Disability Prevention (CHDP) Program: http://www.lapublichealth.org/cms/CHDP.htm ;

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
15.4.1.1	CHDP Program DCFS Policy No. 0600-506.10: http://policy.dcfslacounty.gov/Default.htm#Child Health and Disabil.htm?Highlight=medical
15.4.1.1	Medical/Dental Exams Periodicity Schedule for children, which can be found at: https://www.aap.org/en-us/Documents/periodicity_schedule.pdf
15.4.1.1.1	Medical Hubs DCFS Policy No. 0600-500.00: http://policy.dcfslacounty.gov/Default.htm#Utilization of Medical H.htm?Highlight=0600-500.00
15.4.1	Los Angeles County Department of Public Health: http://www.lapublichealth.org/cms/CHDP.htm
15.4.2.3	ACL No. 16-82, Reproductive and Sexual Health Care and Related Rights for Youth and Non-Minor Dependents (NMDs) in Foster Care: http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2016/16-82.pdf
15.4.2	ACL No. 16-88, California’s Plan for the Prevention of Unintended Pregnancy for Youth and Non-Minor Dependents (NMDs) in Foster Care http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2016/16-88.pdf
15.4.2	CDSS Resources for Caregivers, Mentors, Social Workers, and Probation Officers: http://www.cdss.ca.gov/inforesources/Foster-Care/Healthy-Sexual-Development-Project/Resources-for-Caregivers-SW-PO
15.4.2	Health Insurance Portability and Accountability Act: https://www.hhs.gov/hipaa/index.html
15.4.2.3	California Confidentiality of Medical Information Act: https://leginfo.ca.gov/faces/codes_displaySection.xhtml?sectionNum=56.10.&lawCode=CIV
15.4.3	Los Angeles County Department of Health Services contracted providers: http://dhs.lacounty.gov/wps/portal/dhs/locations/
15.4.4.4	Don’t Rush to Flush Website https://www.dontrushtoflush.org/
15.4.4.5	US Department of Justice, Drug Enforcement Administration, Diversion Control Division, Drug Disposal Information Website https://apps.deadiversion.usdoj.gov/pubdispsearch/spring/main?execution=e1s1

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
15.5.5.4	America’s Jobs Centers of California (AJCC’s): https://workforce.lacounty.gov/youth-services-2/
15.5.5.4	Youth Source Centers (YSC): http://ewddlacity.com/index.php/employment-services/youth-age-16-24/youthsource-centers
15.5.5.6	Independent Living Skills Resources Opportunity Youth Collaborative: http://www.laoyc.org/
15.5.5.6	Independent Living Skills Resources Know Before You Go: http://knowb4ugo.org/
15.5.5.6	Independent Living Skills Resources ILP Online: http://www.ilponline.org/
15.6.1.3 & 18.11 (a)	WIC, Section 16001.9(a), Personal Rights: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16001.9.&lawCode=WIC
15.7	WIC Section 224.1: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=224.1.&lawCode=WIC
15.7	WIC Section 361.7 http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=361.7.&lawCode=WIC
15.7	Federal Indian Child Welfare Act (25 U.S.C. Sec. 1901 et seq.): https://www.nicwa.org/wp-content/uploads/2016/11/Indian-Child-Welfare-Act-of-1978.pdf
15.7.1	Federal Indian Child Welfare Act (ICWA): https://www.ecfr.gov/cgi-bin/text-idx?SID=5851874fabfe7843125fcdad04ef112d&mc=true&node=pt25.1.23&rqn=div5
15.7.2	National Indian Child Welfare Association for further guidance at https://www.nicwa.org/icwa/
16.4.2	HSC 1517:

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
	http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=1517.&lawCode=HSC
16.7	California College Pathways: http://www.cacollegepathways.org/resources-reports/caregiver-training-resources/
16.7.3	HSC Section 1507.25: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=1507.25.&lawCode=HSC
16.8	Adopt US Kids, strategies for recruitment and retention: https://adoptuskids.org/for-professionals/publications/diligent-recruitment-tools
16.8	US Department of Health and Human Services, Administration for Children and Families, Child Welfare Information Gateway, strategies for recruitment and retention: https://www.childwelfare.gov/topics/permanency/recruiting/recruitment-tools/
16.9.2	Community Colleges at the California Community Colleges Registry at: https://www.cccregistry.org/jobs/miscellaneous/collegedirectory.aspx
16.9.4 & 19.3.1	Services for Teen Parents DCFS Policy 0100-510.40: http://policy.dcfslacounty.gov/Default.htm#Teen Parent DPSS Service.htm?Highlight=0100-510.40
16.10.1.1 & 16.10.3	HSC Section 1517.5: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=1517.5.&lawCode=HSC
16.10.2	WIC Section 16519.58 http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16519.58.&lawCode=WIC
17.0	WIC Section 16501.25 http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16501.25.&lawCode=WIC
17.0	ACL No. 06-04, Minor Dependent Parents In Foster Care: http://www.cdss.ca.gov/lettersnotices/entres/getinfo/acl06/pdf/06-04.pdf

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
17.5.2	Business and Professions Code (BPC) Sections 22950.5(c) and (d): http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=22950.5.&lawCode=BPC
17.6.1.8	DCFS Policy on Runaways and Returning Runaway Youth from Other Jurisdictions No. 0100-570.11: http://policy.dcfslacounty.gov/Default.htm#Runaways and Returning R.htm#YouthRunsAwayFromPlacement
18.6	WIC Section 16514(c): http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16514.&lawCode=WIC
18.6	ACIN No. I-75-16, which can be found at: http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acin/2016/I-75_16.pdf
18.10	Release of Confidential DCFS Case Record Information Policy No. 0500-501.20, Declaration in Support of Access to Juvenile Records Form http://policy.dcfslacounty.gov/default.htm#Release_of_Confidential.htm
18.11	Know Your Sexual and Reproductive Health Rights, dated 4/2018 http://www.cdss.ca.gov/Portals/9/FMUForms/M-P/PUB490.pdf?ver=2018-05-25-112132-840
18.11	Foster Youth Mental Health Bill of Rights (PUB 488), dated 2/2016: http://www.cdss.ca.gov/cdssweb/entres/forms/English/PUB488.pdf
18.11	Foster Care Ombudsman http://www.cdss.ca.gov/cdssweb/entres/forms/English/pub379.pdf
18.13	WIC Section 16010.7: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16010.7.&lawCode=WIC
18.13	ACL No. 19-26 Placement Change Requirements http://www.cdss.ca.gov/Portals/9/ACL/2019/19-26.pdf?ver=2019-05-13-154257-380
18.13.2.2	Seven Day Prior Written Notice to Foster Parents of Intent to Remove a Child and Grievance Review Regarding Placement/Removal of a Child from a Foster Home:

EXHIBIT A-1 – FOSTER FAMILY AGENCY REFERENCE LINKS

SOW SECTION	REFERENCE LINKS
	http://policy.dcfs.lacounty.gov/Default.htm#Grievance_Review_Regardi.htm?Highlight=0100-502.52
20.0	DCFS Family Visitation Policy No. 0400-504.00: http://policy.dcfs.lacounty.gov/Default.htm#Family_Visitation_.htm?Highlight=visitation
20.0 & 20.2	Juvenile Court Visitation Committee's Family Visitation Guidelines: http://www.courts.ca.gov/cms/rules/index.cfm?title=standards&linkid=standard5_20

County of Los Angeles - Department of Children and Family Services (DCFS)
Out-of-Home Care Management Division (OHCMD)
FFA, STRTP and GH Quality Assurance Section

CRIMINAL RECORD EXEMPTION NOTIFICATION INSTRUCTIONS

Criminal Record Exemptions for prospective/current certified resource parents, other household members, substitute caregivers/babysitters, and Foster Family Agency (FFA), Short-Term Residential Therapeutic Program (STRTP), and Group Home (GH) staff are to be shared with OHCMD.

The **Criminal Record Exemption Notification** form must be completed and e-mailed password protected with a unique password selected by the Contractor, as an attachment to the assigned OHCMD Quality Assurance (QA) Technical Assistance Specialist (TAS), within two business days of the FFA/STRTP/GH **submitting** or **obtaining** a criminal record exemption. A subsequent e-mail should be sent to the OHCMD QA TAS with the password to open the document. Once the password has been emailed to OHCMD QA TAS, a subsequent email with the password will only be required when the Contractor changes the password. The County may request that employees, independent contractors, volunteer staff, or subcontractors with a criminal record exemption be immediately removed from performing services under the Contract-at any time.

CONTRACTOR shall notify COUNTY of any approved or denied exemption request submitted to the California Department of Social Services (CDSS) Criminal Background Check Bureau (CBCB).

8.0 STAFF QUALIFICATIONS, REQUIREMENTS AND EXEMPTIONS

CONTRACTOR shall adhere to Title 22, Division 6, Chapter 7.5, Sections 87019, 87022(c)(A) and (D), 87064, 87065, and 87095.66 requirements in connection with staff qualifications, requirements, and exemptions.

County of Los Angeles - Department of Children and Family Services (DCFS)
Out-of-Home Care Management Division (OHCMD)
FFA, STRTP and GH Quality Assurance Section
CRIMINAL RECORD EXEMPTION NOTIFICATION

Contractor: _____

Prospective/Current Certified Resource Parent, Household Member, Substitute Caregiver or staff _____

Please complete the following areas if you have requested or obtained a criminal record exemption for a prospective/current certified foster parent, other household member, substitute caregiver/babysitter, or FFA/STRT/TP/GH staff. Please submit this form password protected with a unique password selected by the Contractor within 2 business days of requesting or obtaining a criminal record exemption via e-mail to the assigned OHCMD Quality Assurance (QA) Technical Assistance Specialist (TAS).

1. Information Pertaining to Criminal Record Exemption Request:

Date of Exemption request: _____

Name of person requiring an Exemption:

Relationship: (Select One)

- Prospective Certified Resource Parent, Current Certified Resource Parent, Member of Household, Substitute Caregiver/Babysitter, Staff

2. Information Pertaining to Criminal Record Exemption Obtained:

Date Exemption was obtained: _____

Name of person granted an Exemption:

Relationship: (Select One)

- Prospective Certified Resource Parent, Current Certified Resource Parent, Member of Household, Substitute Caregiver/Babysitter, Staff

3. Criminal Record Exemption is No Longer Needed for this Individual

Date Exemption no longer needed: _____

FOR COUNTY USE ONLY

Exemption Notification received on _____ by QA Reviewer: _____

County of Los Angeles - Department of Children and Family Services (DCFS)**Out-of-Home Care Management Division (OHCMD)****FFA, STRTP and GH Quality Assurance Section****NOTIFICATION OF SUBSEQUENT ARREST, CONVICTION, PROBATION OR PAROLE VIOLATION INSTRUCTIONS**

When a subsequent arrest, conviction, probation or parole violation of a prospective/current certified resource parent, other household member, substitute caregiver/babysitter, or Foster Family Agency (FFA)/Short-Term Residential Therapeutic Program (STRTP)/Group Home (GH) staff is made known to a Contractor, the information shall be submitted within two business days by the Contractor to OHCMD and Placement Permanency & Quality Assurance (PPQA) by utilizing the **Notification of Subsequent Arrest, Conviction, Probation or Parole Violation** form.

This form must be completed and e-mailed password protected with a unique password selected by the Contractor, as an attachment to the assigned OHCMD Quality Assurance Section (QA) Technical Assistance Specialist (TAS) and PPQA within two business days of the Contractor receiving notification of a subsequent arrest, conviction, probation or parole violation for any Staff, perspective/current Certified Resource Parents, Substitute Caregivers, Babysitters or Household Members. A subsequent e-mail should be sent to the OHCMD QA TAS and the PPQA with the password to open the document. Once the password has been emailed to OHCMD QA TAS and PPQA, a subsequent email with the password will only be required when the Contractor changes the password.

When County of Los Angeles supervised children are placed in a resource family home, the Contractor shall also be responsible for submitting this information to OHCMD and all other appropriate parties utilizing the I-Track system.

**County of Los Angeles - Department of Children and Family Services
(DCFS) Out-of-Home Care Management Division (OHCMD)
FFA STRTP and GH Quality Assurance Section**

**NOTIFICATION OF SUBSEQUENT ARREST, CONVICTION, PROBATION OR PAROLE
VIOLATION**

Contractor: _____

Person for Whom Notification is Necessary: _____

1. Relationship: (Select One)

- Prospective Certified Resource Parent Current Certified Resource Parent
 Member of Household Substitute Caregiver/Babysitter Staff

For Household Members and Substitute Caregivers/Babysitters, please indicate the Prospective or Current Certified Resource Parent to whom the individual is associated:

Name of Certified Resource Parent: _____

2. Please check to indicate the offense that occurred for the person listed above:

- Arrest Conviction Probation Violation Parole Violation

3. Date Offense Occurred: _____

NOTE: This form must be completed and e-mailed password protected with a unique password selected by the Contractor, as an attachment to the assigned OHCMD Quality Assurance (QA) Technical Assistance Specialist (TAS) and Placement & Permanency & Quality Assurance (PPQA) within two business days of the Contractor receiving notification of a subsequent arrest, conviction, probation or parole violation for any Staff, prospective/current Certified Resource Parent, Substitute Caregiver, Babysitter or Household Member.

When County of Los Angeles supervised children are placed in the home, all information must also be reported by the Contractor to OHCMD and PPQA and all other appropriate parties using the I-Track system.

SPECIAL INCIDENT REPORTING (SIR) GUIDE
FOR FOSTER CARE PLACEMENT SERVICES PROVIDERS

The County of Los Angeles Department of Children and Family Services (DCFS) and Probation Department (Probation) have developed this SIR guide. It does not supersede the requirements outlined in California Code of Regulations Title 22, Sections 80061, 84061, 84361, 87061, 87095.61, 88061, 88361, and 88487.6.

The Foster Care Placement Services provider shall maintain a copy of all reports as required in Sections 1 through 6 of this guide in the placed child's file. The provider shall also summarize the information in the child's monthly Needs and Services Plan reports to the Children's Social Worker (CSW)/Deputy Probation Officer (DPO). Children's files shall be retained at the facility for at least five years following the term of this Contract.

Many of these special incident-reporting decisions require good judgment and sound discretion. If in doubt, whether to report or not, the Foster Family Agency (FFA)/ Short-Term Residential Therapeutic Program (STRTP) staff should call the appropriate agency for clarification. Whoever is reporting should be prepared for follow-up questions, have expertise in the reporting procedure, as well as be aware of the timeframes required for reporting. Some incidents may require immediate reporting via telephone to police and the CSW/DPO, as well as via iTrack.

The agency shall report special incidents to the DCFS Out-of-Home Care Management Division Quality Assurance Section (OHCMD QAS), CSW/DPO, Probation Child Welfare's (PCW) Placement Permanency & Quality Assurance (PPQA) Residential Program Monitor Officer of the Day (RPM OD), Department of Mental Health and Community Care Licensing Division (CCLD) via the **iTrack web-based system** at <https://itrack.dcms.lacounty.gov> as specified in the tables below. **Note:** PCW's Placement Administrative Services (PAS) must only be notified via e-mail anytime youth leave the agency overnight such as runaway incidents, return runaways, hospital stays, death, etc. The e-mail is PlacementExitNotification@probation.lacounty.gov

If the agency cannot obtain complete information regarding the incident within the required reporting timeframes, the agency shall submit an initial SIR that includes as much information as possible. If the agency determines that it is necessary to provide additional information about an incident for which an iTrack report has already been submitted, the agency may submit an addendum within seven (7) business days of becoming aware of the incident per the Title 22 requirements noted above. More than one addendum may be submitted for a SIR. If the iTrack web-based system is off-line, the FFA/STRTP staff shall email the report per the tables below. When iTrack is available, resubmit the report via iTrack noting the date of the previously emailed transmission.

TABLE OF CONTENTS

<u>TYPE OF INCIDENT</u>	<u>PAGE #</u>
1. BEHAVIORAL/MENTAL HEALTH	2
2. INJURY, ILLNESS OR ACCIDENT.....	3
3. DEATH	4
4. UNAUTHORIZED ABSENCE.....	4
5. ALLEGED CHILD ABUSE.....	5
6. SCHOOL RELATED.....	6
7. AGENCY EMERGENCY/DISASTER.....	6
8. SIGNIFICANT OPERATIONAL CHANGES.....	7

- 1. BEHAVIORAL/MENTAL HEALTH** – Incident that adversely affects the physical health, mental health, emotional health, educational well-being, or safety of a child.

Incident **may include, but is not limited to**, the following examples:

- Assaultive Behavior (Caregiver)
- Assaultive Behavior (Peer)
- Assaultive Behavior (Other)
- Gang Related
- Hospitalization (Psychiatric)
- Inappropriate Sexual Behavior
- Medication Refusal
- Physical Restraint
- Police/Law Enforcement Involvement
- Property Damage
- Seclusion
- Staff Related
- Substance Abuse
- Suicidal Ideation
- Theft
- Youth Arrested

HOW	TO WHOM	WHEN
Telephone/e-mail	CSW and/or DPO	Within 24 hours
Telephone	PPQA RPM OD	Within 24 hours (if on weekends or holidays, call at 8 AM the next business day)
iTrack (email if iTrack is down and follow with iTrack submittal when the system is available)	CSW and/or DPO	Within 24 hours
	OHCMD QAS and/or PPQA RPM	Within 24 hours
	CCLD	Within 24 hours
By clicking on the Psychiatric Hospitalization tab, a SIR will automatically be emailed to a DMH staff (STRTPs ONLY)	DMH	Within 24 hours

The following incidents **must be reported as soon as possible, but no later than five hours of the incident** via telephone or e-mail to CSW/DPO and telephone to PPQA RPM OD; as well as, in writing via **iTrack** within 24 hours of incident:

- Self-Injurious Behavior
- Suicide Attempt

HOW	TO WHOM	WHEN
Telephone/e-mail	CSW and/or DPO	As soon as possible (within 5 hours)
Telephone	PPQA RPM OD	As soon as possible (within 5 hours; for self-injurious behavior and after hours, call at 8:00 AM the next business day; for suicide attempt and after hours, call PPQA and RBS Directors
iTrack (email if iTrack is down and follow with iTrack submittal when the system is available)	CSW and/or DPO	Within 24 hours
	OHCMD QAS and/or PPQA RPM	Within 24 hours
	CCLD	Within 24 hours

2. INJURY, ILLNESS OR ACCIDENT – Incident that results in medical treatment by a health care professional beyond routine medical care, with the exception of planned surgery. If in doubt, report or call the required agency for clarification.

Incident **may include, but is not limited to**, the following examples:

- Accident
- Injury
- Emergency Room Visit
- Urgent Care Visit
- Hospitalization (Medical)
- COVID-19

Must be reported as soon as possible but no later than five hours of knowledge of the incident via telephone or e-mail to CSW/DPO and telephone to PPQA RPM OD, as well as, in writing via **iTrack** within 24 hours of incident.

HOW	TO WHOM	WHEN
Telephone/e-mail	CSW and/or DPO	As soon as possible (within 5 hours)
Telephone	PPQA RPM OD	(As soon as possible (within 5 hours; for self-injurious behavior and after hours, call at 8:00 AM the next business day
iTrack (e-mail only if iTrack is down)	CSW and/or DPO	Within 24 hours
	OHCMD QAS and/or PPQA RPM	Within 24 hours
	CCLD	Within 24 hours

3. **DEATH** – Death must be reported by telephone to police/law enforcement (when appropriate), CSW/DPO, Child Protection Hotline (CPHL), and PPQA RPM OD **within one hour of incident**, as well as in writing via iTrack within 24 hours of incident.

HOW	TO WHOM	WHEN
Telephone	Police/Law Enforcement	Immediately (Within 1 hour)
	CSW and/or DPO (Agency to confirm that DCFS/Probation will contact parent/guardian)	Immediately (Within 1 hour)
	PPQA RPM OD	Immediately (Within 1 hour; if after hours, call PPQA and RBS Directors)
	CPHL at (800) 540-4000	Immediately (Within 1 hour)
Email	PAS Exit Notification E-Mail	Immediately (Within 4 hours)
iTrack (e-mail only if iTrack is down)	CSW and/or DPO	Within 24 hours
	OHCMD QAS and/or PPQA RPM	Within 24 hours
	CCLD	Within 24 hours

4. **UNAUTHORIZED ABSENCE** – Absence of a child without the permission and supervision of the Resource Parent or STRTP which threatens the physical health, emotional health, or safety of the child.

Incident **may include, but is not limited to**, the following examples:

- Abduction
- Runaway

Abduction must be reported immediately within one hour of the caregiver’s suspicion or knowledge of the abduction to police/law enforcement, CSW/DPO, and PAS Exit Notification E-mail, as well as in writing via iTrack within 24 hours of abduction.

HOW	TO WHOM	WHEN
Telephone	1. Law Enforcement	Immediately (Within 1 hour)
Telephone/e-mail	2. CSW (If after hours, email CPHL at CPH@dcfs.lacounty.gov or call CPHL if a critical missing situation)	Immediately (Within 1 hour)
Telephone/e-mail	3. DPO	Immediately (Within 1 hour)
Telephone	4. Parent/Guardian (if known)	Immediately (Within 1 hours)
E-mail	PAS Exit Notification E-Mail	Immediately (Within 2 hours; if after hours, call PPQA and RBS Directors)
iTrack (e-mail if iTrack is down and submit in iTrack when system is up)	CSW and/or DPO	Within 24 hours
	OHCMD QAS and/or PPQA RPM	Within 24 hours
	CCLD	Within 24 hours

Runaway incidents must be reported as soon as a child is absent without the permission and supervision of the caregiver, which threatens the physical health, emotional health, and/or safety of the child. A child’s unauthorized absence must be reported as soon as possible but no later than three hours to police/law enforcement,

CSW/DPO, and PAS Exit Notification E-mail based on the Reasonable Prudent Parent Standard and considering the child’s needs; as well as in writing via iTrack within 24 hours of runaway.

Note: Mass runaway incidents (3 or more children) shall be reported via telephone to the designated Probation Directors immediately as defined below, including weekends and holidays.

HOW	TO WHOM	WHEN
Telephone	1. Law Enforcement	As soon as possible (Within 3 hours)
Telephone/e-mail	2. CSW (If after hours, email CPHL or call CPHL if a critical missing situation)	As soon as possible (Within 3 hours)
Telephone/e-mail	3. DPO	As soon as possible (Within 3 hours)
Telephone	4. Parent/Guardian (if known)	As soon as possible (Within 3 hours)
E-mail	PAS Exit Notification E-Mail	As soon as possible (Within 3 hours)
iTrack (e-mail if iTrack is down and submit in iTrack when system is up)	CSW and/or DPO	Within 24 hours
	OHCMD QAS and/or PPQA RPM	Within 24 hours
	CCLD	Within 24 hours

5. ALLEGED CHILD ABUSE – All personnel are required by law to report known, suspected, or alleged incidents of child abuse as defined in Penal Code Section 11165-11174.4.

Incident **may include, but is not limited to**, the following examples:

- Caretaker Absence/Incapacity
- Neglect (general and severe, including medical neglect)
- Physical – an injury purposefully inflicted upon a child (including corporal punishment and willful cruelty or infliction of unjustifiable pain or punishment)
- Sexual (including sexual assault, sexual exploitation through pornography or prostitution, sexual activity between minors, and sexual activity between an adult and a minor)
- Verbal/Emotional

Must be reported by telephone to police/law enforcement (when appropriate), by telephone/e-mail to CSW/DPO, CPHL, and by telephone to PPQA RPM OD **as soon as possible, but within two hours of knowledge of the incident**; as well as, in writing via iTrack within 24 hours of knowledge of the incident.

HOW	TO WHOM	WHEN
Telephone/e-mail	CSW and/or DPO	As soon as possible (Within 2 hours)
Telephone	PPQA RPM OD	As soon as possible (Within 2 hours; if after hours, call at 8 AM the next business day)
Telephone	CPHL for DCFS and Probation	As soon as possible (Within 2 hours)
Telephone	Law Enforcement	As soon as possible (Within 2 hours)
iTrack (Fax only if iTrack is down)	CSW and/or DPO	Within 24 hours
	OHCMD QAS and/or PPQA RPM	Within 24 hours
	CCLD	Within 24 hours

NOTE: Written submission of State Form SS8572, "Suspected Child Abuse Report," within 36 hours is mandatory. Please indicate in the SIR (iTrack) that the SS8572 is forwarded to required parties.

6. SCHOOL RELATED – Incident that involves school-related matters or that occur on school grounds

Incident **may include, but is not limited to**, the following examples:

- Assaultive Behavior (Student/School Staff)
- Chronic Refusal to Attend School/Chronic Truancy
- Expulsion
- Suspension

HOW	TO WHOM	WHEN
Telephone/e-mail	CSW and/or DPO	Within 24 hours of the agency being notified
Telephone	PPQA RPM OD	Within 24 hours of the agency being notified (if after hours, call at 8 AM the next business day)
iTrack (e-mail only if iTrack is down)	CSW and/or DPO	Within 24 hours of the agency being notified
	OHCMD QAS and/or PPQA RPM	Within 24 hours of the agency being notified
	CCLD	Within 24 hours of the agency being notified

7. AGENCY EMERGENCY/DISASTER – Incident that involves the community or physical plant and may have a serious impact on residents or create a potentially dangerous environment.

Incident **may include, but is not limited to**, the following examples:

- Earthquake Damage
- Flood
- Epidemic
- Vehicle Accident/Damage Involving a Placed Child
- Explosion
- Fire

Must be reported by telephone to Local Fire Authority for all fires and explosions and to Local Health Officer for all epidemic outbreaks **within one hour of incident.**

HOW	TO WHOM	WHEN
Telephone	Local Fire Authority for all fires and explosions (Section 80061(b)(1) of CCR)	Immediately (Within 1 hour)
	Local Health Officer for all epidemic outbreaks [California Code of Regulations § 80061(b)(1)]	Immediately (Within 1 hour)
	CSW and/or DPO	Within 24 hours
	OHCMD QAS and PPQA RPM OD	Within 24 hours (for PPQA RPM OD, if after hours, call PQA and RBS Directors)
	CCLD	Within 24 hours
iTrack (e-mail only if iTrack is down)	CSW and/or DPO	Within 24 hours
	OHCMD QAS and PPQA RPM	Within 24 hours
	CCLD	Within 24 hours

8. SIGNIFICANT OPERATIONAL CHANGES – Changes in an organization’s operations and operational structure that may affect the services to the placed children and youth. **NOTE: While agencies are not required to report significant changes via iTrack, these incidents must be reported to all above agencies per the requirements in the California Code of Regulations Title 22, Sections 80061 and 84061, 87061, 88361, and 88487.6.**

Incident **may include, but is not limited to**, the following examples:

- Administration (e.g., Chief Executive Officer, Program Administrator, Mental Health Service Head, Facility Manager)
- Mailing Address (For any facility or resource home)
- Plan of Operation/Program Statement
- Staffing disruption (e.g., strike, disaster evacuation or staff shortage)

**LOS ANGELES COUNTY
FOSTER FAMILY AGENCY MONTHLY UTILIZATION REPORT**

** Data source shall be from DCFS contracted facilities only **

NAME OF FFA _____ MONTH/YEAR: _____

Intake Worker(s): _____ Phone No. _____ Email _____

I. TOTAL NUMBERS OF DUALY CERTIFIED FAMILIES AND APPROVED RESOURCE FAMILIES (RFA) IN LOS ANGELES COUNTY & OUT-OF-COUNTY FOR L.A. COUNTY DCFS CHILDREN PLACEMENTS AS OF THE LAST DAY OF THE REPORTING MONTH: (see definition)

LOS ANGELES COUNTY (LA)

OUT-OF-COUNTY (O/C)

- _____ Total # of homes (NDC, DC & RFA) in L.A.
- _____ Total # of Non-Dually Certified(NDC) homes
- _____ Total # of Dually Certified (DC) homes (not RFA)
- _____ Total # of RFA homes
- _____ Total Capacity (Total # of Beds)
- _____ L.A. County DCFS Children placed
- _____ Total # of Whole Family Foster Homes (WFFH)
- _____ Total # of Placed Teen Parents with ___#child(ren)
- _____ Total # of Non-L.A. County DCFS Children Placed
- _____ Total # of L.A. County Children placed in Non-DCFS Contracted sites via Special Placement (4213)

- _____ Total # of homes (NDC, DC &RFA) in O/C
- _____ Total # of Non-Dually Certified (NDC) homes
- _____ Total # of Dually Certified (DC) homes (not RFA)
- _____ Total # of RFA homes
- _____ Total Capacity (Total # of Beds)
- _____ L.A. County DCFS Children placed
- _____ Total # of Whole Family Foster Homes (WFFH)
- _____ Total # of Placed Teen Parents with ___#child(ren)
- _____ Total # of Non-L.A. County DCFS Children Placed

II. TOTAL NUMBERS OF AVAILABLE VACANCIES (VACANT BEDS) FOR L.A. COUNTY DCFS CHILDREN PLACEMENTS:

	<u>RFA Homes</u>		<u>Dually Certified Foster Homes</u>		<u>Non-Dually Certified Foster Homes</u>	
	<u>L.A.</u>	<u>O/C</u>	<u>L.A.</u>	<u>O/C</u>	<u>L.A.</u>	<u>O/C</u>
___# Total available vacancies	___	___	___	___	___	___
___# Vacant beds for ERCP (after hour or weekend)	___	___	___	___	___	___
___# Vacant beds for DCFS children (WFFH)	___	___	___	___	___	___
___# Vacant beds for DCFS children (age 0-2)	___	___	___	___	___	___
___# Vacant beds for DCFS children (age 3-5)	___	___	___	___	___	___
___# Vacant beds for DCFS children (age 6-12)	___	___	___	___	___	___
___# Vacant beds for DCFS children (age 13+)	___	___	___	___	___	___
___# Vacant beds for DCFS children (siblings)	___	___	___	___	___	___

III. NEWLY APPROVED OR CERTIFIED HOMES / DE-CERTIFIED HOMES / WFFH :

- A. _____ Total # of New Dually Certified and Approved RFA homes in the reporting month
- B. _____ Total # of existing Certified homes converted to RFA homes in the reporting month
- C. _____ Total # of New Dually Certified Homes in the reporting month
- D. _____ Total # of De-Certified homes (All types) in the reporting month.
- E. **Complete the Newly Approved RFA/ Newly Dually Certified Home/ De-Certified Home List and submit it with this self-report. Submit the certificate for RFA home or the home study for the Newly Dually Certified home.**
- F. **Total # of new Whole Family Foster Home (WFFH) Placements:** _____.

WFFH Foster Parents' names: _____

Address: _____ Phone #: _____

Name of Teen Parents: _____ Name of Baby: _____

IV. Change in placement for L.A. County children only (attach requested information):

Total # of children moved to another home(s) associated with your FFA during the reporting month: _____

IMPORTANT: Please also attach a list of all the L.A. County children placed with your FFA and the date that each child was initially placed with your FFA. For those children moved to another foster home associated with your FFA during this reporting month, please indicate how many times they were moved this month and the reason for their replacements. This does not include respite placements unless they become long-term placements. Thank you.

DEFINITION:

RFA Homes (Resource Families Approved) – The streamlined and unified process for approving Resource Families as per the new Interim Licensing Standards, which went into effect January 1, 2017.

Dually Certified Foster Families – Existing foster families able to foster and adopt, which were dually certified or began the dual certification process prior to January 1, 2017.

Non-Dually Certified Foster Families – Existing certified foster families grandfathered prior to 2009, not dually certified.

WFFH (Whole Family Foster Home) – foster families that provide care for placed teen parents and their dependent child(ren).

Total Capacities (Beds) – Total number of beds provided for DCFS children placements.

Non- L.A. County Children placed - refers to those foster children who are not L.A. County DCFS children.

Available Vacancies (Vacant Beds) - refers to those open and active beds. Do not include the beds on hold or inactive.

Vacancies for ERCP (Emergency Response Command Post) Placement – refers to available beds that are currently capable of serving children referred by the ERCP.

LOS ANGELES COUNTY DEPARTMENT OF CHILDREN AND FAMILY SERVICES

FFA Monthly Newly Approved RFA (Resource Family) / Newly Dually Certified Home / De-certified Home

Agency Name _____ **Month** _____ **Year** _____

Reason Code for De-certification: (1) Sexual Abuse, (2) Physical Abuse, (3) Sickness, (4) Retired, (5) Different Agency, (6) Neglect, (7) CCL Violations, (8) Adoptive Home, (9) Legal Guardianship, (10) Moved, (11) Agency Standards Not Met, (12) Voluntary.

PARENTS' NAMES	ADDRESS	PHONE #	DATE OF RESOURCE FAMILY APPROVAL (RFA)	DATE OF FOSTER HOME CERTIFICATION	DATE OF DE-CERTIFICATION	REASON CODE FOR DE-CERTIFICATION	Indicate in this column for any of the following: 1. RFA Certificate is attached to the report. 2. Home Study is attached or was sent to PRU. 3. Brief Reason Description for De-certification.
Last name, First & Middle; Last name, First & Middle	Full address	(xxx) xxx-xxxx		5/10/2017			Adoption HS was sent to PRU (or attached to the report)
Last name, First & Middle; Last name, First & Middle	Full address	(xxx) xxx-xxxx	5/15/2017				RFA Certificate is attached to the report
Last name, First & Middle; Last name, First & Middle	Full address	(xxx) xxx-xxxx	1/25/2017		5/20/2017	2, 7	Substantiated Allegaton of physical abuse
Last name, First & Middle; Last name, First & Middle	Full address	(xxx) xxx-xxxx		3/25/2015	5/12/2017	8, 12	Adoption completed and FP doesn't want fostering any more.
Last name, First & Middle; Last name, First & Middle	Full address	(xxx) xxx-xxxx		6/1/2016	5/28/2017	6, 7	FM left foster child in the car alone and went to the grocery store.
Last name, First & Middle; Last name, First & Middle	Full address	(xxx) xxx-xxxx		12/9/2016	5/5/2017	11	FP(s) have never responded to the agency's phone calls.
Last name, First & Middle; Last name, First & Middle	Full address	(xxx) xxx-xxxx		8/8/2013	5/2/17	5	FP(s) moved and voluntarily de-certified.

1. Please use font "Arial" and size "12" to type in the information. Do not capitalize all the letters. Use semicolon to separate 2 persons' names.
2. Follow the format set for each column and each box. Do not alter. "Wrap Text" was set for each box, so go ahead to type in the information straight. For manually change the line in the same box, hit "Alt" and "Enter" on the keyboard.
3. The above sample information is for your reference only. Do not keep it on your list when submitting your list.

SAFETY PERFORMANCE OUTCOME SUMMARY*		
PROGRAM TARGET GROUP: Children in FFA Resource Family Approved homes.		
PROGRAM GOAL AND OUTCOME: Children shall be free of abuse and neglect by Resource Family, FFA staff, volunteers, other children, and family members and as specified in California Health and Safety Code Section 1522(b).		
OUTCOME INDICATORS	PERFORMANCE TARGETS	METHOD OF DATA COLLECTION
<p>Abuse and Neglect Referrals and their disposition including substantiated maltreatment as specified in California Health and Safety Code Section 1522(b) while under the care and supervision of an FFA.</p> <p>CCLD citations, Out-of-Home Care Management Division and Probation PPQA reports on safety and physical plant deficiencies.</p> <p>Child-to-child injuries resulting from lack of supervision that necessitate the submission of a SIR and require treatment by a health professional</p>	<p>99.68 % of children are free from a report of substantiated maltreatment as specified in California Health and Safety Code Section 1522(b) while under the care & supervision of an FFA.¹</p>	<p>CWS/CMS referral history and I-Track Special Incident Reports (SIRs)</p> <p>CCLD Facility Review Reports and Citations, Monitoring Reports, SIR Reports and CAPs</p> <p>CCLD Facility Review Reports and Citations, Monitoring Reports, SIR Reports and CAPs</p>

¹The COUNTY maintains a zero tolerance policy for substantiated abuse and neglect of children while under the supervision of CONTRACTOR. Each incident of substantiated abuse or neglect that occurs under the CONTRACTOR'S supervision must be individually evaluated. The COUNTY will assess the factors that led to the abuse/neglect and make a determination as to appropriate corrective action.

* These outcome indicators and performance targets may change based on any subsequent requirements or guidance regarding performance expectations provided by CDSS or federal authorities. DCFS may also change the outcome indicators or adjust performance targets for future contract periods to maintain optimal levels of performance.

PERMANENCY PERFORMANCE OUTCOME SUMMARY*		
PROGRAM TARGET GROUP: Children in FFA Resource Family Approved Homes		
PROGRAM GOAL AND OUTCOME: Children shall achieve timely permanency through family reunification, adoption, or legal guardianship.		
OUTCOME INDICATORS	PERFORMANCE TARGETS	METHOD OF DATA COLLECTION
Discharge to a permanent destination, family reunification, adoption, or guardianship.	81.3% of discharges from an FFA to family reunification. 73.5% of discharges from a FFA to adoption, and legal guardianship. ²	CWS/CMS Placement History, Court Report, Child's Case File, Needs and Services Plan, and Discharge Summary
Placement stability: Number of children who experienced more than one move within the FFA in the past year.	At least 92.3% of children will maintain placement stability, with no moves between Resource Family Homes.	CWS/CMS Placement History, Court Report, Child's Case File, Needs and Services Plan, and Discharge Summary, SIRs

²This data will be collected by the Department's Business Information Services Division from the CWS/CMS database to ensure accuracy.

*These outcome indicators and performance targets may change based on any subsequent requirements or guidance regarding performance expectations provided by CDSS or federal authorities. DCFS may also change the outcome indicators or adjust performance targets for future contract periods to maintain optimal levels of performance.

<p align="center">ACCESS TO EFFECTIVE AND CARING SERVICES/WELL-BEING PERFORMANCE OUTCOME SUMMARY*</p>		
<p>PROGRAM TARGET GROUP: Children in FFA Resource Family Approved Homes</p>		
<p>PROGRAM GOAL AND OUTCOME: Children shall receive Core Services as identified through the Child and Family Team in the spirit of the Core Practice Model to improve their level of functioning in the areas of education/career planning, emancipation preparation, health, behavior, self-sufficiency, social and emotional well-being.</p>		
<p>OUTCOME INDICATORS</p>	<p>PERFORMANCE TARGETS</p>	<p>METHOD OF DATA COLLECTION</p>
<p>Child(ren) enrollment following immediate registration in school following the first day of placement, attending school regularly, achieving academic progress, and participating in supplemental education and extra-curricular activities³</p>	<p>At least 82.15% of school-aged children will be enrolled following the first day of and will have increased educational scores and/or attendance.</p>	<p>School Attendance Logs, Report Cards, Health and Education (HEP), Child's Case Files, Needs and Services Plan, CWS/CMS</p>
<p>Youth achieving high school graduation or equivalent upon Emancipation</p>	<p>At least 90% of age appropriate youth will emancipate with a high school diploma or equivalent.⁴</p>	<p>Report Cards, Diploma, Health and Education (HEP), Child's Case Files, Needs and Services Plan</p>

³CONTRACTOR shall document the reason(s) if a child was not enrolled in school following the first day of placement.

⁴CONTRACTOR shall document the reason(s) if a child did not achieve high school graduation or equivalency upon Emancipation.

*These outcome indicators and performance targets may change based on any subsequent requirements or guidance regarding performance expectations provided by CDSS or federal authorities. DCFS may also change the outcome indicators or adjust performance targets for future contract periods to maintain optimal levels of performance.

DISCHARGE SUMMARY FOR DCFS: FOSTER FAMILY AGENCY¹

1. What was the reason for the child's exit from the certified family home?

2. Who determined the child was ready to leave the certified family home?

3. Was the child discharged to Permanency?

Yes [] No []

If "yes," check one: Reunification [] Adoption [] Legal Guardian []

Provide the address to which the child was discharged, if available:

4. Was the child discharged according to their Permanency Plan?

Yes [] No []

5. Was the child discharged to a less restrictive environment?

Yes [] No []

If "yes" indicate whether to: Parent(s) [] Relative Home [] FFH []
SFH []²

6. Did the child meet their Needs and Services Plan goals prior to discharge?

ILP/Emancipation goals: Yes [] No []

Educational goals: Yes [] No []

Mental Health Treatment goals: Yes [] No []

7. What was the agency's assessment of the child's level of functioning upon discharge?

8. What was the Agency's recommendation for continued services for the child (individual/conjoint counseling, special education services, etc.)?

¹ For DCFS Placed Children, complete and send to DCFS Out of Home Care Management, Division Chief, 9320 Telstar Avenue, Suite 216, El Monte, CA 91731. For Probation youth, contact the Central Placement OHC Unit at (323) 226-8600.

² FFH (foster family home); SFH (small family home).

Child's Name:

Needs & Services Plan Form Index*Use CTRL+Home to return to this page***Form Sections****Needs & Services Sections**

- [Identifying Information](#)
- [Case Plan Goal](#)
- [Concurrent Case Plan Goal](#)
- [For Updated NSP Only—GH / FFA](#)
- [LARRC Criminogenic Factors \(Probation Cases\)](#)
- [Medical / Physical / Dental Health](#)

- [Mental Health](#)
- [NSP Treatment](#)
- [Education](#)
- [NSP Visitation](#)
- [Life Skills Training / Emancipation Preparation](#)
- [Outcome Goals](#)
- [Achieved Outcome Goals \(Continuous\)](#)
- [Signature Page](#)
- [Addendum](#)

Sections for Quarterly Updates

- [QUARTERLY—Adjustment to Placement](#)
- [QUARTERLY --Medical / Physical / Dental Clinical Visits](#)
- [QUARTERLY ---Mental Health Clinical Visits](#)
- [QUARTERLY—Educational Goals](#)
- [QUARTERLY—Quarterly Visitation /](#)
- [QUARTERLY—FFA Contact](#)
- [QUARTERLY—Life Skills Training and Emancipation Preparation](#)
- [QUARTERLY—Special Incident Reports](#)

Child's Name: _____

Los Angeles County Provider Needs and Services Plan / Quarterly Report

(Check all that are applicable)					Date of Report	
<input type="checkbox"/> Group Home <input type="checkbox"/> FFA <input type="checkbox"/> CTF <input type="checkbox"/> DCFS <input type="checkbox"/> Probation						
Child's Name: _____ D.O.B.: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female						
PDJ/Court Case #: _____						
Has Medi-cal/Medical # been received? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Medical #: _____						
If No, please explain: _____						
Attorney Name: _____					Phone #: _____	
Email Address: _____					Fax #: _____	
DPO/CSW Name: _____					Phone #: _____	
Email Address: _____					Fax #: _____	
FFA/GH Name: _____					Date of Admission: _____	
Address: _____						
GH/FFA/CTF Social Worker: _____					Phone #: _____	
Email Address: _____						
Certified Foster Parent's Name: _____						
Address: (If confidential, state) _____						
<input type="checkbox"/> Initial Plan	<input type="checkbox"/> Quarterly Report	Period From: _____		To _____	Date of Next NSP	
Date Agency Received Probation 1385 or DCFS 709: _____						
Reason for Placement: _____						
Planned Length of Placement: _____						
Qtrly Only Adjustment to Placement: _____						
Case Plan Goal (Permanency):					<input type="checkbox"/> See Addendum	
<input type="checkbox"/> Family Reunification <input type="checkbox"/> Adoption <input type="checkbox"/> Legal Guardianship <input type="checkbox"/> PPLA/Transition						
Comments: _____						
Reason for Modification to Permanency Plan (if applicable): _____						
Concurrent Case-Plan Goal (Permanency):					<input type="checkbox"/> See Addendum	
<input type="checkbox"/> Adoption <input type="checkbox"/> Legal Guardianship <input type="checkbox"/> PPLA/Transition <input type="checkbox"/> Family Finding Effort-Probation/DCFS						
Comments: _____						
Reason for Modification to Concurrent Case Plan (if applicable): _____						
For Updated NSP Only GH/FFA recommendation regarding the feasibility of the child's return to his/her home, placement in another facility or move into Independent Living.						

Child's Name:

(For Probation Cases only. Info provided by Probation)				Notes
Criminogenic Factors based on the Probation LARRC Assessment				
Factors and Sub-Factors	High	Moderate	Low	
1. Problem Behaviors & Substance Use				
1.1 Problem Behavior	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
1.2 Exposure to Risky Environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
1.3 Delinquent Orientation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
1.4 Substance Use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2. Family Factor				
2.1 Community Involvement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.2 Family Cohesion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.3 Parenting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2.4 Family Activities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3. Social Relationships Factor				
3.1 Social Relationship	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3.2 Social isolation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4. Academic Engagement Factor				
5. Self-Regulation Factor				
5.1 Stress Coping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.2 Self-management/concept	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Child's Name:

Medical / Physical / Dental Health	<input type="checkbox"/> See Addendum
Please list all (non-psychotropic) current medication prescribed to the youth (Dosage / frequency / duration):	
Does the youth require special medical devices? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain:	
Does the youth have special dietary needs or allergies? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain:	
Are immunizations current? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, please explain and indicate plan to bring current:	
Does youth have a current Health & Education Passport? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, please explain:	
Was the initial medical exam completed within the required time frame? <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____ If No, please explain:	
Was the initial dental exam completed within the required time frame? <input type="checkbox"/> Yes <input type="checkbox"/> No Date _____ If No, please explain:	

Child's Name: _____

Qtrly Only	Medical / Physical / Dental Health Clinical Visits	<input type="checkbox"/> See Addendum
Clinic Name: _____		
Physician Name: _____		
Address: _____		
Phone(s): _____		Fax: _____
Date(s) seen during reporting period	Outcomes and Follow-up	
1.	1.	
2.	2.	
3.	3.	
4.	4.	
Clinic Name: _____		
Physician Name: _____		
Address: _____		
Phone(s): _____		Fax: _____
Date(s) seen during reporting period	Outcomes and Follow-up	
1.	1.	
2.	2.	
3.	3.	
4.	4.	
Clinic Name: _____		
Physician Name: _____		
Address: _____		
Phone(s): _____		Fax: _____
Date(s) seen during reporting period	Outcomes and Follow-up	
1.	1.	
2.	2.	
3.	3.	
4.	4.	
Clinic Name: _____		
Physician Name: _____		
Address: _____		
Phone(s): _____		Fax: _____
Date(s) seen during reporting period	Outcomes and Follow-up	
1.	1.	
2.	2.	
3.	3.	
4.	4.	

Child's Name: _____

Mental Health	<input type="checkbox"/> See Addendum
Psychotropic Medication <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, date of PMA _____ Copy attached? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If No, please explain: _____	
Please list all current psychotropic medication prescribed to the youth (Dosage / frequency / duration) _____	

Qtrly Only	Mental Health Clinical Visits	<input type="checkbox"/> See Addendum
Clinic Name: _____		
Physician Name: _____		
Address: _____		
Phone(s): _____		Fax: _____
Date(s) seen during reporting period	Outcomes and Follow-up	
1.	1.	
2.	2.	
3.	3.	
4.	4.	

Clinic Name: _____		
Physician Name: _____		
Address: _____		
Phone(s): _____		Fax: _____
Date(s) seen during reporting period	Outcomes and Follow-up	
1.	1.	
2.	2.	
3.	3.	
4.	4.	

Clinic Name: _____		
Physician Name: _____		
Address: _____		
Phone(s): _____		Fax: _____
Date(s) seen during reporting period	Outcomes and Follow-up	
1.	1.	
2.	2.	
3.	3.	
4.	4.	

Clinic Name: _____		
Physician Name: _____		
Address: _____		
Phone(s): _____		Fax: _____
Date(s) seen during reporting period	Outcomes and Follow-up	
1.	1.	
2.	2.	
3.	3.	
4.	4.	

Child's Name:

NSP Treatment
Please list treatment services to be provided to youth and those who will participate. (Include transportation accommodations and whether your agency or an affiliated party will provide the services)
If no parental involvement, please explain:
If applicable, please list any special costs associated with the services to the youth and how your agency will accommodate this cost:

Child's Name:

Education		<input type="checkbox"/> See Addendum
<input type="checkbox"/> Not Applicable	Grade Level:	GPA:
Credits Earned:		
Name of Current School: _____		
Type of school: _____		
School address: _____		Phone: _____
Holder of Educational Rights: _____		Date enrolled in school: _____
If child was not enrolled within 3 school days of placement, please explain : _____		
Transportation arrangements to/from School: _____		
Are school records complete? <input type="checkbox"/> Yes <input type="checkbox"/> No if no, explain plans to obtain records: _____		
IEP attached? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		
Contents of or a copy of the report card(s) attached? <input type="checkbox"/> Yes <input type="checkbox"/> No		
School attendance information/records on file? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Identified educational needs, explain : Academic achievements and extra-curricular activities: (This may include outside extra-curricular activities such as dance classes, little league, music lessons). Strengths of the child: Participation in school-related activities by child and GH staff or Certified Foster Family: _____		
School behavior problems, school discipline and school suspensions: _____		
School officials' concerns about the child's health, academic abilities and social skills: _____		
Other issues of concern related to school matters: _____		
If a high school student, status of CAHSEE: _____		
Qtrly Only	Report progress of child's educational goals over the past three months. (If applicable, reference the goal number(s) from the Identified Outcome Goals Page)	

Child's Name:

NSP Visitation

Please indicate the visitation plan for parent(s), siblings, extended family members, and other significant adults, including frequency, transportation arrangements, any restrictions, etc.:

If applicable, please list any special costs associated with the services to the youth and how your agency will accommodate this cost:

This is for Quarterly Only

Visitation / Involvement / Contact with Family of Origin / Guardian

Describe child's visitation with his/her parent(s)/family of origin/guardian over the past three months.

Type: Phone _____
Dates/Frequency _____

Type: Face to Face at GH/FFA _____
Dates/Frequency _____

Type: Face to Face other location _____
Dates/Frequency _____

Have efforts been made to unite siblings who are placed under your care? Yes No
If No, please elaborate _____

Address participation of family and others in child's treatment program over the past three months. (Include dates)

Describe involvement of child with other individuals who are important to the child over the past three months. (Include dates)

Address the GH/FFA Contact with the CSW/DPO over the past three months. (Include dates)

Address FFA Social Worker Contact with Child over the past three months (For FFA only)

Type: Phone _____
Dates/Frequency _____
Relationship/Details _____

Type: Face to Face at CFH _____
Dates/Frequency _____
Relationship/Details _____

Type: Face to Face other location _____
Dates/Frequency _____
Relationship/Details _____

Child's Name:

Life Skills Training / Youth Development Preparation	
1) Is the youth able to manage his/her own money? <input type="checkbox"/> Yes <input type="checkbox"/> No Does youth have/maintain bank account <input type="checkbox"/> Yes <input type="checkbox"/> No	Please explain: Comments: <input style="width: 95%;" type="text"/>
2) Is the youth able to leave the facility / home without adult supervision? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please outline specific conditions:	Comments: <input style="width: 95%;" type="text"/>
3) Is the youth able to have unsupervised time in the home? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide explanation:	Comments: <input style="width: 95%;" type="text"/>
4) Does the youth need assistance (other than age appropriate) with personal care/grooming? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:	Comments: <input style="width: 95%;" type="text"/>
5) Does youth's current clothing meet standards? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, please explain:	Comments: <input style="width: 95%;" type="text"/>
6) Is youth 14 or over? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please answer a through e:	
a) Please list any ILP Services, Youth Development Services, or Life Skills Training received by the youth:	Comments: <input style="width: 95%;" type="text"/>
b) Is the most recent copy of the TILP attached? <input type="checkbox"/> Yes <input type="checkbox"/> No Date of TILP _____	Comments: <input style="width: 95%;" type="text"/>
c) What is the youth's post High School plan?	Comments: <input style="width: 95%;" type="text"/>
d) Is the youth currently employed or seeking employment? <input type="checkbox"/> Yes <input type="checkbox"/> No	Comments: <input style="width: 95%;" type="text"/>
e) Describe transportation arrangements for youth to participate in ILP and/or employment	Comments: <input style="width: 95%;" type="text"/>
Qtrly Only	Report progress of child's Life Skills Training/Youth Development Preparation goals over the past three months. If applicable, reference the goal number(s) from the Identified Outcome Goals Page

Child's Name:

Qtrly Only	Number of Special Incidents Reports (SIRs) over the past three months:		
Type of Special Incidents Reports (SIRs) over the past three months:		# of Special Incidents	
Behavioral/Mental Health Incident			
Injury, Illness, or Accident			
Death			
Unauthorized Absence			
Alleged Child Abuse			
Agency Emergency/Disaster			
Significant Change in Agency			
Other			
Comments:			

Child's Name:

Outcome Goals			
Outcome Goal — #1 Select One	Start Date	Modified Date	Projected Completion Date
Please report on the Specific Goal/Modified Goal.			
Reason for Goal: (note the problem, need, or deficit to be addressed)			
Specific Goal/Modified Goal:			
Plan and Services:			
Method:			
Person(s) Responsible:			
Reason(s) for Modification:			
Outcome Goal — #2 Select One	Start Date	Modified Date	Projected Completion Date
Please report on the Specific Goal/ Modified Goal.			
Reason for Goal (note the problem, need, or deficit to be addressed):			
Specific Goal/Modified Goal:			
Plan and Services:			
Method:			
Person(s) Responsible:			
Reason(s) for Modification:			
Outcome Goal — #3 Select One	Start Date	Modified Date	Projected Completion Date
Please report on the Specific Goal/Modified Goal.			
Reason for Goal (note the problem, need, or deficit to be addressed):			
Specific Goal/Modified Goal:			
Plan and Services:			
Method:			
Person(s) Responsible:			
Reason(s) for Modification:			
Outcome Goal — #4 Select One	Start Date	Modified Date	Projected Completion Date
Please report on the Specific Goal/Modified Goal.			
Reason for Goal (note the problem, need, or deficit to be addressed):			
Specific Goal/Modified Goal:			
Plan and Services:			
Method:			
Person(s) Responsible:			
Reason(s) for Modification:			

Child's Name:			
Outcome Goals (Continuous)			
Outcome Goal — #5 Select One	Start Date	Modified Date	Projected Completion Date
Please report on the Specific Goal/Modified Goal.			
Reason for Goal: <i>(note the problem, need, or deficit to be addressed):</i>			
Specific Goal/Modified Goal:			
Plan and Services:			
Method:			
Person(s) Responsible:			
Reason(s) for Modification:			
Outcome Goal — #6 Select One	Start Date	Modified Date	Projected Completion Date
Please report on the Specific Goal/ Modified Goal.			
Reason for Goal <i>(note the problem, need, or deficit to be addressed):</i>			
Specific Goal/Modified Goal:			
Plan and Services:			
Method:			
Person(s) Responsible:			
Reason(s) for Modification:			
Outcome Goal — #7 Select One	Start Date	Modified Date	Projected Completion Date
Please report on the Specific Goal/Modified Goal.			
Reason for Goal <i>(note the problem, need, or deficit to be addressed):</i>			
Specific Goal/Modified Goal:			
Plan and Services:			
Method:			
Person(s) Responsible:			
Reason(s) for Modification:			
Outcome Goal — #8 Select One	Start Date	Modified Date	Projected Completion Date
Please report on the Specific Goal/Modified Goal.			
Reason for Goal <i>(note the problem, need, or deficit to be addressed):</i>			
Specific Goal/Modified Goal:			
Plan and Services:			
Method:			
Person(s) Responsible:			
Reason(s) for Modification:			

Child's Name:

Achieved Outcome Goals		
Outcome Goal — #1 Select One	Start Date	Date Goal Achieved
Please indicate the Goal. Goal:		
Outcome Goal — #2 Select One	Start Date	Date Goal Achieved
Please indicate the Goal. Goal:		
Outcome Goal — #3 Select One	Start Date	Date Goal Achieved
Please indicate the Goal. Goal:		
Outcome Goal — #4 Select One	Start Date	Date Goal Achieved
Please indicate the Goal. Goal:		
Outcome Goal — #5 Select One	Start Date	Date Goal Achieved
Please indicate the Goal. Goal:		
Outcome Goal — #6 Select One	Start Date	Date Goal Achieved
Please indicate the Goal. Goal:		
Outcome Goal — #7 Select One	Start Date	Date Goal Achieved
Please indicate the Goal. Goal:		
Outcome Goal — #8 Select One	Start Date	Date Goal Achieved
Please indicate the Goal. Goal:		

Child's Name: _____

Signature Page

Report prepared by: _____ / _____
Name/Title

Signature

Signatures:

I have received a copy of the report:

Youth (if appropriate) Date

Parent (If applicable) Date

Parent (If applicable) Date

FFA/Group Home Social Worker Date

FFA/Group Home approval signature (if necessary) Date

Certified Foster Parent (if applicable) Date

DPO/CSW Date

Date

Date

Copy of Plan/Quarterly Report emailed ON _____ or handed to (DPO/CSW) ON _____
Date Date

If unable to obtain DPO/CSW Signature, attach documented efforts made to obtain the signature.

Child's Name:

<u>Addendum</u>
<i>Click here to type addendum.</i>

**County of Los Angeles - Department of Children and Family Services (DCFS)
Out-of-Home Care Management Division (OHCMD) & Probation Department
(Probation) Placement Permanency & Quality Assurance (PPQA)**

CHILD WELFARE HISTORY REVIEW FORM

INSTRUCTIONS

A Foster Family Agency (FFA) must conduct a reference check for each applicant prior to the approval of a Resource Family for placement of Los Angeles (LA) County children, in accordance to Health and Safety Code (HSC) 1517.2. The Los Angeles County Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) and the Probation Department (Probation) Placement Permanency & Quality Assurance (PPQA) shall collaborate with the FFA to evaluate the appropriateness of all new Resource Family Approval (RFA) applicant(s) in the home in order to determine if the home is a suitable placement resource for children supervised by LA County, in accordance with Health and Safety Code 1517(h), which allows the County to provide data contained in the statewide child welfare database to help the FFA determine whether it is safe and appropriate to approve an applicant to be a resource family. The following information must be provided to the assigned OHCMD Quality Assurance (QA) Manager or PPQA Manager for all new Resource Family Approval applicant(s). Based on the information provided, the assigned QA Manager shall provide the FFA with information relevant to the applicant(s) from the statewide child welfare database to help the FFA, as part of the applicant(s) Comprehensive Assessment, and make a determination on the suitability of the applicant(s) ability to provide care and supervision of LA County children/youth requiring out-of-home placement. The FFA shall be provided the information within five (5) to ten (10) business days of the QA Manager's receipt of this form. No Los Angeles County child(ren) shall be placed with the Resource Family until the FFA has completed the RFA process as indicated in Chapter 8.8, Foster Family Agencies, Articles 9, and Subchapter 1, in the Interim Licensing Standards commencing with Section 88330. A copy of this form must be retained in the RFA Home's file and kept by the Agency for future use.

PLEASE NOTE: Every Child Welfare History Review Form submitted must also include a signed **Release of Information** Form for each RFA applicant in the RFA Home.

Child welfare history results are to be used as part of the FFA's Comprehensive Assessment of the prospective resource family and shall not solely be used to deny or approve a Resource Family Home.

**County of Los Angeles - Department of Children and Family Services (DCFS)
Out-of-Home Care Management Division (OHCMD) & Probation Department
(Probation) Placement Permanency & Quality Assurance (PPQA)**

FFA/GH and STRTP Quality Assurance Section

CHILD WELFARE HISTORY REVIEW FORM

(Please type or print legibly)

Agency Name and Location: _____

Date: _____

Prospective Resource Parents (RP)	RP #1	RP #2
First Name		
Middle Name		
Last Name		
Maiden Name		
Other Names Used <input type="checkbox"/> Not Applicable	1. 2. 3. 4.	1. 2. 3. 4.
Date of Birth		
California Driver License # or, if no Driver License, California Identification # or Military Identification #		
Current Address		
Prior Address(es) within the last 5 Years	1. 2. 3. 4.	1. 2. 3. 4.

<p>Have you ever been approved/certified by another FFA, licensed by a County or State as a Resource/Foster Parent?</p> <p>If yes, list all agencies (including Out-of-County agencies), year of approval/certification and County or State where you were approved/certified or licensed as a Resource/Foster Parent.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>1. 2. 3.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>1. 2. 3.</p>
<p>If decertified or your approval was rescinded before, please provide FFA Name(s) and reason for decertification/rescission (attach additional page, if needed).</p>	<p><input type="checkbox"/> N/A</p> <p>1. 2.</p>	<p><input type="checkbox"/> N/A</p> <p>1. 2.</p>
<p>Have you ever been investigated for abuse or neglect allegations of any children (e.g. biological, adopted, legal guardian or foster parent)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

This Section Pertains to the Minor Children of the Resource Parent(s)

Children's Names	#1	#2
First Name		
Middle Name		
Last Name		
Date of Birth		
Relationship	<input type="checkbox"/> Birth <input type="checkbox"/> Adopted <input type="checkbox"/> Step Child <input type="checkbox"/> Legal Gdn <input type="checkbox"/> NREFM	<input type="checkbox"/> Birth <input type="checkbox"/> Adopted <input type="checkbox"/> Step Child <input type="checkbox"/> Legal Gdn <input type="checkbox"/> NREFM

(Please attach additional page, if needed)

I (we) declare under penalty of perjury that I (we) understand the above questions and that the responses and accompanying attachments I (we) am (are) providing are true and correct.

 Resource Parent # 1 signature Date

 Resource Parent # 2 signature Date

I have reviewed the documentation provided and discussed the above information with the Resource Parent(s). I have received a signed release of information for every Resource Parent(s) and any other identified adult(s), which is/are attached to this form.

 Print name and Title of FFA Representative

 Signature of FFA Representative Date

**County of Los Angeles - Department of Children and Family Services
Out-of-Home Care Management Division (OHCMD)
FFA/STRTP/GH Quality Assurance Section**

CHILD WELFARE HISTORY REVIEW RESULTS

Date:

Agency:

DCFS OHCMD/Probation Technical Assistance Specialist:

Name of Prospective Resource Parent(s) including AKAs:

- Prospective Resource Parent is a DCFS employee
- Child Welfare History Review completed. No concerns noted as of (Date)

- Current placement hold
- Concerns Noted
- Not to be used as a placement resource for LA County DCFS children

Child Abuse/Neglect Referral History

Physical Abuse				
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #
Sexual Abuse				
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #
Emotional Abuse				
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #
Caretaker Absence/Incapacity				
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #
Severe Neglect				
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #
General Neglect				
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #
Other:				
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #

Child Welfare History Review Summary

Please Note: The CWS/CMS referral history search may not include undisclosed aliases, misspelled names or information not populated in CWS/CMS. It is the responsibility of the FFA to assess for appropriateness of its' resource families. Child Welfare History Results are to be used as part of the FFA's Comprehensive Assessment of the prospective resource family and shall not solely be used to deny or approve a Resource Family Home.

CHILD WELFARE HISTORY REVIEW FORM

INSTRUCTIONS

A Foster Family Agency (FFA) must conduct a reference check for each applicant prior to the approval of a Resource Family for placement of Los Angeles (LA) County children, in accordance to Health and Safety Code (HSC) 1517 and Welfare Institute Code (WIC) 16519.5. The Los Angeles County Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) shall collaborate with the FFA to evaluate the appropriateness of all new Resource Family Approval (RFA) applicant(s) in the home in order to determine if the home is a suitable placement resource for children supervised by LA County, in accordance with Health and Safety Code 1517(h), which allows the County to provide data contained in the statewide child welfare database to help the FFA determine whether it is safe and appropriate to approve an applicant to be a resource family. The following information must be provided to the assigned OHCMD Quality Assurance Section (QA) Manager. Based on the information provided, the assigned QA Manager shall provide the FFA with information relevant to the applicant(s) from the statewide child welfare database to help the FFA, as part of the applicant(s) Comprehensive Assessment, and make a determination on the suitability of the applicant(s) ability to provide care and supervision of LA County children/youth requiring out-of-home placement. The FFA shall be provided the information for up to two adults within ten (10) business days or within fifteen (15) business days for more than two adults from the time of the QA Manager's receipt of the Child Welfare History Review form. No Los Angeles County child(ren) shall be placed with the Resource Family until the FFA has completed the RFA process as indicated in Chapter 8.8, Foster Family Agencies, Articles 9, and Subchapter 1, in the Interim Licensing Standards commencing with Section 88330. A copy of this form must be retained in the RFA Home's file and kept by the Agency for future use.

PLEASE NOTE: Every Child Welfare History Review Form submitted must also include a signed **Release of Information** Form, that is effective for 12 months, for each RFA applicant in the RFA Home.

Child welfare history results are to be used as part of the FFA's Comprehensive Assessment of the prospective resource family and shall not solely be used to deny or approve a Resource Family Home.

FFA and STRTP Quality Assurance Section
CHILD WELFARE HISTORY REVIEW FORM
(Please type or print legibly)

Agency Name and Location: _____

Date: _____

Prospective Resource Parents (RP)	RP #1	RP #2
First Name		
Middle Name		
Last Name		
Maiden Name		
Other Names Used <input type="checkbox"/> Not Applicable	1. 2. 3. 4.	1. 2. 3. 4.
Date of Birth		
California Driver License # or, if no Driver License, California Identification # or Military Identification #		
Current Address		
Prior Address(es) within the last 5 Years	1. 2. 3. 4.	1. 2. 3. 4.

<p>Have you ever been approved/certified by another FFA, licensed by a County or State as a Resource/Foster Parent?</p> <p>If yes, list all agencies (including Out-of- County agencies), year of approval/certification and County or State where you were approved/certified or licensed as a Resource/Foster Parent.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>1. 2. 3.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>1. 2. 3.</p>
<p>If decertified or your approval was rescinded before, please provide FFA Name(s) and reason for decertification/rescission (attach additional page, if needed).</p>	<p><input type="checkbox"/> N/A</p> <p>1. 2.</p>	<p><input type="checkbox"/> N/A</p> <p>1. 2.</p>
<p>Have you ever been investigated for abuse or neglect allegations of any children (e.g. biological, adopted, legal guardian or foster parent)</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

This Section Pertains to All Adults or Regularly Present Adults in the Home

Other Adult(s) in the Home	Other Adult #1	Other Adult #2
First Name		
Middle Name		
Last Name		
Maiden Name		
Other Names Used		
Date of Birth		
Relationship to Applicant		
Prior Address(es) within last 5 Years	<p>1. 2. 3. 4.</p>	<p>1. 2. 3. 4.</p>
<p>Has the adult residing in the home ever been certified by another FFA or licensed by a County or State as a foster parent?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, list all agencies including Out-of-County agencies, year of certification and County or State where the adult was licensed as a Foster Parent:</p> <p>1.</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, list all agencies including Out-of-County agencies, year of certification and County or State where the adult was licensed as a Foster Parent:</p> <p>1.</p>

	2. 3.	2. 3.
If decertified before, please give name(s) of the FFA(s) and reason for decertification (please attach additional page, if needed).	1. 2. 3.	1. 2. 3.

(Please attach additional page(s) if needed)

This Section Pertains to the Minor Children of the Resource Parent(s)

Children's Names	#1	#2
First Name		
Middle Name		
Last Name		
Date of Birth		
Relationship	<input type="checkbox"/> Birth <input type="checkbox"/> Adopted <input type="checkbox"/> Step Child <input type="checkbox"/> Legal Gdn <input type="checkbox"/> NREFM	<input type="checkbox"/> Birth <input type="checkbox"/> Adopted <input type="checkbox"/> Step Child <input type="checkbox"/> Legal Gdn <input type="checkbox"/> NREFM

(Please attach additional page(s), if needed)

I (we) declare under penalty of perjury that I (we) understand the above questions and that the responses and accompanying attachments I (we) am (are) providing are true and correct.

Resource Parent # 1 signature Date

Resource Parent # 2 signature Date

I have reviewed the documentation provided and discussed the above information with the Resource Parent(s). I have received a signed release of information for every Resource Parent(s) and any other identified adult(s), which is/are attached to this form.

Print name and Title of FFA Representative

Signature of FFA Representative Date

**County of Los Angeles - Department of Children and Family Services
Out-of-Home Care Management Division (OHCMD)
FFA/STRTP Quality Assurance Section**

CHILD WELFARE HISTORY REVIEW RESULTS

Date:

Agency:

DCFS OHCMD/Probation Technical Assistance Specialist:

Name of Prospective Resource Parent(s) including AKAs:

Name of Adult Household member(s) including AKAs:

Name of Alternate Caregiver(s) including AKAs:

- Prospective Resource Parent/Adult is a DCFS employee
- Child Welfare History Review completed. No concerns noted as of (Date)

- Current placement hold
- Concerns Noted
- Not to be used as a placement resource/caregiver for LA County DCFS children

Child Abuse/Neglect Referral History

Physical Abuse					
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #	
Sexual Abuse					
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #	
Emotional Abuse					
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #	
Caretaker Absence/Incapacity					
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #	
Severe Neglect					
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #	
General Neglect					
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #	
Other:					
<input type="checkbox"/> Substantiated #	<input type="checkbox"/> Inconclusive #	<input type="checkbox"/> Unfounded #	<input type="checkbox"/> Evaluated Out #	<input type="checkbox"/> Disposition Pending #	

Child Welfare History Review Summary

Please Note: The CWS/CMS referral history search may not include undisclosed aliases, misspelled names or information not populated in CWS/CMS. It is the responsibility of the FFA to assess for appropriateness of its' resource families. Child Welfare History Results are to be used as part of the FFA's Comprehensive Assessment of the prospective resource family and shall not solely be used to deny or approve a Resource Family Home.

FOSTER FAMILY AGENCY PLAN OF OPERATION AND PROGRAM STATEMENT

TRANSFER OF MEDICATION FORM

CHILD'S INFORMATION

Name: _____ DOB: _____
Date of Termination/Placement Move: _____

ASSIGNED COUNTY WORKER

County Worker (Indicate DCFS/Probation): _____
Contact Phone Number: _____

PERSON TRANSFERRING MEDICATION*

Agency Representative/Title: _____
Name of Agency (Indicate FFA/STRTP): _____
Address: _____
Contact Phone Number: _____

PERSON RECEIVING MEDICATION

Name/Title: _____
Name of Agency, if applicable (Indicate FFA/STRTP/County): _____
Address: _____
Contact Phone Number: _____

MEDICATION INFORMATION

Medication Name: _____
Dosage (Quantity/Frequency): _____
Date Prescribed: _____ Prescribing Physician: _____
Date last seen by Psychiatrist: _____
How many days of medication left? _____ How many refills left? _____
Pharmacy/Address: _____
Most Recent Psychotropic Medication Authorization (PMA) Date (provide receiving party a copy of PMA, if available): _____
Please describe any significant side effects (Provide Receiving Party copies of the JV 218 form – Child's opinion about the medicine and the JV 219 form - Statement about medicine prescribed, if available): _____

Print Name of Person Transferring Medication Signature of Person Transferring Medication Date

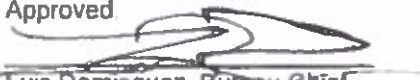
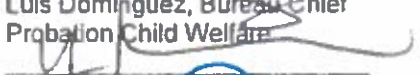


Print Name of Person Receiving Medication Signature of Person Receiving Medication Date

*The person responsible for transferring medication must provide a completed copy of this form to the case carrying County Worker

INSERT - ADOPTION LICENSE

Los Angeles County

**PLACEMENT
COORDINATING
MEMORANDUM**

No. 2017-02	Page 1 of 5
Original Date: November 9, 2017	
Reissue Date	
Approved:	
 Luis Dominguez, Bureau Chief Probation, Child Welfare	
 Kym Renner, Deputy Director Department of Children & Family Services	
 Robert Byrd, District Chief Department of Mental Health	
 Lenora Scott, Regional Manager Community Care Licensing	

**Transgender Children/Non-Minor Dependents (NMDs)
in Out-of-Home Care**

Overview

This memorandum provides clarification on the placement requirements for transgender children/NMDs placed in out-of-home care based on legislation, SB 731, passed in October 2015. This legislation requires that children/NMDs be given the option to be placed according to the gender identified by the youth. A child/NMD identifying as transgender is confidential information, including from parents/caregivers. Refer to your agency's existing policy on child/NMD confidentiality.

Placement Decisions

Placement decisions will be made based upon the Interagency Placing Committee (IPC) and the Child and Family Team (CFT) meetings. Self-identification is going to be a fluid process, which may occur before, during, or after being placed. Not all transgender children/NMDs will want to be placed based on their gender identity. However, some children/NMDs will be clear in their desire and must be placed accordingly. As per legislation, the intake process must include assessment of all the child's/NMD's placement needs, not solely based on the child's/NMD's gender identity.

With regards to room assignments, a child's/NMD's gender identity should not be the only deciding factor. Best practice is to ask the child/NMD whether they feel more comfortable sharing a room with male- or female-identified roommate(s). Roommate compatibility

assessments should be completed routinely. SB 731 policy shall be provided to children/NMDs and parents/caregivers at orientation.

A transgender child's/NMD's identity is confidential information. Staff may not divulge this information to anyone, including a transgender child's/NMD's roommate, without the transgender child's/NMD's express permission to do so. The placement agency can advocate for rooming assignments based on the needs of the child/NMD.

Training

All staff in any capacity must meet the Continuum of Care Reform (CCR) Interim Licensing Standards (ILS), which includes cultural competency, sensitivity and best practices for caring for children/NMDs identified as transgender. All program and clinical staff that engage with the child/NMD throughout the course of their therapeutic program must be trained on how to engage children/NMDs with cultural competency that is specifically considerate of transgender children/NMDs, as well as having an understanding of the process of gender identification and the various stages of gender transition (e.g. social, medical).

Case Planning and the Child and Family Team (CFT)

The CFT will drive the case planning process and ensure that significant connections are included in the plan for the child/NMD. The CFT will ensure that parents/caregivers have sufficient services, support and resources to meet the needs of the child/NMD in their care. The CFT will assist with accessing these supportive services and resources. In addition, it will provide and facilitate whatever additional expertise is necessary to form and/or maintain healthy relationships between parents/caregivers and transgender children/NMDs, including advocacy and education of outside parties (e.g. educational, legal, medical).

Acceptance from parents/caregivers of the child's/NMD's gender identity may vary and can be a fluid process. The CFT will work with the agency in protecting the transgender child/NMD from potential rejection experiences in out-of-home care. The goal of the case planning process is to be supportive of the child/NMD, their peers, and parents/caregivers wherever they may be in their own process.

Anytime there is a change in placement based on the transgender child's/NMD's housing need, the CFT will work closely in the transfer of the child/NMD. Personnel from both the current placement and the potential new placement will closely collaborate prior to and during the transfer to ensure continuity of care.

Gender-Affirming Medical Care

When possible and appropriate, parent(s)/legal guardian(s) should be involved in the child's/NMD's medical care. Children 12 years of age and older can receive hormone

therapy, including but not limited to: hormone blockers, and hormone replacement therapy; however, parental or court consent is required, with limited exceptions (Family Code 6922). Should the child request gender affirming care, the agency shall have the child/NMD assessed by a qualified licensed medical practitioner, as soon as possible, preferably one with competency in working with transgender children/NMDs. If any child/NMD placed is already in the process of transitioning through the use of hormones, the agency may need legal approval (parental or court) for continued treatment and must obtain medical advice, guidance, and clearance for formal prescriptions, all of which the agency must ensure is in compliance with the agency's medical protocols and the physician treatment plan. Surgical treatment under 18 years of age related to their gender identity will be assessed by a qualified licensed medical practitioner.

In the event that the medical professional recommends gender-affirming medical care, or the youth expresses the desire for gender-affirming medical care and the parent(s)/legal guardian(s) do not give consent, a court hearing date shall be immediately requested to approve the medical care.

Name Changes and Use of Pronouns

Transgender children/NMDs may choose a name and pronoun to be used at the facility that reflects their gender identity, even if their name has not been legally changed and/or legal documentation has not been updated. Agencies shall develop policy which requires staff and residents to address transgender children/NMDs using their chosen name and gender pronouns. A child/NMD's personal rights shall be respected; misgendering and use of derogatory terms must be addressed based on the agency's respective policies.

A transgender child's/NMD's chosen name and/or pronoun shall be included on all documents, unless the child/NMD requests otherwise. On all legal documents, the child/NMD will be referred to by their legal name, along with the child's/NMD's chosen name as an AKA, with the preferred name emphasized in order to minimize confusion as to which name to use. In limited circumstances, different arrangements may be made, if necessary, to ensure the safety and privacy of a transgender child/NMD. The CFT can be utilized to access resources regarding petitions to the court to legally change the child's/NMD's name and/or gender.

Bathroom/Shower Use

Transgender children/NMDs have the right to access bathrooms and showers that align with their gender identity, regardless of sex assigned at birth, and/or legal documentation. Safety planning and prudent parenting standards shall be utilized for transgender children/NMDs regarding the use of bathrooms and showers. Alternative arrangements should *only* be made at the request of the child/NMD; transgender children/NMDs shall not be compelled to use alternative bathrooms/showers. Prudent Parenting standards should apply when the child's/NMD's needs may put them in danger. Alternative arrangements may include, but are not limited to:

- a. Accessibility of single stall, gender neutral bathrooms, and/or private showers.
- b. Staff supervision during use of communal bathrooms/showers.
- c. Separate shower schedule for transgender children/NMDs.

Definitions

Gender Identity: Each person's internal understanding of their gender, or the perception of a person's gender identity, which may include male, female, a combination of male and female, neither male nor female, a gender different from the person's sex assigned at birth, or transgender.

Misgendering: Referring to a person by a name or pronoun with which they do not identify.

Transgender: A person whose gender identity does not correspond with his or her sex assigned at birth.

Governing Statutes

Health and Safety Code (HSC) Section 1502.8 - The department shall adopt regulations consistent with paragraph (24) of subdivision (a) of Section 16001.9 of the Welfare and Institutions Code.

HSC Section 1529.2 – States, in part, that:

The right of a foster child to have fair and equal access to all available services, placement, care, treatment, and benefits, and to not be subjected to discrimination or harassment on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity, mental or physical disability, or HIV status.

HSC Section 124260 – States, in part, that a minor who is 12 years of age or older may consent to mental health treatment or counseling services if, in the opinion of the attending professional person, the minor is mature enough to participate intelligently in the mental health treatment or counseling services.

Welfare and Institutions Code (WIC) Section 16001.9 – States, in part, that all minors and non-minors in foster care shall have the following rights:

(23) To have fair and equal access to all available services, placement, care, treatment, and benefits, and to not be subjected to discrimination or harassment on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity, mental or physical disability, or HIV status.

(24) To be placed in out-of-home care according to their gender identity, regardless of the gender or sex listed in their court or child welfare records.

(25) To have caregivers and child welfare personnel who have received instruction on cultural competency and sensitivity relating to, and best practices for, providing adequate care to lesbian, gay, bisexual, and transgender youth in out-of-home care.

WIC Section 16006 – Children and Non-Minor Dependents in out-of-home care shall be placed according to their gender identity, regardless of the gender or sex listed in their court or child welfare records.

Interim Licensing Standards Short-Term Residential Treatment Program, Articles 1 Through 10, California Department of Social Services Version 2: 01/27/17 Effective 01/27/17 -

Article 7 Physical Environment

87087. Buildings and Grounds

(a) In addition to Section 80087, the following shall apply.

(b) Bedrooms shall meet, at a minimum, the following requirements:

(1) Not more than two children shall share a bedroom.

(2) Bedrooms shall be large enough to allow for easy passage and comfortable use of any required assistive devices, including but not limited to wheelchairs, between beds and other items of furniture.

(3) Children of different sexes shall not share a bedroom unless:

(A) A minor parent is sharing a bedroom with the minor parent's child of the opposite sex.

(B) Each child is under five years of age, or

(C) A licensee is permitting a child to share a bedroom consistent with their gender identity regardless of the gender or sex listed on the court or child welfare.

Title 22, Division 6, Chapter 5, Article 7, Section 84087 – Buildings and Grounds Requirements for Group Homes

Title 22, Section 84065.2 Personnel Duties – States, in part, that:

(c) Social work staff shall complete or assist in the completion of the following for each child:

(1) An intake study, as specified in Section 84068.1.

MEDICAL EXAMINATION FORM – INSTRUCTIONS

Please refer to the CONSENT & MEDICAL RECORD PROCEDURES FOR FOSTER CAREGIVERS on the reverse side of this form. (To be completed by CSW/Caregiver. Please print legibly.)

- Infants (0-36 months) or "High Risk" children must be medically examined within ten (10) days of initial placement, or sooner if medically required or recommended. "High Risk" includes one or more of the following conditions exists: a past or present significant medical problem or chronic illness; possible contagious disease; on medication; and/or a social problem (e.g., language barrier) which might conceal an unmet medical need.
- Child must have medical exam within thirty (30) days of initial placement.
- Child needs annual/age-appropriate medical exam by _____.

CHILD's NAME: _____ DOB: _____ CASE #: _____ DATE PLACED: _____

CAREGIVER: _____ (Phone) _____ (FFA) _____ (Phone) _____

CSW: _____ (File #) _____ (Phone) _____ (Fax) _____

Medical data entered into CWS/CMS by: (Name) _____ (Date) _____

MEDICAL EXAMINATION FORM (To be completed by Doctor.)

PHYSICAL EXAMINATION

***PLEASE SEE PAGE 2 FOR DEVELOPMENTAL SCREENING DOCUMENTATION**

Doctor is a CHDP provider? Yes No Was child tested for lead poisoning? Yes No

Date of Physical Examination: _____ Name of Doctor: _____

- Initial CHDP/CHDP-equivalent examination.
- Annual/age-appropriate CHDP/CHDP-equivalent examination.
- Other/Follow-up visit.
- Doctor's own exam form or PM 160 attached. If not attached, complete below.
- Condition and treatment were explained to the caregiver and child/youth (as age appropriate).
- Youth may self administer his/her own medication with adult supervision.
- Youth is authorized to self administer his/her own medication.

Physical Exam results: Age: (Yrs.): (Mos.): (Wks.) Height: % Weight: %
Body Mass Index (BMI) Score: Body Mass Index %
 (May be continued on additional pages in necessary. If so, provider must date and sign second page.)

(Treatment given; Medications Prescribed. Please attach copies of supporting documentation; test results, etc.)

If follow-up care indicated, specify: _____

Immunizations given: _____
 (If appropriate, complete immunization Record)

Signature of Health Care Provider: _____ (Date) _____
 (Doctor, Nurse Practitioner, Physician's Assistant)

Address: _____ Phone: _____



CONSENT (Caregiver is a Foster Parent, Relative, Group Home, or FFA).

DCFS 561(a) (Rev. 1/2017) MEDICAL EXAMINATION FORM

Leave several forms with the caregiver when the child is initially placed. Make photocopy of completed/signed original and provide photocopy to caregiver. File the completed/signed original in the Psychological/Medical/Dental folder.

Consent of the parent or guardian (via the DCFS 179) or court authorization must be obtained prior to having the child undergo any medical, dental and mental health screenings and examinations. CSWs or Caregivers must inform the parents of the date, time and location of the exam, and inform the parent of the opportunity to be present. It is not necessary to reschedule the exam if the parent does not respond or if the parent cannot attend. Notice may be provided orally, text, email, mail, in-person, or by leaving a message on the parent's phone. It is necessary to reschedule the exam if:

- The parent objects to the exam, even if the parent previously gave consent
- The parent never signed the DCFS 179 providing consent
- There's no court order for the exam

MEDICAL RECORD PROCEDURES FOR FOSTER CAREGIVERS

The HEALTH & EDUCATION PASSPORT (HEP) BINDER accompanies each child at the time of placement. The Children's Social Worker (CSW) will review the HEP BINDER with you at each visit. The Health and Education Passport must be taken to all medical visits, including the initial examination visit. The health care provider must record all current medical services on the DCFS 561(a). Please add completed forms to the child's HEP BINDER. **If the child is removed from your care, the child's complete HEP BINDER, including the Immunization Record, shall be returned to the CSW at the time of removal, as the HEP BINDER must accompany the child upon replacement.**

Immediately notify the child's CSW (or Supervising CSW, if the CSW is unavailable) when there is any change in the child's mental, medical and/or dental health that required urgent medical care.

Please use the Child Health and Disability Prevention (CHDP) Program for medical and dental examinations. Please refer to the following CHDP periodicity schedule. For more information on the CHDP program please refer to the CHDP brochure in the HEP BINDER.

HEALTH CARE EXAMINATIONS PERIODICITY SCHEDULE

Infants (0-36 months) or "High Risk" children must be medically examined within ten (10) days of initial placement, or sooner if medically required or recommended. Foster children four (4) years of age and older who are not considered high risk, must have a medical examination within 30 days of the initial placement. Children are also to have immunizations according to the current Recommended Childhood Immunization Schedule.

Inform the CSW of all medical appointments as soon they have been made including the date, time and location.

Children must receive CHDP program or CHDP program equivalent medical examinations, at a minimum, as follows:

- Children under one (1) month need an examination
- Children two (2) to six (6) months need an examination every two (2) months, for a total of three (3) exams
- Children seven (7) to eighteen (18) months need quarterly (every 3 months) examinations, for a total of four (4) exams
- Children nineteen (19) to thirty (30) months need one examination every six (6) months, for a total of two (2) examinations
- Children three (3) to twenty-one (21) years need annual (yearly) examinations

***DEVELOPMENTAL SCREENING INFORMATION** (to be completed by Health Care Provider)

- Developmental Screening Completed?: Yes No
- If Yes, what type: Ages & Stages Questionnaire
 PEDS
 Denver Developmental Screen
 Other: _____
- Developmental Screen Concerns?: Yes No
- Developmental Screen Comments: _____

DENTAL EXAMINATION FORM – INSTRUCTIONS

CONSENT (Caregiver is a Foster Parent, Relative, Group Home, or FFA).

Consent of the parent or guardian (via the DCFS 179) or court authorization must be obtained prior to having the child undergo any dental screenings and examinations. CSWs or Caregivers must inform the parents of the date, time and location of the exam, and inform the parent of the opportunity to be present. It is not necessary to reschedule the exam if the parent does not respond or if the parent cannot attend. Notice may be provided verbally, by text, email, mail, in-person, or voicemail. The exam must be rescheduled under either of the following circumstances:

- The parent objects to the exam, even if the parent previously gave consent
- The parent never signed the DCFS 179 providing consent or there is no court order for the exam.

MEDICAL RECORD PROCEDURES FOR FOSTER CAREGIVERS

The HEALTH & EDUCATION PASSPORT (HEP) BINDER accompanies each child at the time of placement. The Children's Social Worker (CSW) will review the HEP BINDER with you at each visit. The Health and Education Passport must be taken to all dental visits, including the initial examination. The health care provider must record all current dental services and tests on the DCFS 561(b). Please add completed forms to the child's HEP BINDER. If the child is removed from your care, the child's complete HEP BINDER, containing all health care documents, must be returned to the CSW *at the time of removal*, as the HEP BINDER must accompany the child upon replacement.

Immediately notify the child's CSW (or Supervising CSW, if the CSW is unavailable) when there is any change in the child's dental health that required urgent care.

All foster children must be referred directly to a dentist, as follows:

- Beginning at age one (1).
- At any age if a problem is suspected or detected.
- Every six (6) months for maintenance of oral health.
- Every three (3) months for children with documented special health care needs when their medical or oral condition can be affected and for other children at high risk for dental caries.

To be completed by CSW/Caregiver - Please print legibly.

- Child needs dental examination within thirty (30) days of initial placement.
- Child does not need dental examination because child had a dental examination within six (6) months of placement.
- Child needs dental examination by _____.

CHILDS NAME: _____ DOB: _____ CASE #: _____ DATE PLACED: _____
 CAREGIVER: _____ Phone: _____ FFA: _____ Phone: _____
 CSW: _____ File #: _____ Phone: _____ Fax: _____

Data entered into CWS/CMS by: (Name) _____ **Date:** _____

DENTAL EXAMINATION FORM (To be completed by Dentist.)

Date of Dental Examination: _____ Name of Dentist: _____
 Bi-Annual Required Examination Condition and treatment were explained to the caregiver and child/youth (as age appropriate).
 Other/Follow-Up Visit Youth may self administer his/her own medication with adult supervision.
 Dentist's own exam form is attached. Youth is authorized to self administer his/her own medication.
 If not attached, complete below.

Dental Exam results: (Treatment given; Medications Prescribed. Please attach copies of supporting documentation; test results, etc.)

(May be continued on additional pages if necessary. If so, provider to include child's name and DOB, and sign and date additional pages.)

If follow-up care indicated, specify: _____

Signature of Health Care Provider: _____ (Date) _____
 (Dentist)

Address: _____ Phone: _____

(Signature Stamp Required)

PSYCHOLOGICAL/OTHER EXAMINATION FORM – INSTRUCTIONS

CONSENT (Caregiver is a Foster Parent, Relative, Group Home, or FFA)

Consent of the parent or guardian (via the DCFS 179-MH) or court authorization must be obtained prior to having the child undergo any medical, dental and mental health screenings and examinations. CSWs or Caregivers must inform the parents of the date, time and location of the mental health screening, and inform the parent of the opportunity to be present. It is not necessary to reschedule the appointment if the parent does not respond or if the parent cannot attend. Notice may be provided orally, text, email, mail, in-person, or by leaving a message on the parent's phone. It is necessary to reschedule the exam if:

- The parent objects to the mental health screening, even if the parent previously gave consent
The parent never signed the DCFS 179-MH providing consent
There's no court order for the exam

MEDICAL RECORD PROCEDURES FOR FOSTER CAREGIVERS

The HEALTH & EDUCATION PASSPORT (HEP) BINDER accompanies each child at the time of placement. The Children's Social Worker (CSW) will review the HEP BINDER with you at each visit. The Health and Education Passport must be taken to all health care visits. The health care provider must record all current psychological services and tests on the DCFS 561(c). Please add the completed forms to the child's HEP BINDER. If the child is removed from your care, the child's complete HEP BINDER, including the Immunization Record, shall be returned to the CSW at the time of removal, as the HEP BINDER must accompany the child upon replacement.

Immediately notify the child's CSW (or Supervising CSW, if the CSW is unavailable) when there is any change in the child's mental, medical and/or dental health that required urgent medical care

(To be completed by CSW/Caregiver. Please print legibly.)

CHILDS NAME: _____ DOB: _____ CASE #: _____ DATE PLACED: _____
CAREGIVER: _____ (Phone) _____ (FFA) _____ (Phone) _____
CSW: _____ (File #) _____ (Phone) _____ (Fax) _____

Data entered into CWS/CMS by: (Name) _____ (Date) _____

PSYCHOLOGICAL/OTHER EXAMINATION FORM

(To be completed by Mental Health or other Professional Health Care Provider, e.g., Psychiatrist, Psychologist, L.C.S.W., L.M.F.T., Speech Therapist, Physical Therapist, etc.)

HEALTHCARE PROVIDER

Date Child Seen: _____ Name of Health Care Provider: _____

Diagnosis/Treatment: (Treatment given. Medications Prescribed. Please attach copies of supporting documentation; test results, etc.) (May be continued on additional pages if necessary. If so, provider to also sign and date additional pages.)

Court authorization obtained for psychotropic medication(s)? Select One Date of Authorization _____ N/A

(Psychotropic medications for Court dependent children must be authorized by the Court. The Court authorization must be renewed every six months.)

If Yes, what psychotropic medication(s) prescribed? _____

- Condition and treatment were explained to the caregiver and child/youth (as age appropriate).
Youth may self administer his/her own medication with adult supervision.
Youth is authorized to self administer his/her own medication.

If follow-up care indicated, specify: _____

Signature of Health Care Provider: _____ (Date) _____

Address: _____ Phone: _____

(Signature Stamp Required)

SHARED RESPONSIBILITY PLAN - INSTRUCTIONS

INTRODUCTION

The purpose of the Shared Responsibility Plan (SRP) is to help develop the parent-child bond, assist the teen parent in her/his transition to independence, and create a successful, supportive and nurturing placement for both the teen and the child.

The SRP shall be designed to preserve, strengthen and maintain the continuity of the teen parent family unit (teen parent & child), to facilitate a supportive home environment for the teen parent and the child, and to ultimately enable the teen parent to independently provide a safe, stable, and permanent home for the child. The SRP shall in no way limit the teen parent's legal right to make decisions regarding the care, custody, and control of the child.

The SRP is an agreement between the dependent teen parent and her/his caregiver about the duties, rights and responsibilities each has with regard to the teen parent's nondependent child. In general the SRP does the following:

1. It is a schedule for the teen parent and the foster parent, so each one knows what they are responsible for in regards to the care of the child.
2. It is flexible, because things can change from week to week (e.g., changing needs of child's and toddlers and the teen parent's changing school; employment or other outside responsibilities, etc.). It might be necessary to review and revise the SRP on a weekly basis (or even more frequently).
3. It includes strategies for dealing with miscommunication or disagreements between the dependent teen parent and the foster parent about care of the child.
4. It identifies supportive services to be offered to the teen parent by the caregiver or, in the case of a certified home, the FFA providing direct and immediate supervision to the caregiver, or both.
5. It supports the teen parent's Case Plan (including the TILP) and any visitation orders made by the court.

THE SHARED RESPONSIBILITY PLAN (SRP) MUST SUPPORT THE TERMS AND CONDITIONS OF THE CASE PLAN AND PROVIDE FOR THE FOLLOWING GOALS AS APPROPRIATE:

Services:

To the greatest extent possible, dependent teen parents and their non-dependent children living together in foster care shall be provided with access to existing services (e.g., ILP) for which they may be eligible that are specifically targeted at supporting, maintaining, and developing both the parent-child bond and the teen parent's ability to provide a permanent and safe home for her/his child. Examples of these services may include, but shall not be limited to: child care, parenting classes, child development classes and frequent visitation.

Education:

The teen parent shall be given the ability to attend school, complete homework, and participate in age and developmentally appropriate activities unrelated to and separate from parenting.

Support & Assistance:

Foster care placements for teen parents and their children shall demonstrate a willingness and ability to provide support and assistance to dependent teen parents and their children.

Contact between the child, the teen parent and the noncustodial parent:

Contact between the non-dependent child, the dependent teen parent, and the noncustodial parent shall be facilitated when that contact is found to be in the best interest of the non-dependent child (refer to FYI 07-10, Teen Parents In Foster Care: New Laws Regarding Visits).

SHARED RESPONSIBILITY PLAN - INSTRUCTIONS

THE SHARED RESPONSIBILITY PLAN (SRP) MUST ADDRESS THE FOLLOWING DUTIES, RIGHTS, AND RESPONSIBILITIES OF BOTH THE DEPENDENT TEEN PARENT AND THE CAREGIVER WITH REGARD TO THE NON-DEPENDENT CHILD:

- Feeding Schedule
- Clothing and Dressing
- Hygiene including Diapering
- Purchase of necessary items, including, but not limited to:
(This includes both one-time purchases and items needed on an ongoing basis.)
 - Safety items
 - Food
 - Clothing
 - Age appropriate toys and books
 - Other
- Health care
- Transportation (as appropriate) to:
 - Health care appointments
 - Child care and Babysitting
 - School
 - Other
- Provision of child care and babysitting
- Discipline
- Sleeping arrangements (no co-sleeping)
- Age Appropriate activities (Mommy & Me, Parks, Zoo, Swim, etc.)
- Visits among the child, his or her noncustodial parents, and other appropriate family members, including the responsibilities of the teen parent, the caregiver, and the foster family agency, as appropriate, for facilitating the visitation
- Special Needs
 - Regional Center – Early Intervention Services
 - Special Education

COMPLETION INSTRUCTIONS

(A Shared Responsibility Plan may be completed for each non-dependant child)

Who develops the SRP:

The SRP is to be developed between the teen parent, caregiver, CSW, and FFA social worker (when applicable). Additional input may be provided by any individuals identified by the teen parent, including the other parent of the child, if appropriate, and other extended family members.

When the SRP must be developed:

The SRP is to be developed as soon as is practicably possible within the first 30 days of the teen parent's placement in the Whole Family Foster Home (WFFH). If the CSW or the FFA social worker (when applicable) is/are not available to participate in the creation of the SRP within the first 30 days of the teen parent's placement, the teen parent and caregiver may develop a SRP for the purposes of fulfilling the requirements for the SRP Rate. The SRP must be submitted to the CSW for approval and initiation of the SRP Rate and may be modified at a later time when other individuals become available.

SRP Rate:

The caregiver must provide DCFS with a copy of the SRP and must advise DCFS of any subsequent changes to the SRP. Once the SRP has been completed and approved by the CSW, the payment made will be increased by an additional \$200 per month (per non-dependent child for whom a SRP has been developed) to reflect the increased care and supervision while the Teen Parent Family Unit is placed in the WFFH.

SHARED RESPONSIBILITY PLAN - INSTRUCTIONS**SRP Checklist**

The following check list has been developed to assist in the completion of a meaningful SRP by providing areas to consider when completing the SRP. This is not an exhaustive list and the SRP should address all areas important to your specific situation. When using this list, check off the boxes that you feel apply to your situation. Then include each checked item in the appropriate section of the SRP. *For example, if you checked "Bonding", then you could include this in the "Age Appropriate Activities" section in the "The Teen Parent will" box by saying, "(Teen parent's name) will have bonding time with (child's name) by holding (her/him) and (list an age appropriate activity).*

The SRP should:

- 1) Preserve and strengthen the Teen Parent Family Unit:

<input type="checkbox"/> Bonding	<input type="checkbox"/> Supporting new role of teen as parent
<input type="checkbox"/> Parenting Skills	<input type="checkbox"/> Teen as primary caregiver

- 2) Assist the teen parent in maintaining the continuity of the Teen Parent Family Unit:

<input type="checkbox"/> Regularly scheduled time with child	<input type="checkbox"/> Teen as primary disciplinarian
<input type="checkbox"/> Quality time with child (age sensitive)	<input type="checkbox"/> Teen as primary caregiver

- 3) Facilitate a supportive home environment for the Teen Parent Family Unit:

<input type="checkbox"/> Nurturing of teen parent	<input type="checkbox"/> Teens role in household
<input type="checkbox"/> Teen parent family unit as central focus	<input type="checkbox"/> Conflict resolution within placement

- 4) Prepare the teen parent to independently provide a safe, stable and permanent home for her/his child:

<input type="checkbox"/> Teens education (high school, college, vocational)	<input type="checkbox"/> Emancipation goals (TILP)
<input type="checkbox"/> Teens career development (employment)	<input type="checkbox"/> Physical & emotional health of teen parent and child
<input type="checkbox"/> ILP classes	<input type="checkbox"/> Financial responsibility & money management
<input type="checkbox"/> Non violent parenting education	<input type="checkbox"/> Family Planning
<input type="checkbox"/> Teens extra curricular activities	

- 5) Support the teen parent's legal right to make decisions regarding the care, custody, and control of her/his child:
 - Teen as primary disciplinarian
 - Teen as primary caregiver
 - Child's special needs
 - Family visitation
 - Custody & child support

SHARED RESPONSIBILITY PLAN - INSTRUCTIONS**INSTRUCTIONS FOR THE CAREGIVER****Submitting The SRP For Approval And Initiating The SRP Rate**

In cases where the SRP has been completed between the caregiver and the teen parent only, the caregiver must give the SRP to the CSW for review, approval and submission to the DCFS EW/TA.

Distribution Of Copies Of The SRP

If the SRP is completed without the CSW, then the caregiver is responsible for ensuring that the teen parent and the FFA are provided with copies of the SRP.

INSTRUCTIONS FOR THE CSW**Submitting The SRP For Approval And Initiating The SRP Rate**

The CSW will attach a copy of the completed, signed and approved SRP to a completed DCFS 280, and submit both to the DCFS EW/TA to initiate the SRP Rate.

Distribution Of Copies Of The SRP

The CSW is to provide copies of the completed SRP and/or any subsequent updates to the SRP to the teen parent; the teen parent's attorney; the caregiver; and in the case of a certified home, the FFA providing direct and immediate supervision to the caregiver.

INSTRUCTIONS FOR REVIEWING AND UPDATING THE SRP

These apply to all parties

Changes to the SRP can be expected for a number of reasons and may reflect some of the following examples:

- Changes in the child's needs as (s)he grows and the new parenting skills that are required.
- Changes in the teen parent's educational, employment or extracurricular needs.
- Changes in the caregivers work schedule or health needs.

Make changes within each section as needed. Participants should then initial and date each change. Make plenty of copies of the attached Shared Responsibility Weekly Planner and update it regularly to reflect the current SRP. When changes are made, make a new copy for everyone involved in the SRP per the Submission Instructions above.

The SRP must be reviewed and updated at least every 6 months or more frequently as needed. Make sure the SRP reflects current needs and issues for best results (refer to item #2 on page 1 of these instructions.) On the SRP Cover Sheet document whether this is an "Initial SRP" or a "Bi-Annual SRP". Where indicated, document when the next Bi-Annual SRP is due.

SHARED RESPONSIBILITY PLAN – COVER SHEET

Teen Parent's Name:	DOB:	State #:
Date placed in this home:	PDJ #:	

Non-Dependent Child's Name:	DOB:	Please check appropriate box: <input type="checkbox"/> Initial SRP <input type="checkbox"/> Bi-Annual SRP
Date placed in this home:		

Caregivers Name:	Phone:	e-mail:
Placement address:		
License # (if applicable):		

FFA Name:	Phone:	e-mail:
Address:		
Vendor # and License #:		

NOTE: Certification as a Whole Family Foster Home (WFFH) Provider is an eligibility requirement for the SRP Rate. Copies of the WFFH Certification document and the completed SRP are to be attached to the DCFS 280 when submitting a request for the SRP Rate.

CSW/DPO:	File #:	Phone:
Fax:	e-mail:	
The next Bi-Annual SRP is due on (six months from the date of this SRP): Date:		

By signing below, I am acknowledging that I have participated in the development of the attached SRP and agree to complete the tasks assigned to me:

Teen Parent's Name (please print clearly)

Caregivers Name (please print clearly)

Teen Parent's Signature Date

Caregivers Signature Date

This SRP was developed with the assistance of:

NAME	TITLE	DATE
	Children's Social Worker	
	Probation Officer	
	FFA Social Worker	

CSW Approval: _____
CSW's Signature Date

Use the checklist below to document who received copies of the SRP and the date provided:
(Refer to the Distribution Instructions on page 4)

- | | | | |
|--------------------------------------|-------------|--|-------------|
| <input type="checkbox"/> Teen Parent | Date: _____ | <input type="checkbox"/> Teen's Attorney | Date: _____ |
| <input type="checkbox"/> Caregiver | Date: _____ | <input type="checkbox"/> FFA | Date: _____ |

SHARED RESPONSIBILITY PLAN (SRP)

Dependent Teen Parent

Non-Dependent Child

Caregiver

For each Task or Responsibility listed, be as specific as you can.

DUTIES, RIGHTS, AND RESPONSIBILITIES OF BOTH THE DEPENDENT TEEN PARENT AND THE CAREGIVER WITH REGARD TO THE NON-DEPENDENT CHILD

Goal: To assist the teen parent in developing the skills necessary to provide a safe, stable, and permanent home for his/her child.

A written SRP may be developed when a dependent teen parent and her/his non-dependent child live together in a Whole Family Foster Home (WFFH). The SRP is developed between the teen parent, caregiver, and the Children’s Social Worker (CSW) or Probation Officer (PO). When living in a Foster Family Agency (FFA) certified home, a representative of the FFA will also be involved. You may want to include additional input from other people like the other parent of the non-dependent child or other extended family members or other support persons, (e.g., Nurse Family Partnership). The SRP is to be completed as soon as practically possible, but can be changed and updated if someone is not available, or the situation changes. This SRP document includes tasks or responsibilities that are required, however, you can add other tasks or responsibilities that you feel should be included. Refer to the check list on p. 4 of the SRP Completion Instructions for areas to consider while completing the SRP. Please also refer to the Shared Responsibility Weekly Planner which is at the end of this package. Please make several copies of the Weekly Planner for your ongoing use.

↓ **EXAMPLE**

↓ **EXAMPLE**

<p><i>Task or Responsibility:</i> Feeding Schedule</p>	<p><i>The teen parent will:</i> Example:</p> <ol style="list-style-type: none"> _____ will feed her child breakfast and all meals in the evening every day. On weekends _____ will assume primary responsibility for feeding the child. _____ will prepare the formula. _____ will ask _____ to feed the child if the _____ needs to attend meetings, court, or other functions. _____ and _____ develop a weekly calendar to identify times in which _____ may need assistance in feeding child. 	<p><i>The caregiver will:</i> Example:</p> <ol style="list-style-type: none"> _____ will feed the child while _____ attends school. _____ will encourage _____ to assume the primary responsibility for feeding the child. _____ will offer support to _____. 	<p><i>Supports needed to assist the teen parent</i></p> <ol style="list-style-type: none"> Practice in making the formula (and/or breast feeding techniques – _____ to provide assistance. Learning to “burp” the child. PHN visit <hr/> <p><i>What will be done when there is a concern:</i></p> <ol style="list-style-type: none"> _____ will discuss concerns with _____. _____ will contact the social worker/probation officer after three attempts to discuss with _____ concerns about feeding. The social worker/probation officer will convene a meeting with _____ and _____ to resolve the concerns.
---	--	--	---

SHARED RESPONSIBILITY PLAN (SRP)

Dependent Teen Parent

Non-Dependent Child

Caregiver

For each Task or Responsibility listed, be as specific as you can.

<i>Task or Responsibility:</i> Feeding Schedule (infants need to be fed every 2-4 hours)	<i>The teen parent will:</i>	<i>The caregiver will:</i>	<i>Supports needed to assist the teen parent:</i>
			<i>What will be done when there is a concern:</i>

<i>Task or Responsibility:</i> Clothing and Dressing	<i>The teen parent will:</i>	<i>The caregiver will:</i>	<i>Supports needed to assist the teen parent:</i>
			<i>What will be done when there is a concern:</i>

SHARED RESPONSIBILITY PLAN (SRP)

Dependent Teen Parent

Non-Dependent Child

Caregiver

For each Task or Responsibility listed, be as specific as you can.

<i>Task or Responsibility:</i> Hygiene including diapering	<i>The teen parent will:</i>	<i>The caregiver will:</i>	<i>Supports needed to assist the teen parent:</i>
			<i>What will be done when there is a concern:</i>

<i>Task or Responsibility:</i> Purchase of Items for the Child/Child (safety items, food, clothing, toys, books, other)	<i>The teen parent will:</i>	<i>The caregiver will:</i>	<i>Supports needed to assist the teen parent:</i>
			<i>What will be done when there is a concern:</i>

SHARED RESPONSIBILITY PLAN (SRP)

Dependent Teen Parent

Non-Dependent Child

Caregiver

For each Task or Responsibility listed, be as specific as you can.

<i>Task or Responsibility:</i> Health Care (maintenance of health care records)	<i>The teen parent will:</i>	<i>The caregiver will:</i>	<i>Supports needed to assist the teen parent:</i>
			<i>What will be done when there is a concern:</i>

<i>Task/ Responsibility:</i> Transportation for health care appointments, child care, school, other	<i>The teen parent will:</i>	<i>The caregiver will:</i>	<i>Supports needed to assist the teen parent:</i>
			<i>What will be done when there is a concern:</i>

SHARED RESPONSIBILITY PLAN (SRP)

 Dependent Teen Parent

 Non-Dependent Child

 Caregiver

For each Task or Responsibility listed, be as specific as you can.

Task or Responsibility: Child Care and Babysitting	The teen parent will:	The caregiver will:	Supports needed to assist the teen parent:
			What will be done when there is a concern:

Task or Responsibility: Discipline	The teen parent will:	The caregiver will:	Supports needed to assist the teen parent:
			What will be done when there is a concern:

SHARED RESPONSIBILITY PLAN (SRP)

Dependent Teen Parent

Non-Dependent Child

Caregiver

For each Task or Responsibility listed, be as specific as you can.

<p><i>Task or Responsibility:</i> Sleeping Arrangements (no "co-sleeping", baby/child must sleep in his/her own bed))</p>	<p><i>The teen parent will:</i></p>	<p><i>The caregiver will:</i></p>	<p><i>Supports needed to assist the teen parent:</i></p>
			<p><i>What will be done when there is a concern:</i></p>

<p><i>Task or Responsibility:</i> Visits with others (other parent, grandparents, etc)</p> <p><i>Please Note: The shared responsibility plan cannot conflict with orders of the Court</i></p>	<p><i>The teen parent will:</i></p>	<p><i>The caregiver will:</i></p>	<p><i>Supports needed to assist the teen parent:</i></p>
			<p><i>What will be done when there is a concern:</i></p>

SHARED RESPONSIBILITY PLAN (SRP)

Dependent Teen Parent

Non-Dependent Child

Caregiver

For each Task or Responsibility listed, be as specific as you can.

<i>Task or Responsibility:</i> Age Appropriate Activities (reading, singing, physical activity, holding, etc.)	<i>The teen parent will:</i>	<i>The caregiver will:</i>	<i>Supports needed to assist the teen parent:</i>
			<i>What will be done when there is a concern:</i>

<i>Task/ Responsibility:</i> Other: _____	<i>The teen parent will:</i>	<i>The caregiver will:</i>	<i>Supports needed to assist the teen parent:</i>
			<i>What will be done when there is a concern:</i>

Shared Responsibility - Weekly Planner							
Task	Mon.	Tues.	Wed.	Thrs.	Fri.	Sat.	Sun.
Insert Date ➡							
Dressing	Who Time						
Morning Meal(s) 5:00 AM - 12 Noon							
Day Care (Start or Drop Off)							
Afternoon Meal(s) 12 Noon - 7:00 PM							
Day Care (End or Pick Up)							
Evening Meal(s) 7:00 PM - 5:00 AM							
Bathe							
Put to Bed							
Age Appropriate Activity							
Appointments							
Teen's Extra Curricular Activities:							
Other:							
Other:							
Other:							

"Persistence Pays Off"

Teen Parent Weekly Goal(s)			
My Personal Goal(s):	Foster Parent help:	Goal Met?	If no, why not?
1)			
2)			
My Goal(s) with _____:	Foster Parent help:	Goal Met?	If no, why not?
1)			
2)			

"Together We Win"

☹ Disputes ☹	☺ Resolutions ☺

Notes:

DCFS 2281 CLOTHING STANDARD (Revised 2/2005)

When determining the adequacy of clothing, consider the following:

- Special activities clothing for sports/gym, dance, proms, or graduation
- Periods of rapid growth
- Size changes during pregnancy and post delivery
- Frequency of laundering

School uniforms, if applicable, can meet up to 2 outfits of the clothing standard.

Children should begin to participate in the selection and purchases of their clothing as soon as possible. Teens should also participate in the maintenance of their wardrobe (washing, ironing, mending, etc.)

INFANT:	NAME:	NAME:	NAME:	NAME:
2-4 receiving blankets				
2 large blankets				
2 blanket sleepers				
8 one-piece stretch suits and/or 8 outfits for everyday play				
1 outfit for dressy/Sunday/ special occasions				
1 sweater and cap set				
1 pair booties/playshoes				
8 pair socks				
4-6 undershirts				
3 dozen cloth diapers, 1 dozen diaper liners, 2 pairs plastic pants OR 3 dozen disposable diapers				
8 bibs				
1 swimsuit, if applicable				
Meets standard:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2 YEARS AND OLDER:	NAME:	NAME:	NAME:	NAME:
*outfits				
2-3 pairs of shoes				
Nightwear, bedroom slippers				
2 sweatshirts/sweaters				
1 jacket or coat appropriate to				
1 swimsuit, if applicable				
Meets standard:	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

*4 outfits at initial placement; 7 outfits within 30 days of initial placement, 10 outfits within 60 days of initial placement, 12 outfits within 120 days of initial placement (an outfit includes all necessary undergarments: socks/pantyhose; jeans/pants/slacks/skirts; shirts/t-shirts/blouses; dresses).

NAME, ADDRESS, AND TELEPHONE NUMBER OF ATTORNEY OR PARTY WITHOUT ATTORNEY: ATTORNEY FOR (Name): _____ SUPERIOR COURT OF CALIFORNIA, COUNTY OF LOS ANGELES COURTHOUSE ADDRESS: _____ PETITIONER: _____ CHILD'S NAME: _____ DOB: _____	Reserved for Clerk's File Stamp CASE NUMBER: Dependency _____ Delinquency _____
DECLARATION IN SUPPORT OF ACCESS TO JUVENILE RECORDS (WIC §827, WIC §786(g)(1)(J); CRC Rule 5.552; Local Rule 7.2)	

A. I am one of the entitled parties or agencies listed under Welfare & Institutions Code (WIC) §827, WIC §786(g)(1)(J) California Rules of Court (CRC), rule 5.552, and Los Angeles Superior Court (LASC) Local Rules (LR), rule 7.2 (Check 1 box only):

1. Court Personnel
2. Subject Child/Non-Minor Dependent
3. Attorney for subject child or his or her agent with proper proof of affiliation (including appellate attorney) [*continue to Section B below*]
4. Subject child's parent/legal guardian who still has parental rights
5. The attorney for subject child's parent/legal guardian who still has parental rights, or his or her agent with proper proof of affiliation (including appellate attorney) [*continue to Section B below*]
6. The County Counsel, City Attorney, or any other attorney representing the petitioning agency in a dependency action, or his or her agent with proper proof of affiliation [*continue to Section B below*]
7. Attorney authorized to prosecute adult criminal or juvenile matters under California state law (district attorney, city attorney, city prosecutor), or his or her agent with proper proof of affiliation [*continue to Section B below*]
8. Judge, referee, hearing officer, probation officer, or law enforcement officer actively participating in adult criminal or juvenile proceedings involving the minor
 - a. Criminal case number: _____
 - b. Juvenile case number: _____
9. State Department of Social Services staff for the purposes delineated in WIC section 827(a)(1)(I), CRC 5.552(b)(1)(J), LR 7.2(a)(2)(h)
10. State Department of Social Services staff for purposes delineated in WIC section 827(a)(1)(J), LR 7.2(a)(2)(i)
11. Member of child protective agencies per Penal Code section 11165.9 (police, sheriff, county probation, county child welfare)
12. Superintendent or designee of school district where child attends or is enrolled
 - a. School District: _____
13. Member of child's multi-disciplinary team as provided in WIC section 830, 830.1, and 18951(d)
14. Person or agency currently providing supervision or treatment of child (physician, surgeon, other health care providers, psychotherapist, sexual assault or domestic violence counselor, group home or foster family agency social worker/case managers, regional center consumer service coordinator)
 - a. Title & relationship to child: _____
15. Family law judicial officer, or clerk acting on behalf of judicial officers
 - a. Family law case number: _____
16. Family law mediator or court appointed evaluator actively participating in a family law case involving the subject minor (including person performing investigation or assessment)
 - a. Family law case number: _____
17. Court-appointed counsel for minor in family law case under Family Code section 3150. **Counsel for the minor on related matters is required to provide a copy of the court order appointing him/her as minor's counsel.**
 - a. Family law case number: _____
18. Court-appointed probate guardianship investigator
 - a. Probate case number: _____

SHORT TITLE:	CASE NUMBER:
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- 19. Local child support agency for establishing paternity and establishing or enforcing child support orders
 - a. Family law case number: _____
- 20. Juvenile Justice Commission as established under WIC section 225
- 21. Person from an Indian tribe, reservation, or tribal court serving in a similar capacity as those listed in Section A, numbers 1, 3, 5, 6, 11, 13, 15, 16, 17, or 18
 - a. If so, what tribe? _____
 - b. Please specify your role: _____
- 22. Department of Justice for the purpose of determining if the person is suitable to purchase, own or possess a firearm consistent with Section 29820 of the Penal Code, and WIC section 786(g)(1)(J).
- 23. Probation officer, for the purpose of preparing a report pursuant to Section 1178 on behalf of a person who was in the custody of the Department of Corrections and Rehabilitation, Division of Juvenile Justice and has petitioned the Board of Juvenile Hearings for an honorable discharge.
- 24. Other (including pursuant to court order; please attach copy of order)

B. Attorney

Name: _____	State Bar #: _____	Case No: _____
Court (criminal, juvenile, etc.) _____	Client Name: _____	
Client's relationship to subject of juvenile records: _____		

C. What type of records are you requesting to access? Please explain below.

- Dependency Delinquency DCFS Probation

D. Why are you requesting the records?

- For personal use
- Other reasons (please specify):

- Will you share the records with anyone else? If so, with whom? (Please provide name and title)

If you are entitled and wish to access records from the **Department of Children and Family Services (DCFS)**, please submit this form to DCFS Records Unit/Office of County Counsel – address: 201 Centre Plaza Dr. Ste. 1, Monterey Park, CA 91754 – phone number: (323) 526-6100 – email: Dependencyrecords@counsel.lacounty.gov. If you are entitled and wish to access records from the **Probation Department**, please contact the Custodian of Records at (562) 940-2876, or send an email to civillitigationoffice@probation.lacounty.gov.

WARNING: Any records, reports, or information obtained from the juvenile record(s) shall not be further released or disseminated to persons or agencies not otherwise entitled to access to juvenile records pursuant to WIC section 827, CRC 5.552, and LR 7.2 (i.e. agencies/individuals listed above). Further, juvenile records shall not be attached to any documents without prior approval of the Juvenile Court Presiding Judge, unless they are used in connection with a criminal investigation or juvenile court proceeding to declare a minor a dependent or ward of the Court.

I declare under penalty of perjury that the foregoing is true and correct and that I am aware of the above warning regarding dissemination of juvenile records.

Date: _____

Signature: _____

Clear

GRIEVANCE REVIEW HEARING REQUEST

IDENTIFYING INFORMATION (Provide the following information)

Complainant's name: _____	
foster parent; legal parent/guardian, relative/non-relative extended family member	
Address: _____	Phone: _____
Child's Case Number: _____	
CSW's Name: _____	Phone: _____
SPA: _____	Office Address: _____

GRIEVANCE (Describe your concerns. Attach additional pages, if necessary)

REQUESTED ACTION (Describe how you would like the situation to be resolved)

SIGNATURE _____

DATE _____

An explanation of the Grievance Review procedure and instructions are on the reverse of this form. If you need assistance completing this form or have questions about the Grievance Review procedure, contact the DCFS Grievance Review Information Line, (833) 782-0173 or by fax at (213) 427-6154, or by e-mail: GRRequest@dcfs.lacounty.gov

DCFS GRIEVANCE REVIEW PROCEDURES

California Department of Social Services' (CDSS) Manual of Policies and Procedures (MPP) Division 31, Section 020 requires a grievance process to review complaints from foster parents (which includes approved relative and non-relative extended family members caregivers), legal parents, legal guardians and children regarding the placement or removal/replacement of a child or non-minor dependent from a foster home. CDSS also requires that DCFS provide you with a copy of the grievance procedure regulations. The DCFS 4161-I, California Department of Social Services Grievance Procedure Regulations form contains the exact text of the State of California regulations.

All issues will be resolved in the best interest of the child.

If your grievance is regarding the pending **removal of a foster child or non-minor dependent from your home**, contact the child's Children's Social Worker (CSW) to discuss your concerns. You may request a Grievance Review Hearing by submitting a completed DCFS 4161, Grievance Review Hearing Request form, to the Government Accountability and Risk Management (GARM) Bureau Liaison within **10 calendar days** from the date you became aware of the action under complaint. In cases of removal not exempted from review, you must submit the DCFS 4161 to the GARM Bureau Liaison at least **2 calendar days** prior to the expected date of removal of the child from your home.

If your grievance is regarding the **placement of a foster child or non-minor dependent in your home**, contact the child's Children's Social Worker (CSW) to discuss and attempt to resolve your concerns. You may request a Grievance Review Hearing by submitting a completed DCFS 4161, Grievance Review Hearing Request form to the GARM Bureau Liaison. The GARM Bureau Liaison must receive the DCFS 4161 within **10 calendar days** from the date you became aware of the action which is under complaint.

IF YOU WOULD LIKE TO SUBMIT THE DCFS 4161 VIA EMAIL OR FAX, PLEASE SEND TO
GRRequest@dcfs.lacounty.gov or (213) 427-6154.

IF YOU WOULD ALTERNATIVELY LIKE TO SUBMIT THE DCFS 4161 BY MAIL OR IN PERSON, PLEASE MAIL OR DELIVER THE FORM IN PERSON DURING NORMAL BUSINESS HOURS MONDAY THROUGH FRIDAY TO THE FOLLOWING ADDRESS:

GARM BUREAU LIAISON
 425 Shatto Place, 6th Floor
 Los Angeles, CA 90020

REGARDLESS OF THE MANNER BY WHICH YOU CHOOSE TO SUBMIT THE DCFS 4161, YOU ARE STRONGLY ADVISED TO MAKE A COPY FOR YOUR RECORDS.

You will receive written notification of the Grievance Review Hearing via certified mail, within five (5) calendar days prior to the Grievance Review Hearing via the DCFS 4161-N, Grievance Review: Notice of Hearing form. The Notice will advise you of the date, time, and place of the hearing. You may bring a representative with you to the hearing. If you wish to authorize the release of information to your representative, you must complete the DCFS 4161-R, Grievance Review: Representative Agreement form, and submit it to the child's CSW. At the hearing, the Review Agent will require your representative to sign a DCFS 4161-C, Grievance Review: Representative Statement of Confidentiality form and, if not already on file, the DCFS 4161-R.

You may obtain additional forms from the child's CSW or you may request them from the DCFS GARM Bureau Liaison by e-mail: GRRequest@dcfs.lacounty.gov

List of relevant forms:

DCFS 4161, Grievance Review Hearing Request

DCFS 4161-I, California Department of Social Services (CDSS) Grievance Procedure Regulations

DCFS 4161-R, Grievance Review: Representative Agreement

If you need assistance completing this form or have questions about the Grievance Review procedure, contact the DCFS Grievance Review Information Line, (833) 782-0173, or by fax at (213) 427-6154, or by e-mail: GRRequest@dcfs.lacounty.gov

SOLICITUD PARA AUDIENCIA DE REVISIÓN DE QUEJA

INFORMACIÓN IDENTIFICATORIA (Proporcione la siguiente información)

Nombre del reclamante:	_____		
	padre de crianza; padre/tutor legal; miembro de familia extendida, sea pariente o no		
Dirección:	_____	Teléfono:	_____
Número de caso del niño:	_____		
Nombre del CSW (Trabajador social del niño):	_____	Teléfono:	_____
Oficina del Trabajador que le provee servicios:	_____	Dirección de oficina:	_____

QUEJA (Describa sus inquietudes. Adjunte más páginas si es necesario.)

ACCIÓN SOLICITADA (Describa cómo le gustaría que se resolviera la situación.)

FIRMA _____

FECHA _____

En el reverso de este formulario se encuentra una explicación del procedimiento de Revisión de la queja y las instrucciones para completarlo. Si tiene preguntas acerca del procedimiento de revisión de quejas favor de llamar a la línea telefónica para mas información al (833) 782-0173, o por fax al (213) 427-6154, o por correo electrónico a GRRequest@dcfs.lacounty.gov

PROCEDIMIENTOS DE DCFS PARA LA REVISIÓN DE QUEJAS

La División 31, Sección 020 del Manual de Políticas y Procedimientos (MPP) del Departamento de Servicios Sociales de California (California Department of Social Services, CDSS) requiere un proceso de queja para revisar las denuncias realizadas por padres de crianza (lo cual incluye a cuidadores miembros de familia extendida, sean parientes o no, aprobados), padres legales, tutores legales y niños en relación con la colocación o el retiro/recolocación de un niño en un hogar de crianza temporal. El CDSS asimismo requiere que el Departamento de Servicios para niños y familias (DCFS) le proporcione a usted una copia de las regulaciones de los procedimientos de queja. El formulario DCFS 4161-I, Regulaciones de los procedimientos de queja del Departamento de Servicios Sociales de California, contiene el texto exacto de las regulaciones del estado de California.

Todos los temas se resolverán en el mejor interés del niño.

Si su queja está relacionada con el **retiro pendiente de un niño de crianza o un dependiente mayor de edad** de su hogar de crianza temporal, comuníquese con el Trabajador social del niño (Children's Social Worker, CSW) para comentarle sus inquietudes. Usted puede solicitar una Audiencia de revisión de queja si presenta un formulario DCFS 4161, Solicitud Para Audiencia de Revisión de Queja completo dentro de los **diez días calendario** a partir de la fecha que usted toma conocimiento de la acción en la cual se basa su queja. La Oficina de GARM debe recibir el formulario DCFS 4161 por lo menos **dos días calendario** antes de la fecha esperada en la que se retirará al niño de un hogar de crianza temporal.

Si su queja está relacionada con la **colocación de un niño de crianza o un dependiente mayor de edad** en su hogar, comuníquese con el trabajador social del niño para hablar e intentar resolver sus inquietudes. Para solicitar una Audiencia de Revisión de Queja; presente un formulario DCFS 4161 dentro de los **diez días calendario** a partir de la fecha en la que usted toma conocimiento de la acción en la cual se basa su queja a la oficina de GARM.

SI GUSTA PRESENTAR LA SOLICITUD DCFS 4161 POR FAX O CORREO ELECTRONICO, LO PUEDE HACER AL CORREO ELECTRONICO GRRequest@dcfs.lacounty.gov O FAX (213) 427-6154

O COMO ALTERNATIVA PUEDE PRESENTAR LA SOLICITUD ORIGINAL DCFS 4161 POR CORREO O EN PERSONA DURANTE LAS HORAS DE NEGOCIOS DE LUNES A VIERNES A LA OFICINA DE GARM:

GARM Bureau Liaison
425 Shatto Place, 6th Floor
Los Angeles, CA 90020

GUARDE UNA COPIA DE LA SOLICITUD DCFS 4161 PARA SU ARCHIVO

Recibirá una notificación escrita de la Audiencia de Revisión de Quejas por correo certificado dentro de los cinco (5) días anteriores a la audiencia (formulario DCFS 4161-N, Revisión de quejas: Aviso de audiencia). El Aviso le informará la fecha, hora y lugar de la audiencia. Puede ir con un representante a la audiencia. Si desea autorizarle a su representante la divulgación de información, debe completar el formulario DCFS 4161-R, Revisión de quejas: Acuerdo de Representación y entregarlo al trabajador social del niño. En la audiencia, el Agente Revisor requerirá que su representante firme un formulario DCFS 4161-C, Revisión de Quejas: Declaración de Confidencialidad del Representante y, el formulario DCFS 4161-R si no estuviera ya en el archivo.

Puede obtener formas adicionales por medio del trabajador social del niño o por petición a la Oficina de GARM por medio del correo electrónico GRRequest@dcfs.lacounty.gov

Lista de formas pertinentes:

DCFS 4161, Solicitud para Audiencia de Revisión de Queja

DCFS 4161-I, Regulaciones de los procedimientos de quejas del Departamento de Servicios Sociales de California

DCFS 4161-R, Revisión de Quejas: Acuerdo de representación

Si necesita asistencia para completar su solicitud o tiene preguntas acerca del procedimiento de revisión de quejas favor de llamar a la línea telefónica de información al (833) 782-0173 o por fax al (213) 427-6154 o por correo electrónico a GRRequest@dcfs.lacounty.gov

FOSTER CHILD'S NEEDS AND CASE PLAN SUMMARY

Check One: This is a(n): Initial Placement Update to the initial DCFS 709 (Within 30 Days)
 Replacement Modification of Needs or Plan
 Annual Reevaluation

CHILD/CASE IDENTIFICATION

CHILD'S NAME		SEX	AGE	DATE OF BIRTH	CHILD'S PRIMARY LANGUAGE
CASE NAME	STATE NUMBER	CSIS NUMBER		RELIGIOUS PREFERENCE	
CURRENT FOSTER CAREGIVER NAME		PHONE NO.	DATE PLACED IN CURRENT CAREGIVER'S HOME		
CAREGIVER ADDRESS (Street, City, State, Zip)					

INFORMATION SPECIFIC FOR THIS PLACEMENT

Attach Child's CWS/CMS Case Plan Individual Client Responsibilities (For Update, Replacement or Annual Reevaluation)

See FYI 03-19 for guidance in completing this section.

Regional Center Involvement No None Known

Yes Regional Center: _____
 Service Coordinator: _____ Phone _____

EMOTIONAL/PSYCHOLOGICAL

Comments: _____

BEHAVIOR/SOCIAL

Comments: _____

SEXUAL ORIENTATION/GENDER IDENTITY *Does youth self-identify with respect to sexual orientation/sexual identity?* Yes No *If Yes, how does youth self-identify?*

Gay Lesbian Bisexual Transgender Questioning Heterosexual Other

Comments: _____

EDUCATION *(Include name, address, dates of schools attended, grade level, etc.)*

IEP Provided Special Education DCFS 1399 Provided

Education Rights held by: Parent Other If other, whom? _____

Comments: _____

PLACEMENT/DETENTION HISTORY *(Reason for Placement and/or detention history)*

No Prior Placements Foster Family Home(s) FFA Group Home(s) Relative Other _____

Comments: _____

ABILITY OF CHILD TO HANDLE HIS/HER OWN ALLOWANCE AND OTHER CASH RESOURCES

Comments: _____

VISITATION PLAN *(Include visitation frequency, schedule, with whom, monitored, include sibling(s) name(s). If the sibling's caregiver gives permission, include the caregiver's name and phone number).*

Plan: _____

OTHER COMMENTS *(Include child's likes, dislikes, other special needs, formula, etc.)*

HEALTH AND EDUCATION PASSPORT (HEP)

FOR INITIAL PLACEMENT: HEP information given to Caregiver on: _____.

FOR UPDATES TO THE INITIAL DCFS 709 (Within 30 Days): HEP given to Caregiver on: _____.

FOR REPLACEMENT: HEP information including additional medical and education information from prior placement, given to Caregiver on: _____.

FOSTER CHILD'S NEEDS AND CASE PLAN SUMMARY

The attached Health and Education Passport contains the following information. Annotate the HEP as needed. Explain any missing information.

Check if Information available on HEP					
A. HEALTH CARE PROVIDERS	Name	Address	Phone	Date last seen	If not available, explain
Child's Physician:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Child's Dentist:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

B. ALLERGIES (List all known food, drug and other allergies and reaction)
 None Known Yes, explain No

Comments:

C. IMMUNIZATIONS
 Yes No, explain

Comments:

D. MEDICAL/PSYCHOLOGICAL PROBLEMS (Significant past/present or chronic conditions)
 None Known Yes, explain No

Comments:

Indicate if the following information is currently available in the Health and Education Passport. Provide an explanation for any missing information.

Date Diagnosed	Primary Diagnosis(es)	Contagious/ Infectious	Medication(s) Prescribed/Medical Equipment/Tx Plan	Date Medications Discontinued
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

(If no, explain)

Reviewed and Approved by SCSW:

Print SCSW's Name _____ Office Address _____ Phone _____

SCSW'S Signature _____ Date _____

Caregiver reviewed, understands and agrees to support the child's case plan as described above; has determined the child is compatible with others in the home. Caregiver agrees to keep all of the child's case information confidential and understands that unauthorized disclosure could result in a fine up to \$1,000. Caregiver acknowledges receipt of the Health and Education Passport with the above information included or an explanation of why the information is not included.

Caregiver's Signature _____ Date _____

Print CSW's Name _____ Office Address _____ Phone _____

CSW'S Signature _____ Date _____

LOS ANGELES COUNTY PROBATION DEPARTMENT FOSTER CARE CASE PLAN

CHILD'S NAME: _____ DATE OF BIRTH: _____ SS#: _____	DATE COMPLETED _____ PLACE OF BIRTH: _____	PDJ# _____ SCHOOL GRADE: MEDICAL #: _____
---	---	---

<u>FATHER/ MOTHER/LEGAL GUARDIAN/CAREGIVER:</u>		
NAME:	ADDRESS/TELEPHONE NUMBER	RELATIONSHIP
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

<u>SIBLINGS:</u>			
NAME:	D.O.B.	ADDRESS	RELATIONSHIP
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

DATE OF SUITABLE PLACEMENT ORDER: _____
DATE OF PLACEMENT: _____
CHILD'S CURRENT PLACEMENT: _____
PLACEMENT ADDRESS: _____
CASE PLAN DATES: FROM: _____ TO: _____
<input type="checkbox"/> REASSESSMENT <input type="checkbox"/> 6 MONTH PRE-PERMANENCY <input type="checkbox"/> UPDATED CASE PLAN <input type="checkbox"/> 12 MONTH PERMANENCY <input type="checkbox"/> 18 MONTH PERMANENCY/POST PERMANENCY <input type="checkbox"/> OTHER: _____

CASE PLAN GOAL:	
<i>(Please check Family Reunification or Permanent Plan)</i>	
<input type="checkbox"/> FAMILY REUNIFICATION	<input type="checkbox"/> PERMANENT PLAN <input type="checkbox"/> ADOPTION <input type="checkbox"/> LEGAL GUARDIANSHIP <input type="checkbox"/> PLANNED PERMANENT LIVING ARRANGEMENT

INDIAN CHILD WELFARE ACT (ICWA)	
DOES THE CHILD HAVE INDIAN HERITAGE?	
<input type="checkbox"/> YES <input type="checkbox"/> NO	
IF YES, DATE ICWA 30 WAS MAILED OUT _____, AND ICWA FINDINGS MUST BE DOCUMENTED IN THE CURRENT ASSESSMENT SECTION OF THE JDRV REPORT.	

CONCURRENT PLANNING:	
<i>(Under selected choice explain services and steps to be taken to develop and implement the concurrent plan should reunification fail)</i>	
<input type="checkbox"/> ADOPTION ASSESSMENT & PLANNING <input type="checkbox"/> YES (IF YES, EXPLAIN) <input type="checkbox"/> NO (IF NO, CHECK ONE OR MORE BOXES BELOW)	
IF CASE PLAN DOES NOT INVOLVE ADOPTIVE PLANNING, DOCUMENT THE QUALIFYING COMPELLING REASON(S):	
<input type="checkbox"/> A. THE PARENT OR LEGAL GUARDIAN HAS MAINTAINED REGULAR VISITATION AND CONTACT WITH THE CHILD AND THE CHILD WOULD BENEFIT FROM CONTINUING THE RELATIONSHIP.	

B. THE PLAN IS FOR THE CHILD TO RETURN TO HIS OR HER OWN HOME.

C. THE CHILD 12 YEARS OF AGE OR OLDER AND OBJECTS TO TERMINATION OF PARENTAL RIGHTS

D. CHILD IS PLACED IN RESIDENTIAL THERAPEUTIC FACILITY, ADOPTION IS UNLIKELY OR UNDESIRABLE, AND CONTINUATION OF PARENTAL RIGHTS WILL NOT PREVENT FINDING THE CHILD A PERMANENT FAMILY PLACEMENT IF THE PARENTS CANNOT RESUME CUSTODY WHEN RESIDENTIAL CARE IS NO LONGER NEEDED.

LEGAL GUARDIAN/RESOURCE FAMILY **ASSESSMENT & PLANNING** **NO (IF NO, EXPLAIN)**

YES (IF YES, PLEASE PROVIDE NAME, ADDRESS, TELEPHONE NUMBER, RELATIONSHIP TO CHILD AND EXPLANATION REGARDING THEIR COMMITMENT/INTEREST IN LEGAL GUARDIANSHIP)

PLANNED PERMANENT LIVING ARRANGEMENT: WITH (Name of rel/non-rel), A FIT AND WILLING RELATIVE/NON-RELATIVE WITH (Name of Group Home), AND A SPECIFIC GOAL OF IDENTIFYING CARING ADULTS TO SERVE AS LIFE-LONG CONNECTIONS AND : (Drop down: Completion of Sex Offender Program, Transitional Housing, Completion of Vocational Training, AB 12 Preparation or Candidate, Other: _____)

(DESCRIBE DUE DILIGENCE TO LOCATE BIOLOGICAL PARENTS AND FAMILY FINDING EFFORTS)

1. DESCRIBE CIRCUMSTANCES RESULTING IN PROBATION SUPERVISION UNDER A SUITABLE PLACEMENT ORDER:

2. NEEDS ASSESSMENT: PROVIDE AN ASSESSMENT OF CHILD'S NEEDS:

<input type="checkbox"/> FAMILY THERAPY SKILLS	<input type="checkbox"/> SPECIAL EDUCATION ASSESSMENT - IEP	<input type="checkbox"/> INDEPENDENT LIVING
<input type="checkbox"/> INDIVIDUAL THERAPY	<input type="checkbox"/> PSYCHOTROPIC MEDICATION	<input type="checkbox"/> MENTAL HEALTH ISSUES
<input type="checkbox"/> GROUP THERAPY	<input type="checkbox"/> ANGER MANAGEMENT	<input type="checkbox"/> EMANCIPATION
<input type="checkbox"/> SUBSTANCE ABUSE	<input type="checkbox"/> SEX-OFFENDER TREATMENT	<input type="checkbox"/> ON-GROUNDS SCHOOL
	<input type="checkbox"/> RUNAWAY RISK	

3. ASSESSMENT OF FAMILY – INDICATE STRENGTH AND NEEDS:

MOTHER'S STRENGTHS AND NEEDS :

MOTHER'S RESPONSIBILITY TO ADDRESS HER NEEDS BY PARTICIPATING IN REUNIFICATION SERVICES, FOR EXAMPLE, COUNSELING, PARENTING OR SUBSTANCE ABUSE CLASSES, FULFILLING CONDITIONS OF PROBATION, ETC.:

FATHER'S STRENGTHS AND NEEDS:

FATHER'S RESPONSIBILITY TO ADDRESS HIS NEEDS BY PARTICIPATING IN REUNIFICATION SERVICES, FOR EXAMPLE, COUNSELING, PARENTING OR SUBSTANCE ABUSE CLASSES, FULFILLING CONDITIONS OF PROBATION, ETC.:

OTHERS RESPONSIBILITY TO ADDRESS NEEDS:

4. DESCRIPTION OF TYPE OF PLACEMENT THAT WILL BEST MEET CHILD'S NEEDS:

WAS PROXIMITY TO THE CHILD'S SCHOOL AT THE TIME OF THE PLACEMENT TAKEN INTO ACCOUNT?
 YES NO

CHILD IS PLACED WITH RELATIVE/NON-RELATIVE FOSTER HOME FFA STRTP/GROUP HOME
 CTF OTHER _____

IF CHILD HAS SIBLINGS IN FOSTER CARE LIST EFFORTS TO PLACE TOGETHER AND REASON WHY PLACED APART IF APPLICABLE. NOT APPLICABLE

5. LIST PRIOR PLACEMENTS IF ANY (INCLUDE ANY DCFS – 300 WIC DEPENDENT STATUS CASES):

RESOURCE FAMILY TO BE ASSESSED FOR POSSIBLE SUBSEQUENT PLACEMENT:
 NAME: _____
 RELATIONSHIP: _____
 ADDRESS: _____
 PHONE: _____

6. DESCRIBE PLAN FOR THE SCHEDULE OF CONTACTS AND FACE-TO-FACE VISITS:

BETWEEN CHILD AND **MOTHER**: (PROVIDE EXPLANATION IF NO VISITS ARE MADE) **AND**

BETWEEN CHILD AND **FATHER**: (PROVIDE EXPLANATION IF NO VISITS ARE MADE) **OR**

BETWEEN CHILD AND **LEGAL GUARDIAN**: (PROVIDE EXPLANATION IF NO VISITS ARE MADE)

BETWEEN **SIBLINGS** IN FOSTER CARE AND CHILD:

BETWEEN CHILD AND **GRANDPARENTS**: (PROVIDE EXPLANATION IF NO VISITS ARE MADE)

BETWEEN **DPO** AND CHILD.

BETWEEN DPO AND **PARENTS (MOTHER/FATHER)/LEGAL GUARDIAN**:

BETWEEN DPO AND **CAREGIVER**.

- SUBSTANTIAL DISTANCE FROM THE PARENT OR OUT OF COUNTY PLACEMENT-REASON
 - MEETS THE NEEDS OF CHILD SPECIAL PROGRAM NEEDS
 - LOCAL PLACEMENT NOT AVAILABLE
 - PROGRAM PROVIDES _____ COUNSELING.
 - LIST RESPONSIBILITIES OF THE SENDING AND RECEIVING COUNTIES: _____

- OUT-OF-STATE PLACEMENT-REASON (COMPLETE ONLY WHEN COURT ORDERS OUT-OF-STATE PLACEMENT)
CHILD MUST BE REFERRED TO THE MDT FOR ASSESSMENT AND SCREENING PRIOR TO OUT-OF-STATE PLACEMENT. IT MUST ALSO BE AUTHORIZED AND APPROVED BY ICPC BEFORE OUT-OF-STATE PLACEMENT CAN BE MADE.
- MEETS THE NEEDS OF CHILD /SPECIAL PROGRAM NEEDS MDT RECOMMENDS _____
- LOCAL PLACEMENT NOT AVAILABLE COURT ORDERED _____
- PROGRAM PROVIDES _____ COUNSELING.
- ICPC 100A APPROVED BY RECEIVING STATE

FOR OUT-OF-STATE PLACEMENT: EXPLAIN WHAT IN-STATE FACILITIES OR SERVICES WERE USED OR CONSIDERED AND WHY THEY WERE NOT RECOMMENDED.

- COMMUNITY TREATMENT FACILITY PLACEMENT: _____
- MEETS THE NEEDS OF CHILD /SPECIAL PROGRAM NEEDS MDT RECOMMENDS _____
- COURT ORDERED _____
- PROGRAM PROVIDES _____ COUNSELING.

7. OBJECTIVES: (PERSONAL, LEGAL, ACADEMIC, VOCATIONAL, EMANCIPATION PREPARATION, PSYCHOLOGICAL COUNSELING, ETC.) FOR EACH IDENTIFIED ISSUE, SPECIFY THE ACTIVITIES AND SERVICES TO BE PROVIDED AND IDENTIFY THE INDIVIDUAL OR AGENCY WHO IS RESPONSIBLE TO COMPLETE THE ACTIVITY OR PROVIDE THE SERVICE.

ISSUE #1: _____

OBJECTIVES/ACTIVITIES: _____

SERVICES TO BE PROVIDED: _____

CHILD'S RESPONSIBILITIES: _____

MOTHER'S RESPONSIBILITIES: _____

FATHER'S RESPONSIBILITIES: _____

CARE PROVIDER RESPONSIBILITIES: _____

PROBATION OFFICER'S RESPONSIBILITIES: _____

PROJECTED DATE OF COMPLETION: _____

ISSUE #2: _____

OBJECTIVES/ACTIVITIES: _____

SERVICES TO BE PROVIDED: _____

CHILD'S RESPONSIBILITIES: _____

MOTHER'S RESPONSIBILITIES: _____

FATHER'S RESPONSIBILITIES: _____

CARE PROVIDER RESPONSIBILITIES: _____

PROBATION OFFICER'S RESPONSIBILITIES: _____

PROJECTED DATE OF COMPLETION: _____

ISSUE #3: _____

OBJECTIVES/ACTIVITIES: _____

SERVICES TO BE PROVIDED: _____

CHILD'S RESPONSIBILITIES: _____

MOTHER'S RESPONSIBILITIES: _____

FATHER'S RESPONSIBILITIES: _____

CARE PROVIDER RESPONSIBILITIES: _____

PROBATION OFFICER'S RESPONSIBILITIES: _____

PROJECTED DATE OF COMPLETION: _____

ISSUE #4: _____

OBJECTIVES/ACTIVITIES: _____

SERVICES TO BE PROVIDED: _____

CHILD'S RESPONSIBILITIES: _____

MOTHER'S RESPONSIBILITIES: _____

FATHER'S RESPONSIBILITIES: _____

CARE PROVIDER RESPONSIBILITIES: _____

PROBATION OFFICER'S RESPONSIBILITIES: _____

PROJECTED DATE OF COMPLETION: _____

8. HEALTH INFORMATION AND PHYSICAL ASSESSMENT:
 DESCRIBE PHYSICAL CONDITION OF CHILD. NOTE ANY MEDICAL, DENTAL AND VISION PROBLEMS, MEDICATIONS THE CHILD IS TAKING, AND ANY PAST PROBLEMS OF PHYSICAL RESTRICTIONS.

 LIST ALL CURRENT MEDICATIONS:

9. MENTAL HEALTH ASSESSMENT AND INFORMATION:
 PSYCHOLOGICAL EVALUATION COMPLETED? NO YES DATE: _____

CHILD'S MEDICAL/DENTAL PLAN:	
DOCTOR/CLINIC AND ADDRESS:	DENTIST AND ADDRESS:
_____	_____
_____	_____
_____	_____
LAST PHYSICAL EXAM: _____	LAST DENTAL EXAM: _____
PROBLEMS: _____	PROBLEMS: _____
_____	_____
_____	_____

NEXT APPOINTMENT: _____

NEXT APPOINTMENT: _____

THE CHILD WILL HAVE A MEDICAL EXAMINATION
30 DAYS WITHIN PLACEMENT.

THE CHILD WILL HAVE A DENTAL EXAMINATION
30 DAYS WITHIN PLACEMENT.

IMMUNIZATION RECORD ATTACHED
IMMUNIZATION RECORD LOCATED IN
THE PLACEMENT FILE.

REQUIRED HEALTH INFORMATION NOT IN THE CASE PLAN CAN BE LOCATED IN THE PLACEMENT FILE.

10. EDUCATION STATUS AND BACKGROUND: - DESCRIBE PAST AND PRESENT SCHOOL PERFORMANCE, ANY LEARNING DISABILITIES, BEHAVIOR AND ACADEMIC STANDING, ATTACH IEP IF SPECIAL EDUCATION CASE.)

CURRENT SCHOOL AND ADDRESS: _____

GRADE: _____

GRADE LEVEL PERFORMANCE: _____

IEP ATTACHED: YES NO N/A

SPECIAL EDUCATION: YES NO

EDUCATIONAL ASSESSMENT NEEDED? YES NO

SCHOOL RECORDS ARE ATTACHED: YES NO

REQUIRED SCHOOL RECORDS NOT IN THE CASE PLAN CAN BE LOCATED IN THE PLACEMENT FILE.

COURT HAS ORDERED THAT THE RIGHT OF THE PARENT TO MAKE EDUCATIONAL DECISIONS BE LIMITED:

YES NO

11. TYPE OF SCHOOL PROGRAM THAT THE CHILD WILL REQUIRE DURING PLACEMENT:

12. FAMILY TREATMENT GOALS: (DESCRIBE CASE GOAL FOR REUNIFICATION OR LEGAL PERMANENCY PLANNING)

HOW WILL MOTHER PARTICIPATE IN CHILD'S TREATMENT? HOW WILL FATHER PARTICIPATE IN CHILD'S TREATMENT? HOW WILL CAREGIVER PARTICIPATE IN CHILD'S TREATMENT? WHAT SERVICES WILL BE USED TO ACHIEVE REUNIFICATION OR LEGAL PERMANENCY?

13. INDEPENDENT LIVING SERVICES AND PLANNING: (IS CHILD AGE 16 YEARS OR OVER?) YES NO

IF YES, IS A COPY OF THE TRANSITIONAL INDEPENDENT LIVING PLAN ATTACHED: YES NO

IF NO, EXPLAIN: _____

EXTENDED FOSTER CARE YES NO IF YES, EXPLAIN STATUS: _____

14. UPDATED CASE PLANS ONLY EVALUATE PROGRESS: - EXPLAIN THE SERVICES THAT HAVE BEEN PROVIDED SINCE LAST CASE PLAN WITH AN EVALUATION OF APPROPRIATENESS AND EFFECTIVENESS OF SERVICES DURING THAT TIME FRAME.

JUVENILE PROBATION DEPARTMENT CASE PLAN ACKNOWLEDGEMENTS:

15. (A) PROJECTED DATE THE CHILD WILL BE RETURNED TO THE PARENT/LEGAL GUARDIAN: _____.

(B) PROJECTED DATE OF COMPLETION OF PROBATION SERVICES: _____.

(C) PROJECTED DATE OF COMPLETION OF CASE PLAN OBJECTIVES: _____.

(D) DATE PARENTS ADVISED OF ADOPTION COUNSELING OR SERVICES: _____.

SIGNATURES:

CHILD:

THIS CASE PLAN HAS BEEN REVIEWED WITH ME. I AGREE TO ACTIVELY PARTICIPATE IN THE ACTIVITIES AND WORK TOWARD THE GOALS DESCRIBED.

CHILD'S SIGNATURE

DATE

MOTHER/FATHER/LEGAL GUARDIAN:

THIS CASE PLAN HAS BEEN REVIEWED WITH ME. I AGREE TO ACTIVELY PARTICIPATE IN THE ACTIVITIES AND WORK TOWARD THE GOAL DESCRIBED. I ALSO UNDERSTAND THAT ADOPTIVE/COUNSELING SERVICES ARE AVAILABLE TO ME SHOULD I REQUEST THEM. I HAVE RECEIVED A COPY OF THIS PLAN.

MOTHER SIGNATURE

DATE

FATHER SIGNATURE

DATE

LEGAL GUARDIAN SIGNATURE

DATE

MOTHER/FATHER/LEGAL GUARDIAN UNAVAILABLE.
REASON: _____

DATE: _____

MOTHER/FATHER/LEGAL GUARDIAN REVIEWED/DECLINED TO SIGN.
REASON: _____

DATE: _____

PARENT/LEGAL GUARDIAN REFUSED TO PARTICIPATE IN CASE PLAN/DECLINED TO SIGN.
REASON: _____

DATE: _____

CASE PLAN MAILED TO **MOTHER/FATHER /LEGAL GUARDIAN** ON _____
DATE

, DPO
TELEPHONE:

DATE

, SDPO
TELEPHONE:

DATE

PROVIDER:

PLAN REVIEWED WITH PROVIDER AND COPY OF PLAN GIVEN TO CARE PROVIDER ON _____
DATE

PROVIDER SIGNATURE

DATE

CAREGIVER:

PLAN REVIEWED WITH **CAREGIVER** AND COPY OF PLAN GIVEN TO CARE PROVIDER ON _____
DATE


CAREGIVER SIGNATURE

DATE

Los Angeles County

Probation Child Welfare

**PLACEMENT
COORDINATING
MEMORANDUM**

No. 2017-01	Page: 1 of 2
Original Date: February 21, 2017	
Reissue Date:	
Approved:	
	
Luis Dominguez, Bureau Chief Placement Bureau Services	

SUBJECT: ELECTRONICS FOR YOUTH IN RESIDENTIAL CARE

The Personal Rights, California Code of Regulations - Foster Family Homes Regulations, Section 89372; Group Homes Regulations, Section 84072; Small Family Homes Regulations, Section 83072, states that all foster youth have the right to possess and use personal possessions. Additionally, 84072 (d) and the Welfare & Institutions Code, Section 16001.9 (b) state, "Nothing in this section shall be interpreted to require a foster care provider to take any action that would impair the health and safety of children in out-of-home placement."

Therefore, placed youth have the right to possess personal electronics for the purpose of communication, education and recreation, unless the youth's Needs & Services Plan (NSP) explicitly prohibits the possession or use of electronic devices. Each youth must be assessed individually as to whether it's appropriate for the youth to use or possess an electronic device. The role of the Child and Family Team (CFT) is critical. The CFT shall include the youth, Residential Team, Deputy Probation Officer (DPO)/Children's Social Worker (CSW), mental health providers, and family members, etc. as deemed appropriate. If personal electronics are deemed inappropriate by the treatment team, it shall be recorded in the youth's Case Plan and NSP. If an agreed upon resolution cannot be achieved, the team will try various strategies to come to a common agreement, including consultation with managerial and administrative staff, if necessary, and the final resolution will be documented in the youth's Case Plan and NSP. Both plans shall be approved and signed by all appropriate parties

Determining the Appropriateness of Access to Personal Electronics for Youth

The safety of youth and staff at the Residential Program is of paramount importance. The CFT will take into account each youth's personal history, maturity level and risk level to determine the appropriateness of electronic device use. The Residential Program shall afford a certain amount of trust to youth for whom the use or possession of personal electronic devices is deemed appropriate, while simultaneously following the Reasonable and Prudent Parent Standard (RPPS). Prudent parenting may include, but is not limited to, provision of education regarding social media safety and responsibility, staff supervision of electronic device use and rules of possession regarding electronic

devices for both staff and youth. The right to use or possess personal electronic devices may be revoked on a case by case basis in order to ensure the safety and well-being of youth, according to the agency's electronics policy and subject to reassessment by the CFT. If the CFT deems it inappropriate for the youth to use or possess personal electronic devices, their reasons shall be documented in the Case Plan and NSP.

Access to Computers (desktop or laptop)

It is the right of each youth to have access to education and social resources; therefore, all Residential Programs must have a working computer with internet access on-site. All youth must have access to the on-site computer within reasonable timeframes, and the Residential Program staff will reasonably monitor the internet activity of all youth, in accordance with the RPPS. All internet settings must have appropriate parental controls and filters.

Communication of Rights and Policies to Youth

The Residential Program must clearly articulate its personal electronics policy to newly placed youth during the orientation process. The policy shall be reviewed and signed by the youth and parent/legal guardian, if involved in the case plan, and a copy shall be provided to them. The policy shall address how the Residential Program applies the RPPS, which may include viewing texts and pictures. Furthermore, youth shall be notified that their conduct may impact their right to use or possess personal electronic devices and that right may be revoked on a case-by-case basis. For example, if a youth does not allow reasonable supervision by refusing to unlock the electronic device or reveal hidden applications, the personal electronic device may be taken, and the youth may lose the right to possess this device, according to the program's electronics policy.

**Office of Management and Budget (OMB)
Title 2 Code of Federal Regulations (CFR)
Chapter I, Chapter II, Part 200 et. al
and 2 CFR 1.100, Title 2, Part 1**

These exhibits can be obtained via internet by accessing the US Government Printing Office's home page at:

https://www.ecfr.gov/cgi-bin/text-idx?SID=0b5dbf7c673a7f2cc48b1d49ecab500c&mc=true&tpl=/ecfrbrowse/Title02/2tab_02.tpl

and

<https://www.gpo.gov/fdsys/pkg/CFR-2017-title2-vol1/pdf/CFR-2017-title2-vol1.pdf>

**DEPARTMENT OF AUDITOR-CONTROLLER
CONTRACT ACCOUNTING AND ADMINISTRATION HANDBOOK**

The purpose of the handbook is to establish required accounting, financial reporting, internal control, and contract administration standards for organizations that contract with Los Angeles County.

Revision: June 2021

AUDITOR-CONTROLLER CONTRACT ACCOUNTING AND ADMINISTRATION HANDBOOK

The purpose of this Handbook is to establish required accounting, financial reporting, internal control, and contract administration standards for organizations (CONTRACTOR) that contract with Los Angeles County (COUNTY).

The accounting, financial reporting, and internal control standards described in this Handbook are fundamental. These standards are not intended to be all inclusive or replace acceptable existing procedures, preclude the use of more sophisticated methods, or supersede any laws or requirements imposed by the applicable funding sources (i.e., federal and State agencies) that may be more restrictive and/or stringent. Instead, this Handbook represents the minimum required procedures and controls that must be incorporated into a CONTRACTOR'S accounting and financial reporting system. The internal control standards described apply to organizations with adequate staffing. Organizations with insufficient staff to implement the internal controls as described herein must adopt alternative controls (e.g., use of appropriate alternative staff or Board Officers) to comply with the intent of the standards to ensure effective internal control systems are in place within the organization. The CONTRACTOR'S subcontractors must also follow these standards unless otherwise stated in the Agreement.

A. ACCOUNTING AND FINANCIAL REPORTING

1.0 Basis of Accounting

Unless otherwise specified by the funding source, CONTRACTORS may elect to use either the accrual or cash basis of accounting during the year for recording financial transactions. Monthly invoices must be prepared on the same basis used for recording financial transactions.

The COUNTY recommends the use of the accrual basis for recording financial transactions.

1.1 Accrual Basis

Under the accrual basis for recording financial transactions, revenues are recorded in the accounting period earned (rather than when cash is received). Expenditures are recorded in the accounting period incurred (rather than when cash is disbursed).

Recorded accruals (e.g., to estimate expenditures) shall be reversed in the subsequent accounting period or when deemed appropriate in accordance with Generally Accepted Accounting Principles (GAAP).

A-C Contract Accounting and Administration Handbook

1.2 Cash Basis

If a CONTRACTOR elects to use the cash basis for recording financial transactions during the year:

- Necessary adjustments must be made to record the accruals at the beginning and the end of each year of the contract, and at the end of the contract.
- All computations, supporting records, and explanatory notes used in converting from the cash basis to the accrual basis must be retained.

1.3 Prepaid Expenditures

Prepaid expenditures (e.g., insurance, service agreements, lease agreements) must be expensed during the appropriate Agreement year to the extent goods and services are received, or are applicable to that Agreement year.

2.0 Accounting System

Each CONTRACTOR must maintain a **double entry accounting system** (utilizing debits and credits) with a General Journal, a Cash Receipts Journal, a General Ledger, and a Cash Disbursements Journal. The COUNTY requires that a Payroll Register (see Section A.2.6) also be maintained. Postings to the General Ledger and Journals shall be made at least on a monthly basis. The CONTRACTOR must maintain separate cost centers, which clearly identify funds received and expended on services provided under the COUNTY Agreement.

2.1 General Journal

A General Journal must be maintained for recording adjusting entries, reversing entries, closing entries, and other financial transactions not normally recorded in the Cash Receipts Journal or Cash Disbursements Journal. Entries in the General Journal must be adequately documented, and entered in chronological order with sufficient explanatory notations.

Example:

	<u>Debit</u>	<u>Credit</u>
Rent Expenditure	100	
Rent Payable		100

To record accrued rent to March 31, 20XX

2.2 Cash Receipts Journal

A Cash Receipts Journal must be maintained for recording all cash receipts (e.g., COUNTY warrants, contributions, interest income). The Cash Receipts Journal shall, at a minimum, contain the following column headings:

- Date
- Receipt Number
- Cash Debit Columns
- Income Credit Columns (for the following accounts):
 - COUNTY payments (one per funding source)
 - Contributions/Donations
 - Other Income (grants, sales of supplies/services, rental income, miscellaneous revenue, fees)
 - Description (entries in the description column must clearly specify the source of cash receipts.)

2.3 Cash Disbursements Journal

A Cash Disbursements Journal must be maintained for recording all cash disbursements (e.g., rent, utilities, maintenance)

The Cash Disbursements Journal must, at a minimum, contain the following column headings:

- Date
- Check Number
- Cash (Credit) Column
- Expenditure Account Name
- Description

Note (1) Separate cost columns are required for salary expenditures and other recurring cost classifications for each program.

Note (2) Entries in the description column must clearly specify the nature of the cost and the corresponding cost classification if not included in the column heading.

Note (3) Checks should not be written to employees (other than payroll, mileage reimbursements, travel reimbursements, and petty cash fund custodian checks).

A **Check Register** may be substituted for the Cash Disbursements Journal, but this is not recommended. If used, the Check Register must contain the same cost classifications and description information required when a Cash Disbursements Journal is used.

Disbursements without supporting documentation will be disallowed upon audit. Canceled checks and credit card statements (VISA, AMEX, department store, etc.) alone will not constitute acceptable support. See Sections A.3.2 and B.2.4 for additional guidance on documentation requirements.

2.4 General Ledger

A General Ledger must be maintained with accounts for all assets, liabilities, fund balances, revenues, and expenditures. Separate accounts or cost centers must be maintained for the revenues (e.g., donations, grants, rental income, miscellaneous revenue) and expenditures of each of the CONTRACTOR'S programs and activities (both COUNTY and non-COUNTY).

2.5 Chart of Accounts

A Chart of Accounts must be maintained:

- The COUNTY recommends that CONTRACTORS use the same expenditure account titles on the monthly invoice submitted to the COUNTY.
- If the CONTRACTOR uses account titles which differ from the account titles on the monthly invoice, each account title must clearly identify the nature of the transaction(s) posted to the account.
- CONTRACTOR must consistently post transactions that are of a similar nature to the same account. For example, all expenditures for travel shall be posted to the account titled "travel" and not intermixed with other expenditure accounts.

2.6 Payroll Register

The COUNTY recommends that a Payroll Register be maintained for recording all payroll transactions. The Register should contain the following:

- Name
- Position
- Unique code identifying each employee (e.g., employee number/ID)
- Salary or hourly wage
- Payment Record including:
 - Accrual Period
 - Gross Pay
 - Itemized Payroll Deductions
 - Net Pay Amount
 - Check Number

If a Payroll Register is not used, the information discussed above must be recorded in the Cash Disbursements Journal.

CONTRACTOR will ensure compliance with all applicable federal and State requirements for withholding payroll taxes (e.g., FIT, FICA, FUTA, SIT, SIU), reporting, filing (e.g., 941, DE-7, W-2, W-4, and 1099s), and all applicable tax deposits.

A-C Contract Accounting and Administration Handbook

CONTRACTOR will ensure compliance with Internal Revenue Service guidelines to properly classify employees and independent contractors.

2.7 Invoices/Billings

Each CONTRACTOR must submit an invoice/billing at least monthly to report to the COUNTY the financial activity of the program(s) as required in the applicable Agreement.

3.0 Records

Adequate care must be exercised to safeguard the accounting records and supporting documentation. Any destruction or theft of the CONTRACTOR'S accounting records or supporting documentation must be immediately reported to the COUNTY. CONTRACTOR must report, to the local law enforcement agency having jurisdiction, any act(s), which may reasonably be thought to constitute a crime, and/or which appear to have resulted in the destruction, damage, or alteration of any record subject to the provisions of this Handbook. CONTRACTOR must make their report to the local law enforcement agency within twenty-four hours of becoming aware of the acts which have resulted in the destruction, damage, or alteration of the record.

A copy of the resulting crime/incident report must be retained by the CONTRACTOR for a period of time under which the underlying records that were destroyed/damaged were required to be retained plus an additional three years, and must be retained for a longer period in the case of unresolved litigation or audit.

3.1 Retention

All accounting records (e.g., journals, ledgers), financial records, and supporting documentation must be retained for a minimum of three years after the termination of the CONTRACTOR'S Agreement or the date of submission of the final invoice, billing, or expenditure report, unless a longer retention period is prescribed by the Agreement or applicable laws and regulations, in which case the CONTRACTOR must comply with the longer retention period and all other retention requirements set forth in the Agreement or the applicable laws and regulations.

3.2 Encryption

CONTRACTOR must employ sufficient security measures to safeguard all COUNTY non-public information (e.g., confidential information including, but not limited to, the names and addresses of individuals, Social Security numbers, credit card information) that is electronically stored, used, and transmitted. Encryption standards must, at a minimum, be developed and implemented in accordance with the requirements prescribed by the COUNTY Agreement and COUNTY Board Policy 5.200.

3.3 Supporting Documentation

All revenues and expenditures shall be supported by original vouchers, invoices, receipts, or other documentation and shall be maintained in the manner described herein.

Invoices, receipts, canceled checks, and other documentation, including electronic documentation clearly establishing the nature and the reasonableness of the expenditure and its relevance to the COUNTY program being contracted for are required to support an outlay of funds. If the CONTRACTOR is unclear as to the appropriate documentation that must be retained to support an expenditure, CONTRACTOR shall consult with the COUNTY before the expenditure is charged to the COUNTY. Unsupported or inadequately supported disbursements will be disallowed upon audit. CONTRACTOR will be required to repay COUNTY for all disallowed costs.

Electronic documentation is permitted when the source documentation originated electronically. To the extent the source for electronic documentation is an original hardcopy document (e.g., PDF scans of original vendor invoices), CONTRACTOR shall retain the original source document for inspection by COUNTY. Photocopies (including scanned images) of invoices or receipts, any internally generated documents (e.g., vouchers, request for check forms, requisitions, canceled checks), and account statements alone do not constitute supporting documentation for purchases. COUNTY at its sole discretion may accept photocopies of supporting documentation in preference to the original documents based on the adequacy of the CONTRACTOR'S internal controls over electronic documentation and subject to any limitations imposed by the applicable funding source(s) (i.e., federal and State agencies).

CONTRACTORS must provide acceptable supporting documentation for all expenditures. For example, for the following categories of expenditures, acceptable supporting documentation may include, but not be limited to:

Payroll

- Timecards and attendance records signed and dated by the employee and the employee's supervisor (in ink or electronically) certifying the accuracy and approval of the reported time.
- Time distribution records by program, accounting for total work time on a daily basis for all employees.
- Records showing actual expenditures for Social Security and unemployment insurance.
- State and federal quarterly tax returns, federal W-2 forms, and federal W-4 forms.

A-C Contract Accounting and Administration Handbook

Personnel Files

- Documentation supporting approved employee pay rates.
- Proof of employees having the required educational, practical experience, and license(s)/certification(s) for their position.
- Criminal record clearances as required.

Contracted/Consultant Services

- Contracts detailing the nature and scope of services to be provided, and the method and rate of compensation (e.g., cost reimbursement, fixed fee, fee for service, rate per hour) for each service.
- Itemized invoices or other documentation detailing the nature of services provided.
- Time and attendance records or other documentation detailing when services were provided.
- Travel vouchers detailing purpose, time, and location of travel reimbursed by CONTRACTOR.
- Purchase orders and invoices for supplies reimbursed by CONTRACTOR.
- Copies of all completed federal Form 1099s, establishing that all payments to contractors/consultants were reported timely to federal and State taxing agencies.

Travel

- Travel policies of the CONTRACTOR (written).
- Travel expenditure vouchers.
- For travel related to conferences, meetings, seminars, symposiums, workshops, and other similar events, CONTRACTOR shall at a minimum, retain literature, including, but not limited to, agendas and handouts detailing the purpose of the event, as part of the CONTRACTOR'S documentation of the propriety of the travel expenditure.
- Itemized receipts for all travel expenditures (e.g., lodging for approved out-of-town travel, airfare, car rentals, ground transportation, parking)

Note: Reimbursement for actual receipts or per diem rates for lodging and meal expenditures must not exceed the COUNTY'S maximum reimbursement rate for employees. CONTRACTOR shall obtain the COUNTY'S maximum reimbursement rate for each fiscal year from the COUNTY before travel expenditures are charged.

Vehicle Expenditures

- Invoices/receipts for repairs, maintenance, fuel, etc.
- Vehicle registration card.
- Vehicle title.
- Insurance policy.

A-C Contract Accounting and Administration Handbook

- Purchase or financing agreement.
- Vehicle lease or rental agreement.
- For vehicles owned/leased by the CONTRACTOR and personal vehicles that are primarily used for business purposes, a vehicle mileage log must be maintained establishing the extent to which the vehicles are used for business versus non-business purposes. The mileage log must identify:
 - Trip dates
 - Origin and destination addresses of the trip
 - Purpose of the trip and how it relates to the Agreement services
 - Beginning and ending odometer readings and the resulting mileage for all trips (including non-business trips) to account for 100% use of the vehicle.
- For personal vehicles that are not primarily used for business purposes, documentation to support reimbursements to employees for mileage and parking must include:
 - Date and time of travel
 - Origin and destination addresses of the trip and the resulting mileage
 - Purpose of the trip and how it relates to the Agreement services
 - Rates claimed (Note: Reimbursement rates for mileage must not exceed applicable federal guidelines.)
 - Parking and toll charges reimbursed
 - Itemized receipts for reimbursed parking and toll charges

All supporting documentation must include sufficient information to identify the vehicle the expenditures are related to, which shall include, but not be limited to, vehicle make and model, vehicle license number, and vehicle identification number.

CONTRACTOR must only charge the COUNTY for vehicle expenditures (e.g., gasoline, repairs/maintenance, insurance, depreciation) to provide COUNTY Agreement services. CONTRACTOR must pro-rate vehicle expenditures based on vehicle usage to exclude the portion of expenditures related to non-COUNTY and non-business use (i.e., non-COUNTY program services, personal use, employee transportation to and from work).

Operating Expenditures (e.g., utilities, office supplies, equipment rentals)

- Bona fide contracts or lease agreements, if applicable.
- Invoices and receipts detailing the cost and items purchased will constitute the primary supporting documentation.
- Documentation acknowledging the receipt of purchased goods and services (e.g., itemized delivery confirmations, stock received reports, packing slips, or other documentation) signed by the employee(s) who verified the good/services were approved and received.

Outside Meals

- Itemized receipts and/or invoices for all meals.
- Documentation detailing the nature and business purpose of each meal.
- Documentation identifying the participants of each meal.

Loans (including, but not limited to, loans to the CONTRACTOR from employees and/or related parties)

- Written loan agreement approved by the CONTRACTOR'S Board of Directors.
- Documentation showing that loaned funds were deposited into a CONTRACTOR bank account.
- Documentation showing that loan proceeds were actually used for COUNTY programs.

To the extent that the loan agreement provides for the payment of interest, the interest may not be an allowable expenditure under the Agreement. If the payment of interest is allowable, interest must not be accrued at a rate which exceeds the COUNTY Treasury Rate plus one percent.

3.4 Payments to Affiliated Organizations or Persons (i.e., Related Party Transactions)

Prior to making payments to affiliated organizations or persons (i.e., related party transactions), CONTRACTOR must complete and submit to the COUNTY a disclosure statement identifying the nature of the relationship with the affiliated or related organizations/persons.

CONTRACTOR must not make payments to affiliated organizations or persons for program expenditures (e.g., salaries, services, rent) that exceed the lesser of actual costs of the affiliated or related organizations/persons or the reasonable costs for such expenditures. A reasonable cost shall be the price that would be paid by one party to another when the parties are dealing at arm's length (fair market price).

Organizations or persons (related parties) related to the CONTRACTOR or its members by blood, marriage, or through a legal organization (i.e., corporation, partnership, parent company, subsidiary organization, association) will be considered affiliated for purposes of this Agreement. COUNTY shall be solely responsible for determining affiliation unless otherwise allowed and approved by the State or federal agencies.

Payments to affiliated organizations or persons will be disallowed upon audit to the extent the payments exceed the lesser of actual costs of the affiliated or related organizations/persons or the reasonable costs (fair market value) for services rendered or items purchased.

A-C Contract Accounting and Administration Handbook

Documentation must be maintained to support the actual costs of the affiliated or related organizations/persons and the reasonable costs for services rendered or items purchased, and shall include, but not be limited to:

- Financial records (e.g., general ledgers, payroll registers, labor distributions, invoices/receipts) of the affiliated or related organizations/persons.
- Price and rate quotations for the same services/goods from an adequate number of independent and qualified sources.
- Cost and price analysis.
- Vendor selection analysis.

3.5 Filing

All relevant supporting documentation for reported revenues and program expenditures must be filed in a systematic and consistent manner. It is recommended that supporting documents be filed as follows:

- Checks – Numerically
- Invoices – Vendor name and date
- Vouchers – Numerically
- Receipts – Chronologically
- Timecards – Pay period and alphabetically

3.6 Referencing

Accounting transactions posted to the CONTRACTOR'S books must be appropriately cross-referenced to supporting documentation. It is recommended that expenditure transactions on the CONTRACTOR'S books be cross-referenced to the supporting documentation as follows:

- Invoices – Vendor name and date
- Checks – Number
- Vouchers – Number
- Revenue – Receipt number

Supporting documentation for non-payroll expenditures (i.e., operating expenditures) should be cross-referenced to the corresponding check issued for payment. If multiple invoices are paid with one check, all related invoices should be cross-referenced to the check issued for payment.

4.0 Donations and Other Sources of Revenue

For CONTRACTORS that use donations and/or other sources of revenue (e.g., grants, sales of supplies/services, rental income, miscellaneous revenue, fees) to pay for expenditures related to a COUNTY service, the CONTRACTOR must maintain accounting records that clearly identify the specific expenditures that were paid for with the other source(s) of revenue.

Restricted donations and other sources of revenue, earmarked specifically for the Contract, must be utilized on allowable contract expenditures. Similarly, income from investments (e.g., interest or dividends), where the source of the amount invested is COUNTY program funds, shall be deemed restricted revenue that must be utilized on allowable expenditures, or returned to the COUNTY as specified under the attached Agreement.

5.0 Audits

For routine audits and inspections, CONTRACTOR will make available to COUNTY representatives, upon request, during working hours, during the duration of the contract and for a period of three years thereafter (unless a longer period is specified under the Agreement, or by applicable laws and regulations), all of its books and records, including, but not limited to, those which relate to its operation of each project or business activity, which is funded in whole or part with governmental monies, whether or not such monies are received through the COUNTY. All such books and records shall be made available upon request at a location within or near Los Angeles County.

In general, audits will normally be performed during normal business hours, Monday through Friday. However, COUNTY retains the right to inspect and conduct investigations of CONTRACTOR'S program/fiscal operations and contract compliance at any time, without prior notice to CONTRACTOR seven days a week, when the COUNTY has information which it, in its sole discretion, deems justifies such an unannounced visit, inspection, audit or investigations.

6.0 Single Audit Requirements

The Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance), "Audit Requirements" states that certain organizations receiving federal awards, including pass-through awards, have annual single audits. Details are contained in the Uniform Guidance.

A copy of any single audit report must be filed with the COUNTY upon request or within the timeframes prescribed by the COUNTY Agreement.

7.0 Subcontracts

CONTRACTOR must not subcontract services without the prior written consent of the COUNTY.

CONTRACTOR must provide COUNTY with copies of all executed subcontracts and must be responsible for the performance of their subcontractors. At the sole discretion of COUNTY, CONTRACTOR may submit an electronic copy of executed subcontracts in preference to a hardcopy.

A-C Contract Accounting and Administration Handbook

CONTRACTOR must monitor the activities of their subcontractors as necessary, but no less than annually, to ensure governmental monies are used for their intended purposes, compliance with applicable federal, State, and COUNTY requirements, and performance goals are achieved. The monitoring shall include, but is not limited to:

- Performing reviews of the subcontractor's fiscal and program operations.
- Performing reviews of required financial and performance reports.
- Verifying all subcontractors are audited as required.
- Following-up and ensuring appropriate corrective action is taken on all deficiencies pertaining to the subcontract.

B. INTERNAL CONTROLS

Internal controls are processes designed to provide reasonable assurance regarding the achievement of the CONTRACTOR'S objectives relating to operations, reporting, and compliance, and should safeguard the CONTRACTOR'S assets from misappropriations and misuse. Each CONTRACTOR must prepare necessary written procedures establishing internal controls for its personnel's use. The CONTRACTOR must instruct all personnel in these procedures and continuously monitor operations to ensure compliance with them.

1.0 Cash Receipts

1.1. Separate Fund or Cost Center

All contract revenues must be maintained in a bank account. If revenues from other sources are maintained in the same bank account, revenues for each source must be clearly identifiable in the accounting records through the use of cost centers or separate accounts.

1.2 Manual Deposits

When collections are received by mail, two employees should be assigned to open the mail and list all collections received on a check remittance log.

All checks shall be restrictively endorsed upon receipt.

Cash received shall be recorded on pre-numbered receipts and the receipts/check remittance log shall be reconciled to the amount being deposited.

Voided receipts shall be retained and the sequence of receipts issued/voided shall be periodically accounted for.

Cash receipts (i.e., cash and checks) totaling \$500 or more shall be deposited within one day of receipt or as soon as reasonably possible.

A-C Contract Accounting and Administration Handbook

Collections of less than \$500 may be held and secured and deposited weekly or when the total reaches \$500, whichever occurs first. If CONTRACTOR can establish that a larger limit is warranted, CONTRACTOR may request authorization from COUNTY to increase the limit to an amount greater than \$500.

Deposit slips shall be retained in an organized manner, and shall contain sufficient reference information for comparison to the Cash Receipts Journal and individual receipts, if applicable. A recommended best practice is to retain photocopies of the deposit slip and the COUNTY warrants reflected on each deposit slip, or record the individual warrant numbers onto the deposit slip.

1.3 Separation of Duties

An employee who does not handle cash shall record all cash or check receipts in the CONTRACTOR'S accounting records.

1.4 Bank Reconciliations

Bank statements should be received and reconciled by someone with no cash handling, or check writing responsibilities.

Monthly bank reconciliations should be prepared and reviewed by management for appropriateness and accuracy within 30 days of the bank statement date. The bank reconciliations should be signed and dated by both the preparer and the reviewer. CONTRACTOR should resolve reconciling items timely. See **Exhibit A** for a suggested bank reconciliation format.

2.0 Disbursements

2.1 General

All disbursements (other than those made for petty cash purchases), shall be made using a CONTRACTOR check, electronic funds transfer, or debit/credit card.

Blank check stock must be secured and accounted for to preclude unauthorized use.

Checks shall NOT be payable to "cash" or signed in advance. Similarly, electronic debits to "cash" or withdrawals of cash shall not be made. Checks written to employees for reimbursement of out-of-pocket costs must be supported by receipts and invoices.

A second signature is recommended on all checks over \$500, unless otherwise specified in the contract. In instances where the payee is also a signor on the check, the disbursement shall be reviewed and approved by a higher-level employee or Board member who shall also sign the check.

If the bookkeeper signs checks, a second signature shall be required on the checks, regardless of limits specified in the contract.

Voided checks shall be marked void. If paper checks are used, the signature block must be cut out. Voided checks must be maintained with the canceled checks.

Returned or undelivered checks shall be canceled regularly, but no less frequent than monthly.

Unclaimed checks shall be canceled periodically, but no less frequent than every six months.

All supporting documentation shall reference the payment made for the expenditure (e.g., check number, transaction number for an electronic funds transfer or credit card payment) and marked "paid" or otherwise canceled to prevent duplicate payments or reuse.

Disbursements without adequate supporting documentation will be disallowed upon audit.

2.2. Approvals and Separation of Duties

Employees responsible for approving cash disbursements and/or signing checks must examine all supporting documentation at the time the checks are approved and signed.

All disbursements, excluding petty cash purchases, shall be approved by persons independent of check preparation and bookkeeping activities.

2.3 Petty Cash

Petty cash must NOT be used as a substitute for normal purchasing and disbursement practices (i.e., payment by check).

A CONTRACTOR may establish a petty cash fund up to \$500 to pay for **small** incidental expenditures incurred (e.g., postage due, parking meters, small purchases of office supplies) and may establish multiple petty cash funds when appropriate (i.e., petty cash fund for each location where services are rendered). The CONTRACTOR must obtain written approval from the COUNTY to establish a single petty cash fund greater than \$500.

Petty cash disbursements must be supported by original invoices, store receipts, or other external authenticating documents indicating each item purchased and the employee making the purchase. In the event that external supporting documentation is not obtainable for minor disbursements (under \$10), such as parking meters, fees, etc., then some written documentation shall be maintained and approved by a supervisory employee not associated with the transaction.

The petty cash fund must be maintained on an imprest (fixed) basis.

A check should be drawn to set up the fund and to periodically replenish the fund up to the imprest amount. Receipts, vouchers, etc., supporting each fund replenishment must be bound together, filed chronologically and cross referenced to the reimbursement check.

A petty cash log shall be maintained for each petty cash fund to track the usage and replenishment of petty cash. Petty cash logs should be reviewed on a monthly basis by a higher-level employee not having responsibilities over the respective petty cash fund to ensure petty cash funds are being used for their intended purposes. See **Exhibit B** for a suggested petty cash log format.

There should be a separate petty cash fund custodian assigned for each petty cash fund established. The petty cash fund custodian should not have any other cash handling responsibilities (i.e., sign checks).

The petty cash fund custodian will be responsible for maintaining and disbursing the petty cash funds and requesting replenishment of the fund up to its imprest amount when necessary.

Each day the petty cash fund is used, the petty cash fund custodian should reconcile the petty cash fund amount to the cash-on-hand, receipts/invoices for which replenishment has not yet been requested, and replenishment requests in process, but not yet received.

Petty cash must be secured at all times in a locked safe, file cabinet, or cash drawer. Access to the petty cash fund should be limited to the petty cash fund custodian and one other employee in case of absence or emergency.

Surprise cash counts of each petty cash fund shall be conducted periodically, but no less than quarterly, to ensure the petty cash fund is being maintained as required. The cash counts should be conducted by a higher-level employee not having cash handling responsibilities over the specific fund being counted. Documentation should be maintained to support each cash count conducted and should be signed and dated by the employee conducting the cash count.

2.4 Credit Cards

Credit cards issued in the CONTRACTOR'S name must be adequately safeguarded and usage monitored to ensure that only authorized and necessary items are purchased.

Credit card purchases should be pre-approved by CONTRACTOR management to ensure that they are reasonable and necessary.

The use of an employee's personal credit card on behalf of the CONTRACTOR for authorized and necessary items should be limited to purchases where established purchasing and disbursement practices are not suitable.

All credit card disbursements must be supported by original invoices, store receipts, or other external authenticating documents indicating each item purchased, the employee making the purchase, and the justification for the purchase. ***Credit card statements alone are not sufficient support for credit card purchases.***

3.0 Timekeeping

3.1 Timecards

Timecards or time reports must be prepared for each pay period. Timecards or time reports must indicate the total hours worked each day by program and the total hours charged to each of the CONTRACTOR'S programs. ***Time estimates alone do not qualify as support for payroll expenditures and will be disallowed upon audit.***

All timecards and time reports must be signed and dated by the employee and the employee's supervisor (in ink or electronically) to certify the accuracy and approval of the reported time. To the extent the CONTRACTOR utilizes electronic timecards and time reports, the CONTRACTOR'S electronic time reporting system must also have sufficient controls to prevent unauthorized alteration/changes to electronic timecards and time reports.

3.2 Personnel and Payroll Records

Adequate security must be maintained over personnel and payroll records with access restricted to authorized individuals. Any automated personnel and payroll records which contain confidential information, such as, but not limited to, employee addresses and medical information, should be adequately encrypted using the minimum encryption standards described in Section A.3.2 to prevent unauthorized access and use.

Personnel and payroll records shall include, but are not limited to, the following:

- Employee's authorized salary rate
- Employee information sheet (e.g., employee contact information, emergency contact information)
- Resume and/or application
- Proof of qualifications for the position, if required (e.g., notarized copy or original diploma, license(s))
- Performance evaluations
- Criminal record clearance (if required)

- Citizenship Status
- Benefit balances (e.g., sick time, vacation)
- Health Clearances (if required)

Benefit Balances

Employee benefit balances (e.g., sick time, vacation, personal time) should be maintained on at least a monthly basis. Benefit balances should be increased when benefit hours are earned and decreased as hours are used.

3.3 Incentive Compensation

Incentive compensation paid to employees should be reasonable, based on a measurable performance metric (e.g., cost reduction, efficient performance, suggestion awards, safety awards), and in accordance with the CONTRACTOR'S established policy or agreement with employees. The CONTRACTOR must maintain documentation to support incentive compensation payments to employees.

3.4 Limitations on Positions and Salaries

The CONTRACTOR shall not pay any salaries higher than those authorized in the COUNTY Agreement or by the applicable funding source(s) (i.e., federal and State agencies).

If an employee serves in the same or dual capacities under more than one agreement or program, time charged to the contracts or programs taken as a whole may not exceed 100% of the employee's actual time worked.

Salaried employees shall be paid a salary that corresponds with the employee's work schedule. For example, a half-time salaried employee performing the same or similar work should be paid proportionately less than a full-time salaried employee.

Payroll expenditures for employees working on more than one Agreement, program, or activity must be equitably allocated in accordance with the applicable sections of the Uniform Guidance and any other applicable funding source(s) (i.e., federal and State agencies) requirements.

The CONTRACTOR must not charge the COUNTY for any retroactive salary adjustments made to any employee without written approval from the COUNTY.

3.5 Separation of Duties

Payroll checks should be distributed by persons not involved in timekeeping, preparing of payroll transactions, or reconciling bank accounts.

All employee hires and terminations, or pay rate changes, must be approved in writing by authorized persons independent of payroll responsibilities.

4.0 Capital Assets

Capital assets are tangible assets of significant value having a useful life that extends beyond the current year and are broadly classified as land, buildings and improvements, and equipment. All other assets with an acquisition cost of \$5,000 or more shall be capitalized.

Acquisition cost means the net invoice unit price of an item, including shipping costs and sales taxes, the cost of any modifications, attachments, accessories, or auxiliary apparatus necessary to make it usable for the purpose for which it was acquired.

Capital asset purchases shall be approved by the CONTRACTOR'S Board of Directors or their authorized representative.

Capital assets shall not be ordered or purchased during the last three months of the term of the CONTRACTOR'S Agreement with the COUNTY, unless the acquisition is pre-approved by the COUNTY.

4.1 Acquisition

As specified in the contract, CONTRACTOR must submit a purchase versus lease analysis to COUNTY and obtain written authorization before making any capital asset purchase where the acquisition cost is \$25,000 or more, and all, or a portion of the cost of the capital asset will be charged to the COUNTY contract.

4.2 Non-Capital Asset Equipment

Non-capital asset equipment is defined as equipment containing COUNTY non-public information, or equipment with a unit cost of more than \$250 but less than \$5,000, a useful life over one year, and can generally be easily carried or moved; especially by hand (e.g., personal computers, related peripherals, fax machines, and other portable assets).

4.3 Asset Identification and Inventory

All fixed assets including capital and non-capital asset equipment, purchased in full, or in part, with contract funds are to be used for the benefit of the contract and should be appropriately tagged.

Each CONTRACTOR must maintain a current listing of fixed assets, including the item description, serial number, date of purchase, acquisition cost and source(s) of funding.

An inventory of all fixed assets must be conducted at least once every two years to ensure that all fixed assets are accounted for and maintained in proper working order. Documentation must be maintained to support the inventory conducted.

4.4 Depreciation and Use Allowance

Unless otherwise approved by the COUNTY, compensation for the use of buildings and other capital improvements may be made through depreciation, or a use allowance:

- The computation of depreciation/use allowance is based on the acquisition cost of the asset(s).
- The computation should exclude the cost of:
 - Land
 - Buildings and equipment donated by governmental agencies
 - Buildings and equipment contributed by the CONTRACTOR to satisfy funding matching requirements
- For depreciation, an appropriate useful life must be established for the asset(s), which considers factors such as the nature of the asset used, susceptibility to technological obsolescence, etc.
- Appendix B to IRS Publication 946, “How to Depreciate Property,” contains guidelines for establishing an asset’s useful life.
- A use allowance is computed as an annual rate that may not exceed an annual rate of two-percent of the acquisition cost if the asset is a building or improvement. A use allowance in excess of the ceiling percentage must be justified by the CONTRACTOR.

4.5 Rental Costs of Buildings and Equipment

Rental costs are allowable to the extent that the rates are reasonable considering rental costs of comparable property, market conditions in the area, condition of the property being leased, etc.

- Under a “sale and leaseback” arrangement, rental costs would be allowable up to the amount that would be allowed if the CONTRACTOR had continued to own the property. This amount generally includes expenditures such as depreciation, maintenance, taxes, and insurance.
- Under a “less-than-arms-length” lease, costs are only allowable up to the amount that would be allowable had title to the property vested in the CONTRACTOR. This amount generally includes expenditures such as depreciation, maintenance, taxes, and insurance.

4.6 Security

Physical security must be adequately maintained over fixed assets to prevent the misuse or theft of COUNTY property.

4.7 Property Management

The CONTRACTOR must assume responsibility and accountability for the maintenance of all fixed assets purchased, leased, or rented with contract funds.

The CONTRACTOR must maintain documentation to support all cases of theft, loss, damage, or destruction of fixed assets purchased with contract funds. The documentation shall, at a minimum, contain item identification, recorded value, facts relating to loss, and, where appropriate, a copy of the law enforcement report. In cases where the loss resulted from suspected criminal activity (e.g., theft, vandalism, arson), the incident must be reported to the local law enforcement agency with jurisdiction over the location of the suspected crime.

The supporting documentation, including a copy of any related crime/incident reports, must be retained by the CONTRACTOR for a period of time under which the underlying records were destroyed or damaged were required to be retained plus an additional three years, and shall be retained for a longer period in the case of unresolved litigation or audit.

The CONTRACTOR must promptly report in writing to the COUNTY, and provide copies of all relevant supporting documentation described above, all cases of theft, loss, damage, or destruction of:

- Fixed assets purchased with contract funds with an acquisition cost or aggregate costs of \$950 or more.
- Fixed assets that electronically stored, used, and/or transmitted COUNTY non-public information.

CONTRACTOR must dispose/return to the COUNTY all fixed assets in accordance with the Agreement.

5.0 Bonding – All officers, employees, and contractors who handle cash or have access to the CONTRACTOR’S funds (e.g., prepare checks) shall be bonded.

6.0 Investments – COUNTY program funds may not be utilized for investments where there is a risk of loss.

C. COST PRINCIPLES

1.0 Policy

It is the intent of the COUNTY to provide funds for the purpose of the CONTRACTOR to provide the services required by the Agreement. CONTRACTOR must use these funds on actual expenditures in an economical and efficient manner, and ensure they are reasonable, proper,

and necessary costs of providing services and allowable in accordance with the applicable sections of the Uniform Guidance and any other applicable funding source(s) (i.e., federal and State agencies) requirements.

1.1. Limitations on Expenditures of Program Funds

CONTRACTOR must comply with the Agreement and applicable sections of the Uniform Guidance and any other applicable funding source(s) (i.e., federal and State agencies). The Uniform Guidance defines direct and indirect costs, discusses allowable cost allocation procedures and the development of Indirect Cost Rates, and specifically addresses the allowability of a variety of expenditures.

If a CONTRACTOR is unsure of the allowability of any particular type of expenditure, the CONTRACTOR should request advance written approval from the COUNTY prior to incurring the expenditure.

1.2 Expenditures Incurred Outside the Agreement Period

Expenditures charged against program funds may not be incurred prior to the effective date of the Agreement or subsequent to the Agreement termination, or expiration date. Similarly, current period expenditures related to events or activities that occurred prior to the effective date of the Agreement may not be allowable. For example, legal costs incurred prosecuting or defending a lawsuit stemming from events which occurred during a period not covered by a valid Agreement between CONTRACTOR and COUNTY are not allowable.

1.3 Budget Limitation

Expenditures must not exceed the maximum limits in the contract budget.

1.4 Unspent Program Funds

CONTRACTOR must return any unspent program funds to the COUNTY, unless otherwise permitted by the contract. In addition, the COUNTY will determine the disposition of unspent program funds upon termination of the Agreement.

1.5 Necessary, Proper and Reasonable

Only those expenditures that are necessary, proper and reasonable to carry out the purposes and activities of the Program are allowable.

2.0 Allocable Expenditures

For CONTRACTORS that operate programs or provide services in addition to the services required under contract, the CONTRACTOR must allocate expenditures to all benefiting programs, activities, and funding sources using an equitable basis. Unallowable activities (e.g., fundraising or investing) must also receive an appropriate allocation of costs.

In accordance with the applicable sections of the Uniform Guidance, CONTRACTORS must define their allocable expenditures as either direct or indirect costs (as defined below) and allocate each cost using the basis most appropriate and feasible. ***Actual conditions must be taken into account when selecting the method and/or base to be used to allocate expenditures to ensure expenditures are allocated equitably to each benefiting program, activity, and funding source.***

The CONTRACTOR must maintain documentation for allocated expenditures (e.g., timecards, time summaries, calculation of full-time equivalents, square footage measurements).

Under no circumstances shall allocated expenditures be charged to an extent greater than 100% of actual expenditures or the same expenditure be charged both directly and indirectly.

2.1 Direct Costs

Unless otherwise set forth in this contract, or required by the funding source(s), direct costs are defined as those costs that can be identified specifically with a particular final cost objective (e.g., a particular program, service, or other direct activity of an organization). Examples of direct costs include salaries and benefits of employees working on the program, supplies and other items purchased specifically for the program, costs related to space used by employees working on the program.

For all employees, other than general and administrative, the hours spent on each program (activity) should be recorded on the employees' timecards and the payroll expenditures should be treated as direct charges and distributed on the basis of the actual recorded hours spent on each program or using another equitable basis based on actual conditions.

Shared costs (i.e., costs that benefit more than one program or activity) which can be distributed in reasonable proportion to the benefits received may also be direct costs.

Examples of bases for allocating shared costs as direct costs:

- Number of direct hours spent on each program
- Full-time equivalents for each program
- Square footage occupied by each program
- Other relevant and equitable methods of allocation

2.2 Indirect Costs

Indirect costs are those costs that have been incurred for common or shared purposes and cannot be readily identified with a particular final cost objective. Examples of indirect costs include the salaries and benefits of executive officers and administrative personnel (e.g., accounting, human

A-C Contract Accounting and Administration Handbook

resources, information technology), depreciation and use allowances for administrative buildings, and other costs related to the general administration of the organization. Only expenditures that are allowable in accordance with the applicable sections of the Uniform Guidance and any other applicable funding source(s) (i.e., federal and State agencies) shall be included as indirect costs and allocated to the COUNTY program(s).

Examples of bases for allocating indirect costs:

- Total direct salaries and wages
- Total direct costs, excluding unallowable costs that do not represent an activity of the CONTRACTOR (e.g., fines, penalties, bad debts), capital expenditures, and other distorting items such as significant one-time expenditures, or subcontractor payments

2.3 Acceptable Indirect Cost Allocation Methods

The Uniform Guidance describes the following allowable methods for allocating and charging indirect costs:

- Simplified allocation method
- Direct allocation method
- Multiple allocation base method
- Negotiated indirect cost rate
- De minimis rate

CONTRACTOR must ensure the indirect cost allocation methodology chosen is clearly described in their Cost Allocation Plan and is used consistently to allocate indirect costs.

Simplified Allocation Method

This method can be used when an organization's major functions benefit from its indirect costs to approximately the same degree. Using this method, all allocable costs are considered indirect costs and an indirect cost rate is determined by dividing total allowable indirect costs by an equitable distribution base.

Example:

Agency-wide indirect costs	\$250,000
Less: Capital Expenditures	<u>10,000</u>
Allocable indirect costs	240,000
Total Agency-wide direct salaries	\$1,000,000
Indirect cost rate ($\$240,000/\$1,000,000$)	24%
Program direct salaries	\$100,000
Program indirect costs ($24\% \times \$100,000$)	<u>\$24,000</u>

Direct Allocation Method

This method can also be used when an organization's major functions benefit from its indirect costs to approximately the same degree. Using this method, all costs except general administration and general expenditures are treated as direct costs. Shared costs, such as depreciation, facility and equipment rentals, facilities maintenance, telephone, and other similar expenditures, are prorated individually to each direct activity on a basis appropriate for that type of cost.

The remaining costs, which consist exclusively of general administration and general expenditures, are then allocated using the simplified allocation method previously discussed.

Multiple Base Allocation Method

This method can be used when an organization's major functions benefit from its indirect costs in varying degrees. Using this method, indirect costs are grouped to permit allocation of each grouping on the basis of the benefits provided to the major functions. Each grouping is then allocated individually using the basis most appropriate for the grouping being allocated.

Negotiated Indirect Cost Rates

CONTRACTORS have the option of negotiating an indirect cost rate or rates for use on all their federal programs. The CONTRACTOR must submit a cost allocation plan to the federal agency with the largest dollar value of Federal awards funded to the organization. The approved indirect cost rate is then applied to the total approved direct cost base.

If CONTRACTOR has a federally approved indirect cost rate, CONTRACTOR must submit a copy of the approval letter to COUNTY upon request.

De Minimis Rate

A CONTRACTOR that does not have a current negotiated (including provisional) rate may elect to charge indirect costs based on a de minimis rate of 10% of modified total direct costs. If elected, this rate may be used indefinitely, but must be used consistently to charge indirect costs to all programs and activities.

Modified total direct costs includes all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). It excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs, and the portion of each subaward in excess of \$25,000.

2.4 Indirect Cost Limitations

CONTRACTOR must ensure indirect costs charged to the COUNTY program are within any maximum limitations established by statutory requirements. Any amounts charged in excess of maximum limitations will be disallowed upon audit unless otherwise allowed and approved by the applicable COUNTY, State, or federal agency.

2.5 Cost Allocation Plan

CONTRACTOR must submit an annual Agency-wide Cost Allocation Plan as required by the COUNTY agreement and when requested by COUNTY. The Cost Allocation Plan must be prepared in accordance with COUNTY instructions and the applicable sections of the Uniform Guidance, and include the following information:

1. CONTRACTOR general accounting policies:
 - Basis of accounting
 - Fiscal year
 - Method for allocating indirect costs (e.g., simplified, direct, multiple, negotiated rate, de minimis rate)
 - Indirect cost rate allocation base (e.g., direct salaries and wages, direct costs)
2. Identify the CONTRACTOR'S direct, shared, and indirect costs (by category) and describe the cost allocation methodology for each category.
3. Signature of CONTRACTOR management certifying the accuracy of the plan.

D. UNALLOWABLE COSTS

The Uniform Guidance addresses the allowability of a variety of costs. For all costs, there are certain restrictions and limitations; however, the following costs are not allowable under any circumstances:

- Bad debts
- Contingency provisions
- Contributions and donations
- Fines and penalties (e.g., including, but not limited to, NSF Check Fees, Traffic Citation Fees)
- Fundraising activities
- Interest (unless expressly allowed by federal guidelines)
- Losses on other awards

E. OVERPAYMENTS

If upon audit, or at any time during the Agreement year, it is determined that invoices submitted to the COUNTY which were used as a basis for payments to the CONTRACTOR were inaccurate, COUNTY shall determine the total overpayment and require the CONTRACTOR to repay COUNTY. The COUNTY may withhold payments from CONTRACTOR'S future payments for any amounts not returned to the COUNTY or credited to the Contract unless otherwise prohibited by State or federal regulations.

F. GOVERNANCE

OVERVIEW

Large numbers of nonprofit corporations, organized for public benefit, receive public funds through contracts with Los Angeles County. Many County service contracts support key public initiatives, including protecting children, providing health care and foster employment, and reducing the effects of mental impairments and substance abuse.

Nonprofit organizations doing business with Los Angeles County must conduct their work in a manner consistent with their charitable mission and the public purposes embodied in County contracts. This demands that nonprofit agency governing boards be conscious of their fiduciary responsibilities in providing oversight and making decisions.

Directors, officers, and employees of nonprofit corporations with which Los Angeles County contracts shall not:

- Permit or benefit from self-dealing transactions (unless permitted by law), or unreasonable compensation
- Misuse or dissipate scarce public resources

1.0 Independence

It is recommend that Nonprofit agencies doing business with the County of Los Angeles have a governing board of at least 5 directors (however, under no circumstances shall a governing board have less than 3 directors), a majority of whom (1) have not been employed by the Nonprofit within 5 years before their election, (2) have no direct or indirect material financial interest in the organization, or any other relationship that could create a conflict of interest on the part of the director(s). A financial interest may exist for reasons of business, investment, or family relationship (including a director's brother, sister, ancestor, descendant, spouse, brother-in-law, sister-in-law, son-in-law, daughter-in-law, mother-in-law, or father-in-law).

"Financial interest" means an actual or potential ownership, investment, or compensation arrangement in or with any entity or individual with which the

organization has, or is negotiating, a transaction or arrangement. The term "independent", when used to describe Directors who serve on the oversight committees described in paragraph 3.0 refers to persons meeting the requirements of this paragraph.

2.0 Oversight Mechanisms

An organization's governing board shall provide for its governance in accordance with the following:

- Adopt and disclose the organization's governance standards including director qualifications, responsibilities, and compensation.
- Adopt and disclose a code of business conduct and ethics for directors, officers, and employees, and promptly disclose to the County any waivers of the code affecting organization directors, officers, or employees.
- Be familiar with the terms and conditions of all the Organization's County contracts. No less than annually, the board should review the Organization's compliance with contract provisions, particularly including insurance, internal control, federal and State reporting and payment requirements for payroll withholding, and report deviations to the County oversight department.

An organization's governance guidelines and code of ethics shall provide means to annually distribute to and obtain from directors, officers and employees written acknowledgments of their adherence to the organization's governing standards. They must incorporate a mechanism for disclosing and addressing possible conflicts of interest. They must provide for appropriate record-keeping, particularly of transactions and arrangements required to be reviewed by the governing board and where significant organization resources are expended by or for officers, directors and employees.

An organization's governance guidelines and code of ethics shall provide for "just and reasonable" compensation and benefits consistent with the compensation amount or guidelines established in the Organization's contract(s) with the COUNTY. Compensation and benefits of directors, officers, and employees should be comparable to agencies of similar size and function (See Section B.3.3, "Limitations on Positions and Salaries"). No employee may receive compensation or benefits for more than one Organization job. For example, the CEO cannot receive compensation or benefits for the job of CEO and another job such as program manager, etc.

3.0 Oversight Committees

An organization's governing board shall establish committees having the following characteristics, compensation, and duties.

Nominating Committee

The Board shall establish a nominating committee composed entirely of independent directors to consider new appointments to the Board.

Compensation and Benefits Committee

The Board shall establish a Compensation and Employee Benefits Committee composed entirely of independent directors to establish compensation and benefits for the Organization's Chief Executive Officer, President, Chief Financial Officer, and Treasurer.

Audit Committee

The Board shall establish an Audit Committee of no fewer than three directors, all of whom must be independent, and one of whom shall have financial experience. In no event shall employees, including, but not limited to the president, chief executive officer, the treasurer, or chief financial officer serve on the Audit Committee.

Annual Audit Duties:

- If the CONTRACTOR expends federal awards in excess of \$750,000 in a year, the Audit Committee will recommend an independent auditor to perform the annual single audit of the CONTRACTOR'S financial records. The audit must be performed in accordance with Generally Accepted Government Auditing Standards and comply with the Single Audit Act and Uniform Guidance.
- The Audit Committee must negotiate the independent auditor's compensation on behalf of the governing Board, oversee its work, and resolve disagreements between management and auditors regarding financial reporting.
- The Audit Committee must confer with the auditor to review the audit and decide whether to accept it, satisfy itself that the financial affairs of the nonprofit organization are in order, and ensure that the COUNTY receives a copy of the annual audit report and all other audits, reviews, and other third-party reports.

Additional Audit Committee Duties

The Audit Committee must:

- Establish procedures for receiving and addressing complaints regarding accounting, internal controls, and auditing matters.
- Monitor and take steps to ensure proper management response to major performance or fiscal deficits, such as the expressed concerns or claims of major creditors.

- Pre-approve all audit and non-audit services provided by the auditor. Non-audit services are defined as any professional services provided other than those provided in connection with an audit or review of the financial statements of the Organization. Following is a list of non-audit services for which the independent auditor cannot perform unless the firm follows the independence standard in the Yellow Book issued by the U.S. Comptroller General:
 - ✓ Bookkeeping or other services related to the accounting records, or financial statement of the audit client;
 - ✓ Financial information systems design and implementation;
 - ✓ Internal audit outsourcing services;
 - ✓ Management functions or human resources;
 - ✓ Investment adviser or investment banking services;
 - ✓ Legal services and expert services unrelated to the audit.

G. MISCELLANEOUS REQUIREMENTS

1.0 Insurance

CONTRACTOR is responsible for securing and maintaining insurance coverage as required by the Agreement. CONTRACTOR must notify COUNTY when insurance is revoked, reduced to a level or coverage less than required, or otherwise made ineffective.

Insurance must include an endorsement naming the COUNTY as an additional insured.

2.0 Activity

No funds, materials, property, or services contributed to the COUNTY or the CONTRACTOR under this Agreement shall be used in the performance of any political activity, the election of any candidate, or the defeat of any candidate for public office.

3.0 Reporting Fraud/Misconduct

CONTRACTORS are expected and required to report suspected fraud, waste, or misuse of public monies, and misconduct of COUNTY personnel to the Los Angeles County Fraud Hotline (Hotline). CONTRACTORS are also expected and required to report suspected fraud committed by their employees and subcontractors when that fraud affects their contract with the COUNTY. Reportable conditions include, but are not limited to:

- Requests for bribes/kickbacks/gratuities by COUNTY personnel.
- Favoritism/nepotism in the awarding of COUNTY contracts, or selection of vendors.
- Theft or misuse of any funds, resources, or equipment.

A-C Contract Accounting and Administration Handbook

Reportable conditions must be reported to the Hotline upon their discovery by CONTRACTOR. Failure to report the types of fraud/misconduct discussed above may be grounds for contract termination.

The reporting party may remain anonymous. Reports can be made via telephone, mail or by Internet to:

Online: www.fraud.lacounty.gov

Email: fraud@auditor.lacounty.gov

Toll Free: (800) 544-6861

U.S. Mail: County of Los Angeles
Department of Auditor-Controller
Office of County Investigations,
500 W. Temple Street, Suite 514
Los Angeles, CA 90012

Agency Name
Bank and Account #
For the Month Ended June 30, 202X

Balance Per Bank Statement		\$ 35,000.00
Add:	Deposit(s) in Transit	\$ 4,000.00
	Bank Service Charge	
	(erroneously posted -- to be reversed next month)	\$ 20.00 [1]
Less:	Outstanding Checks	
	#100	\$ 1,000.00
	#101	\$ 500.00
	#102	\$ 500.00
	Bank Posting Error (to be reversed next month)	<u>\$ (2,000.00)</u>
		<u>\$ (120.00) [1]</u>
Adjusted Bank Balance		<u>\$ 36,900.00</u>

Balance Per Book		\$ 36,950.00
Less:	Bank Charges	\$ 40.00
	Post Error	\$ 10.00
		<u>\$ (50.00) [1]</u>
Adjusted Book Balance		<u>\$ 36,900.00</u>

Prepared by: _____ Date _____

Reviewed by: _____ Date _____

[1] Reconciling items.

Petty Cash Log

January 202X

Program/Location: _____

Approved Petty Cash Fund Amount: _____

Date of Transaction	Description of Transaction	Account Code	Cash Out	Amount of Transaction	Cash Received	Balance
Beginning Petty Cash on Hand						\$ 500.00
1/1/202X	Parking	XX-XXX	\$ 10.00	\$ 10.00		\$ 490.00
1/5/202X	Postage	XX-XXX	\$ 10.00	\$ 10.00		\$ 480.00
1/8/202X	Supplies (Posterboard)	XX-XXX	\$ 5.00	\$ 5.00		\$ 475.00
1/12/202X	Replenishment Check #101	XX-XXX			\$ 25.00	\$ 500.00
Total			\$ 25.00	\$ 25.00	\$ 25.00	
Ending Petty Cash on Hand						\$ 500.00

Petty Cash Custodian Signature

Date

Petty Cash Log Reviewer Signature

Date

AUDITOR-CONTROLLER/DEPARTMENT OF CHILDREN AND FAMILY SERVICES/PROBATION DEPARTMENT FISCAL AUDIT PHASES, FISCAL AUDITS OF FOSTER CARE PLACEMENT SERVICES CONTRACTORS (FOSTER FAMILY AGENCY, FOSTER FAMILY AGENCY-EMERGENCY SHELTER CARE, SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAMS, INTENSIVE SERVICES FOSTER CARE FOSTER FAMILY AGENCY FOR CHILDREN WITH SERIOUS EMOTIONAL AND BEHAVIORAL NEEDS, AND INTENSIVE SERVICES FOSTER CARE FOSTER FAMILY AGENCY FOR CHILDREN WITH SPECIAL HEALTH CARE NEEDS).

I. Overview

To minimize delays and to increase understanding of the fiscal auditing process by COUNTY and the Foster Care Placement Services Contractors (referred to herein as CONTRACTOR), the following is a description of the fiscal audit protocols followed by the Auditor-Controller (A-C), the Department of Children and Family Services (DCFS), and the Probation Department (Probation) during fiscal audit reviews. All specified timeframes are estimated, and actual timeframes may differ depending on A-C and DCFS/Probation staffing, workload, and coordination of scheduling with each CONTRACTOR. The period(s) to be audited shall be consistent with the Contractor's accounting year-end.

II. Purpose of Fiscal Audit Review

The purpose of the fiscal audit review will be to determine whether, pursuant to the Agreement, foster care placement services monies are appropriately accounted for and Expended on reasonable and allowable Expenditures in providing the necessary care and services for children placed by COUNTY and served by CONTRACTOR. A-C staff also evaluates the adequacy of CONTRACTOR's accounting records, internal controls, and compliance with the Agreement and applicable federal and State regulations governing the disbursement of foster care funds.

III. Applicable Regulations

We refer to the following guidelines and regulations in conducting our fiscal audits:

- County Foster Care Placement Services Master Contracts, including Exhibit C-2, Auditor-Controller Foster Care Placement Services Contract Accounting and Administration Handbook
- Uniform Administrative Requirements – 2 Code of Federal Regulations – Section 200
- California Department of Social Services Manual of Policies and Procedures

- California Code of Regulations, Title 22

IV. Notification of Review

A-C staff will contact CONTRACTOR's representatives to notify them of the fiscal audit review and to arrange for an entrance conference. Absent extenuating circumstances, the entrance conference is to be held within 30 calendar days of request, at a mutually agreeable time. A letter will be sent to CONTRACTOR confirming the scheduled entrance conference date, time and location, and applicable documents that need to be available for review. DCFS/ Probation will be sent a copy of the confirmation letter.

V. Entrance Conference

Prior to the entrance conference, A-C staff will have reviewed the CONTRACTOR's Program Statement and Agreement to become familiar with the program and to identify questions or issues to be addressed or clarified during the entrance conference.

The entrance conference permits the CONTRACTOR and the A-C staff to discuss the scope of the review. A-C staff will introduce themselves, give a brief summary of the review objectives, discuss CONTRACTOR operating hours, work space, CONTRACTOR's fiscal audit contact person, and perform an inventory of the CONTRACTOR's records requested in the confirmation letter. CONTRACTOR should ensure appropriate fiscal personnel are in attendance to answer any questions and discuss any concerns and problems encountered with CONTRACTOR records.

VI. Preliminary

The preliminary work will start after the entrance conference. This phase is an educational process for A-C staff. All requested documentation must be made available to the A-C Staff, including but not limited to, employee records, children's case files containing clothing and food receipts, and those records identified in Section 11.0, Records and Investigations, of the Agreement.

Preliminary work will consist of becoming familiar with CONTRACTOR's accounting system and financial and accounting records, and evaluating its system of internal controls. From this work, A-C staff will determine how the records will be tested and the extent of detailed test work that will be performed in each area (i.e., billings, salaries, non-personnel expenditures, etc.).

It is important for CONTRACTOR to have its financial and accounting records available or prepare final schedules detailing all financial activities of CONTRACTOR for the fiscal audit review period. This will expedite the review and provide A-C staff with the population of transactions subject to review.

VII. Detailed Field Work

The detailed fieldwork is an extension of the preliminary work and involves a more in-depth review of accounting and financial records, documents and transactions. A-C staff will be requesting information from CONTRACTOR in the various areas under review. The duration of detailed fieldwork varies and may take from a few weeks to several months to complete, depending on CONTRACTOR availability, condition of, and availability of the account records, and other variables.

Preliminary findings will be verbally discussed with CONTRACTOR during this stage of the review.

VIII. Summary of Preliminary Results

Upon completion of the fieldwork, CONTRACTOR will be provided a summary of the preliminary results to allow the CONTRACTOR to comment, and ensure all relevant documentation has been obtained. Absent extenuating circumstances, a due date of no less than ten (10) business days, from the date CONTRACTOR is provided a summary of preliminary results, will be set by the A-C staff for CONTRACTOR to present additional documentation in response to the summary of preliminary results. Documentation provided after the due date may not be reflected in the draft fiscal audit report and/or may delay completion of the fiscal audit process.

IX. Preliminary Draft Fiscal Audit Report/Pre-exit Meeting

Within 30 calendar days of the due date for receipt of additional information from CONTRACTOR, A-C staff will issue to CONTRACTOR a preliminary draft fiscal audit report, which contains preliminary draft findings and recommendations. The preliminary draft fiscal audit report will be sent via electronic mail to the CONTRACTOR's Chief Executive Officer and Chief Financial Officer. A copy of the preliminary draft fiscal audit report will be provided to DCFS/Probation.

After receipt of the preliminary draft fiscal audit report, CONTRACTOR may request a pre-exit meeting with A-C and DCFS/Probation staff to discuss the preliminary draft fiscal audit report. If CONTRACTOR desires a pre-exit meeting, CONTRACTOR must submit its request to the A-C either by telephone, or electronic mail, within 30 calendar days following receipt of the preliminary draft fiscal audit report. If CONTRACTOR does not request a pre-exit meeting in writing within the allowable time period, CONTRACTOR will be deemed to have waived the right to a pre-exit meeting.

If CONTRACTOR and A-C/DCFS/Probation hold a pre-exit meeting:

*The pre-exit meeting will be held in person or if mutually agreed upon, by telephone, and participants will include the A-C, DCFS, Probation, CONTRACTOR's staff/management, and non-legal representatives who are knowledgeable of the events in relation to the preliminary draft fiscal audit report

being discussed.

At the pre-exit meeting, CONTRACTOR may provide additional documentation related to the findings and recommendations included in the preliminary draft fiscal audit report. After the pre-exit meeting, A-C and DCFS/Probation staff will review the documentation and determine its effect, if any, on the findings and recommendations. A-C and DCFS/Probation staff will revise the preliminary draft fiscal audit report, as A-C and DCFS/Probation determine appropriate. The preliminary draft fiscal audit report updated for any revisions deemed appropriate by the A-C and DCFS/Probation will herein be referred to as the exit draft fiscal audit report.

- NOTE: In general, A-C, DCFS/Probation will not review any additional documentation, which CONTRACTOR provides, related to the findings and recommendations in the preliminary draft fiscal audit report, at any time subsequent to the pre-exit meeting. However, in the event extenuating circumstances exist, A-C, DCFS/Probation may at their sole discretion, consider additional documentation submitted subsequent to the pre-exit meeting. CONTRACTOR should therefore be sure to provide all information, which it deems relevant at the pre-exit meeting to ensure that it is taken into consideration.

If CONTRACTOR and A-C/DCFS/Probation do not hold a pre-exit meeting:

- A-C, DCFS/Probation will not review any additional documentation, which CONTRACTOR provides, related to the findings and recommendations in the preliminary draft fiscal audit report.

A-C and DCFS/Probation staff will issue the exit draft fiscal audit report (see Section X Issuance of Exit Draft Fiscal Audit Report).

X. Issuance of Exit Draft Fiscal Audit Report

An exit draft fiscal audit report will be prepared and sent to CONTRACTOR. CONTRACTOR will be asked to review the exit draft fiscal audit report and prepare for an exit conference, which will be scheduled within 30 calendar days of the date the exit draft fiscal audit report is received by CONTRACTOR. A-C and DCFS/Probation will contact CONTRACTOR to schedule the exit conference.

XI. Exit Conference

The purpose of the exit conference is to discuss the exit draft fiscal audit report, and the findings and recommendations contained therein, as well as any proposed wording changes, which may be sought by CONTRACTOR.

COUNTY's role at the exit conference will be to answer questions regarding COUNTY policies, and clarify administrative procedures to be followed after the

A-C and DCFS/Probation issue the final report. COUNTY personnel will defer any discussion related to the resolution of specific findings and recommendations until the final report is officially released.

In consideration of the discussions at the exit conference, the A-C and DCFS/Probation may, in their sole discretion, make revisions to the exit draft fiscal audit report. A-C/DCFS staff will notify CONTRACTOR via phone of any revisions to the exit draft fiscal audit report. The exit draft fiscal audit report, updated for any revisions deemed appropriate by the A-C and DCFS, will herein be referred to as the final draft fiscal audit report.

XII. CONTRACTOR Response to Final Report

Within thirty (30) calendar days of the date the final draft fiscal audit report is received by CONTRACTOR, CONTRACTOR shall submit a response to the findings and recommendations, via electronic mail, to the DCFS/Probation Fiscal Monitoring Section. The response should address each of the findings affecting CONTRACTOR's operations, including but not limited to compliance/internal control issues and identified questioned Expenditures, and indicate corrective actions planned or already taken. As to corrective actions planned, CONTRACTOR shall identify the dates that corrective action will be implemented and completed. If CONTRACTOR disagrees, they may request an informal hearing from DCFS.

XIII. DCFS/Probation Response to Final Report

DCFS/Probation (or another office/agency within Los Angeles County) will evaluate the adequacy of the CONTRACTOR's written response to the final draft fiscal audit report. Within 25 calendar days of DCFS'/Probation's receipt of CONTRACTOR's written response to the final draft fiscal audit report, DCFS/Probation will provide CONTRACTOR with DCFS'/Probation's written response, which sets forth the required DCFS/Probation corrective action plan (CAP). Should Contractor disagree with the contents of the CAP, Contractor shall submit a response to the DCFS/Probation CAP within 15 business days via electronic mail to DCFS Fiscal Monitoring Section/Probation Central Placement Office. DCFS/Probation will review the Contractor's response to the DCFS/Probation CAP and issue a final required DCFS/Probation Corrective Action Plan within 5 calendar days. Should CONTRACTOR not comply with the Corrective Action Plan, DCFS/Probation may, in their sole discretion, exercise any and all remedies, including but not limited to placement of CONTRACTOR on Do Not Refer or Do Not Use status.

XIV. Final Report to the Board of Supervisors

The A-C, DCFS/Probation will make every effort to issue the final report, with the Contractor's response attached, to the Board of Supervisors within 60 calendar days after the issuance date of the final draft fiscal audit report. CONTRACTOR

will be provided with a copy of the final report at the same time as it is issued to the Board of Supervisors. The final report along with the Contractor's response and DCFS'/Probation's CAP will be posted on the A-C website and will be deemed a public record pursuant to the Public Records Act (Cal. Govt. Code section 6250, et seq.) It is the policy of the A-C to post final reports on the website within 24 hours of issuance.

XV. Establishment of a Repayment Plan

Within thirty calendar days of the date of DCFS'/Probation's response to the Final Report, CONTRACTOR, shall schedule an appointment with DCFS Fiscal Monitoring staff/Probation Central Placement Office to sign a repayment agreement for recovery of the questioned Expenditures identified in the Final Report. CONTRACTOR shall sign the repayment agreement no later than 30 calendar days after the date of DCFS'/Probation response to the Final Report. Should CONTRACTOR not comply with the repayment plan for questioned Expenditures, DCFS'/Probation may, in their sole discretion, exercise any and all remedies, including but not limited to placement of CONTRACTOR on Do Not Refer or Do Not Use status.

Los Angeles County Foster Family Agency Annual Revenue and Expenditure Report

Contractor Name:					
Contract Number	Contractor Fiscal Year (MO/YR - MO/YR)	Number of L.A County Children	Total Number of Children	L.A. County Child Days of Care	Total Child Days of Care

A. Contract Revenues					Total
1	AFDC-FC Revenues				

B.	Expenditures	Program Costs	Offsets	Final Costs
1a	Executive Director Salary			
1b	Assistant Director Salary			
1c	Administrator Salary			
1d	All Other Administrative Salaries			
2	Recruitment Payroll			
3	Training Payroll			
4	Administrative Contracts			
5	Telephone			
6	Postage and Freight			
7	Office Supplies			
8	Conferences, Meetings, and In-Service Training			
9	Memberships, Subscriptions, and Dues			
10	Printing and Publications			
11	Bonding and Contractually Required Insurance Premiums			
12	Advertising			
13	Miscellaneous			
14	Building and Equipment Payroll			
15	Building Rents and Leases			
16	Mortgage Acquisition Costs, Depreciation, and Interest			
17	Property Appraisal Fees			
18	Property Taxes			
19	Equipment and Property Insurance not included in 11 above.			
20	Utilities			
21	Building Maintenance			
22	Building and Equipment Contracts			
23	Building and Equipment Supplies			
24	Equipment Leases			
25	Equipment Depreciation Expense			
26	Expendable Equipment			
27	Building and Equipment Miscellaneous			
28	Vehicle Leases			
29	Vehicle Depreciation			
30	Vehicle Operating Costs			
31	Total Paid to Certified Family Homes			
32	Other Child-Related Costs, Not Provided by Certified Family Homes			
33	Social Worker Payroll			
34	Direct Care Contracts			
35	Total Expenditures			

C.	Current Unexpended AFDC-FC Funds or Current Deficit (Section A Line 1 Less Section B Line 35)	
D.	Unexpended AFDC-FC Funds or Deficit from Prior Fiscal Years.	
E.	Total Accumulated Unexpended AFDC-FC Funds (TAUF) or Accumulated Deficit (Add Lines C and D)	
F.	Contract Expenditures for Three Most Current Months in Report Fiscal Year	

If Section E is greater than Section F, submit a plan along with this report to DCFS describing how the Contractor plans to utilize the TAUF for the benefit of Placed Children for reasonable and allowable costs.

I hereby certify to the best of my knowledge, under penalty of perjury, that the above report is true and correct, that the amounts reported are traceable to the Agency's accounting records, and that all AFDC-FC monies received for the purposes of this program were spent in accordance with the contract program requirements, the agreement and all applicable Federal, State, and County laws and regulations. Falsification of any amount disclosed herein shall constitute a false claim pursuant to California Government Code Section 12650 et. seq.

Executive Director	Signature	Date

Board Treasurer	Signature	Date

**Department of Children and Family Services and the Probation Department
Foster Family Agency Contract
Annual Revenue and Expenditure Report**

This section may be changed, updated or amended to incorporate The California Department of Social Services (CDSS) Financial reporting and cost reporting forms for Foster Family Agencies as identified in the Interim Licensing Standards or in All County Letters, Information Notices, Foster Care Audits and Rates Letters or other notices issued by CDSS.

In addition, the submission of this report may be changed to an electronic web based portal that can be accessed by the Contractor to log in and submit.

INSTRUCTIONS FOR COMPLETING ANNUAL REVENUE AND EXPENDITURE REPORT

The following are the instructions for completing the Department of Children and Family Services (DCFS) and Probation Department Annual Revenue and Expenditure Report:

Provide Identifying Information:

Contractor Name

Enter the Corporate:

Enter the Licensee's name:

Contract Number

Enter the contract number for the County Program

Enter the Aid to Families for Dependent Children Foster Care Rate Program Number:

Contractor Fiscal Year

Enter the Contractor's most recently completed fiscal year. This is also referred to as the Contractor's reporting period.

Number of County of Los Angeles placed children and youth

Enter the total number of County of Los Angeles County DCFS placed children the Contractor provided Foster Family Agency (FFA) services to in the reporting period.

Enter the total number of County of Los Angeles Probation placed youth the Contractor provided FFA services to in the reporting period.

Enter the total number of County of Los Angeles Non-Minor Dependents the Contractor provided FFA services to in the reporting period.

Total Number of Children

Enter the total number of children the Contractor provided FFA services to in the reporting period.

County of Los Angeles days of care

Enter the total days of care provided to all County of Los Angeles placed children, youth and NMDs by the Contractor's FFA Program during the reporting period.

Total Child Days of Care

EXHIBIT C-3

Enter the total days of care provided to all children, youth and NMDs placed with the Contractor's FFA Program during the reporting period.

Report County Program Revenues and Expenditures:

For the Annual Revenue and Expenditure Report, revenues and expenditures should be reported based on revenues earned and costs incurred during the reporting period. All revenues and expenditures reported must be traceable to the Contractor's accounting records. Expenditures used directly on the Contractor's program or allocable as shared or indirect expenses to the Contractor's Program cannot be excluded solely for reporting purposes on the Annual Revenue and Expenditure Report.

A. Revenue

AFDC-FC-FFA Revenue

Report the total of all AFDC-FC FFA payments received for children, youth and NMDs placed by the County of Los Angeles.

Please make a separate notation of all money received for clothing or any other non-AFDC-FC funds received during the reporting period.

B. Expenditures

Program Costs Incurred

For each line item cost, enter total program expenditures that were incurred during the Contractor's fiscal year related to the County Program. Total program expenditures include expenditures that were directly used for or allocated to the County Program. Program expenditures should be allocated in accordance with requirements contained in Sections 25.2 and 25.3 of the Contract. If a cost item is shared among two or more programs, enter only the amount that can be attributed to County of Los Angeles placed children, youth or NMDs to operate the FFA Program.

Offsets

For each line item cost, enter total non-Program funds that were expended for program expenditures during the Contractor's fiscal year. For example, if the Contractor incurred unallowable program expenditures for the County Program, but used non-Program funds to cover the expenditures, then include the non-Program funds expended in the offsets. Enter only the amount used for services provided to County of Los Angeles placed children, youth and NMDs.

Final Costs

For each line item cost, subtract offsets from Program costs to obtain final costs charged to the County program.

The following is an explanation for completing each expenditure line item:

1a. Chief Executive Officer's Salary

Report all payroll costs for the Chief Executive Officer, include all payroll, payroll taxes and employee benefits as applicable.

1b. Assistant/Associate/Other Corporate Officers Salary

EXHIBIT C-3

Report all payroll costs for the Assistant/Associate and all other Corporate Officers salary. Include all payroll, payroll taxes and employee benefits as applicable.

1c. Foster Family Agency Program Administrator Salary

Report all payroll costs for the Administrator(s). Include all payroll, payroll taxes and employee benefits as applicable.

1d. Mental Health Service Head

Report all costs for the Mental Health Service Head (s). Include any applicable payroll, payroll taxes and employee benefits, or an Independent Contractor costs as applicable.

1e. All Other Administrative Salaries

Report all payroll costs for the all other administrative staff. Include all payroll, payroll taxes and employee benefits as applicable.

2. Recruitment Payroll

Report all payroll costs for recruitment staff, please specify the difference between Resource Family Recruiters and employee and staff recruitment costs.

3. Training Costs

Report all costs for all training, both employees and independent contractors.

4. Administrative Contracts

Legal, consulting or other contract fees related to the program.

5. Communication devices telephone, cell phones, Internet Access remote electronic devices,

Report all costs related to telephone, cell phone, internet access and remove electronic devices, computers, tablets, i-pads, e.g.

6. Postage and Freight

Report all costs related to postage, mailings, and shipping.

7. Office Supplies

Report all costs incurred for office supplies.

8. Conferences, Meetings and In-Service Training

Report all costs, including travel and per-diem, related to conferences meetings, and training.

9. Memberships, Subscriptions, and Dues

Report all costs incurred for memberships, subscriptions, and dues.

10. Printing and Publications

Report all costs incurred for printing and publications.

11. Bonding and Contractually Required Insurance Premiums

Report all costs incurred for bonding and contractually required insurance premiums.

12. Advertising

Report all costs incurred for advertising.

13. Miscellaneous

Report all other costs that are not included in any other specifically identified line items.

14. Building and Equipment Payroll

Report all program building and equipment payroll costs. Include all payroll, payroll taxes and employee benefits as applicable.

15. Building Rents and Leases

Report all costs incurred for rents or leases of buildings.

16. Mortgage Acquisition Costs, Depreciation, and Interest

Report all costs related to acquisition of a mortgage, depreciation and interest.

17. Property Appraisal Fees

Report all costs incurred for property appraisal fees.

18. Property Taxes

Report all costs incurred for payment of property taxes.

19. Equipment and Property Insurance not included in 11 above.

Report all costs incurred for equipment and property insurance not included in 11 above.

20. Utilities

Report all costs incurred for electricity, gas, water, sewer, and garbage.

21. Building Maintenance

Report all building maintenance costs related to the program.

22. Building and Equipment Contracts

Report building equipment payroll, payroll taxes and employee benefits and any other cost of building and equipment contracts.

23. Building and Equipment Supplies

Report all building and equipment supply costs.

24. Equipment Leases

Report all costs incurred for equipment leases.

25. Equipment Depreciation Expense

Report all depreciation expense related to equipment.

26. Expendable Equipment

Report all costs incurred for purchases of expendable (non-capitalized) equipment.

27. Building and Equipment Miscellaneous

Report miscellaneous building and equipment costs not previously identified.

28. Vehicle leases/purchase

Report all costs related to vehicle leases.

29. Vehicle Depreciation

Report all depreciation expense related to vehicles.

30. Vehicle Operating Costs

Report all vehicle operating and maintenance costs.

31. Total Paid to Certified Foster Parents (CFPs) or to Approved Resource Families

Report all payments made to either CFPs or to Approved Resource Families.

32. Other Child-Related Costs

Report all other child related costs incurred by the FFA to provide services to the placed children, youth or NMDs. Do not include payments made to CFPs or Approved Resource Families (reported in line 31).

33. Social Worker Payroll

Report all social worker payroll costs. Include payroll, payroll taxes, and benefits as applicable.

34. Direct Care Contracts

Report any direct care contract costs not identified elsewhere.

35. Total Contract Expenditures

The total of allowable contract expenditures related to the care and services of placed Los Angeles County children reported by the Agency in Section B, Lines 1 through 34.

C. Current Unexpended AFDC-FC Funds or Current Deficit

The difference between Total Los Angeles County AFDC-FC Revenues (Section A, Line 1) and Total Contract Expenditures (Section B, Line 35)

D. Unexpended AFDC-FC Funds or Deficit from the most recent prior Fiscal Year

For the Contractor's prior fiscal year, were there unexpended AFDC-FC funds? If yes, please enter the total amount. Or was there a deficit, if yes, please enter that total amount.

E. Total Accumulated Unexpended AFDC-FC Funds (TAUF) or Accumulated Deficit

The total of Sections C and D.

Agency Certification

Upon completing the Annual Revenue and Expenditure Report, the Chief Executive Officer, Chief Financial Officer or equivalent and the Board Treasurer must sign and date the report at the bottom. By signing this form, the Chief Executive Officer, Chief Financial Officer and Board Treasurer are certifying under penalty of perjury that all information contained in the report is correct, that the amounts are traceable to agency accounting records, and that all County of Los Angeles AFDC-FC program funds were spent in accordance with County, State and Federal laws. The report must be submitted by the 120th calendar day after the end of the reporting period to:

DCFS (This may be changed to a web portal)

Fiscal Compliance

Attn: Financial Specialist

3530 Wilshire Blvd 5th Floor

Los Angeles, CA 90010.

CONTRACTOR EMPLOYEE ACKNOWLEDGEMENT AND CONFIDENTIALITY AGREEMENT

Contractor Name _____ Employee Name _____

Contract No. _____

GENERAL INFORMATION:

Your employer referenced above has entered into a Master Contract with the County of Los Angeles to provide certain services to the County. The County requires your signature on this Contractor Employee Acknowledgement and Confidentiality Agreement.

EMPLOYEE ACKNOWLEDGEMENT:

I understand and agree that the Contractor referenced above is my sole employer for purposes of the above-referenced Master Contract. I understand and agree that I must rely exclusively upon my employer for payment of salary and any and all other benefits payable to me or on my behalf by virtue of my performance of work under the above-referenced Master Contract.

I understand and agree that I am not an employee of the County of Los Angeles for any purpose whatsoever and that I do not have and will not acquire any rights or benefits of any kind from the County of Los Angeles by virtue of my performance of work under the above-referenced Master Contract. I understand and agree that I do not have and will not acquire any rights or benefits from the County of Los Angeles pursuant to any agreement between any person or entity and the County of Los Angeles.

I understand and agree that I may be required to undergo a background and security investigation(s). I understand and agree that my continued performance of work under the above-referenced Master Contract is contingent upon my passing, to the satisfaction of the County, any and all such investigations. I understand and agree that my failure to pass, to the satisfaction of the County, any such investigation shall result in my immediate release from performance under this and/or any future Master Contract.

CONFIDENTIALITY AGREEMENT:

I may be involved with work pertaining to services provided by the County of Los Angeles and, if so, I may have access to confidential data and information pertaining to persons and/or entities receiving services from the County. In addition, I may also have access to proprietary information supplied by other contractors doing business with the County of Los Angeles. The County has a legal obligation to protect all such confidential data and information in its possession, especially data and information concerning health, criminal, and welfare recipient records. I understand that if I am involved in County work, the County must ensure that I, too, will protect the confidentiality of such data and information. Consequently, I understand that I must sign this agreement as a condition of my work to be provided by my employer for the County. I have read this agreement and have taken due time to consider it prior to signing.

I hereby agree that I will not divulge to any unauthorized person any data or information obtained while performing work pursuant to the above-referenced Master Contract between my employer and the County of Los Angeles. I agree to forward all requests for the release of any data or information received by me to my immediate supervisor.

I agree to keep confidential all health, criminal, and welfare recipient records and all data and information pertaining to persons and/or entities receiving services from the County, design concepts, algorithms, programs, formats, documentation, Contractor proprietary information and all other original materials produced, created, or provided to or by me under the above-referenced Master Contract. I agree to protect these confidential materials against disclosure to other than my employer or County employees who have a need to know the information. I agree that if proprietary information supplied by other County contractors is provided to me during this employment, I shall keep such information confidential.

I agree to report to my immediate supervisor any and all violations of this agreement by myself and/or by any other person of whom I become aware. I agree to return all confidential materials to my immediate supervisor upon completion of this Master Contract or termination of my employment with my employer, whichever occurs first.

SIGNATURE: _____

DATE: ____/____/____

PRINTED NAME: _____

POSITION: _____

CONTRACTOR NON-EMPLOYEE ACKNOWLEDGEMENT AND CONFIDENTIALITY AGREEMENT

Contractor Name _____

Non-Employee Name _____

Contract No. _____

GENERAL INFORMATION:

The Contractor referenced above has entered into a Master Contract with the County of Los Angeles to provide certain services to the County. The County requires your signature on this Contractor Non-Employee Acknowledgement and Confidentiality Agreement.

NON-EMPLOYEE ACKNOWLEDGEMENT:

I understand and agree that the Contractor referenced above has exclusive control for purposes of the above-referenced Master Contract. I understand and agree that I must rely exclusively upon the Contractor referenced above for payment of salary and any and all other benefits payable to me or on my behalf by virtue of my performance of work under the above-referenced Master Contract.

I understand and agree that I am not an employee of the County of Los Angeles for any purpose whatsoever and that I do not have and will not acquire any rights or benefits of any kind from the County of Los Angeles by virtue of my performance of work under the above-referenced Master Contract. I understand and agree that I do not have and will not acquire any rights or benefits from the County of Los Angeles pursuant to any agreement between any person or entity and the County of Los Angeles.

I understand and agree that I may be required to undergo a background and security investigation(s). I understand and agree that my continued performance of work under the above-referenced Master Contract is contingent upon my passing, to the satisfaction of the County, any and all such investigations. I understand and agree that my failure to pass, to the satisfaction of the County, any such investigation shall result in my immediate release from performance under this and/or any future Master Contract.

CONFIDENTIALITY AGREEMENT:

I may be involved with work pertaining to services provided by the County of Los Angeles and, if so, I may have access to confidential data and information pertaining to persons and/or entities receiving services from the County. In addition, I may also have access to proprietary information supplied by other contractors doing business with the County of Los Angeles. The County has a legal obligation to protect all such confidential data and information in its possession, especially data and information concerning health, criminal, and welfare recipient records. I understand that if I am involved in County work, the County must ensure that I, too, will protect the confidentiality of such data and information. Consequently, I understand that I must sign this agreement as a condition of my work to be provided by the above-referenced Contractor for the County. I have read this agreement and have taken due time to consider it prior to signing.

I hereby agree that I will not divulge to any unauthorized person any data or information obtained while performing work pursuant to the above-referenced Master Contract between the above-referenced Contractor and the County of Los Angeles. I agree to forward all requests for the release of any data or information received by me to the above-referenced Contractor.

I agree to keep confidential all health, criminal, and welfare recipient records and all data and information pertaining to persons and/or entities receiving services from the County, design concepts, algorithms, programs, formats, documentation, Contractor proprietary information, and all other original materials produced, created, or provided to or by me under the above-referenced Master Contract. I agree to protect these confidential materials against disclosure to other than the above-referenced Contractor or County employees who have a need to know the information. I agree that if proprietary information supplied by other County Contractors is provided to me, I shall keep such information confidential.

I agree to report to the above-referenced Contractor any and all violations of this agreement by myself and/or by any other person of whom I become aware. I agree to return all confidential materials to the above-referenced Contractor upon completion of this Master Contract or termination of my services hereunder, whichever occurs first.

SIGNATURE: _____

DATE: ____/____/____

PRINTED NAME: _____

POSITION: _____

**RESOURCE FAMILY PARENT ACKNOWLEDGEMENT
AND
CONFIDENTIALITY AGREEMENT**

GENERAL

This is to emphasize that it is necessary to protect the confidentiality of information obtained from the Department of Children and Family Services.

I understand that the foster family agency _____ approving my resource home, has entered into a Contract with the County of Los Angeles to provide foster care support services to the County.

As a resource foster parent of _____, I must sign the Resource Family Parent Confidentiality Agreement (on the reverse side of this page or attached) as a condition of my approval by _____.

RESOURCE FAMILY FOSTER PARENT ACKNOWLEDGEMENT

I understand that _____ is my approving foster family agency. I rely exclusively upon the foster family agency approving my home for reimbursement of expenses for basic services I provide for children placed in my home and any and all other benefits I receive on my behalf during the period of this relationship.

I understand and agree that I am not an employee of Los Angeles County’s Department of Children and Family Services for any purpose and that I do not have any, and will not acquire any, rights or benefits from the County of Los Angeles pursuant to any contract between the foster family agency approving my home and the County of Los Angeles, unless I have obtained a signed written waiver to this prohibition from the DCFS Director, or delegate, for purposes of entering into a foster-adoption plan of action.

RESOURCE FAMILY PARENT CONFIDENTIALITY AGREEMENT

As an approved resource foster parent of _____ involved with work pertaining to County services, I may have access to confidential data pertaining to clients of the Department of Children and Family Services (DCFS). All clients of DCFS are assured that information that they give is confidential. Names, addresses and all other information concerning the circumstances of any individual for whom or about whom information is obtained are confidential. This is true of all information whether written or oral.

I understand that I may not discuss any situation(s), which could possibly identify an individual, nor shall names, addresses or any other identifying information of applicants, clients, foster parents or birth parents ever be discussed. I will not read narratives, letters, documents or other information except as necessary in the performance of my duties. In the event that I find that I am assigned work in connection with a family or a client known to me, it is my responsibility to ask that work on that particular case be transferred.

I hereby agree that I will not divulge to any unauthorized person any information obtained while performing work pursuant to the Contract between _____ and the County of Los Angeles.

I agree to refer all requests for the release of information received by me to the Foster Family Agency certifying my home.

I agree to report any and all violations of the above by any other person and myself to the Foster Family Agency approving my home and I agree to ensure that the Foster Family Agency approving my home reports such violations to the County of Los Angeles Department of Children and Family Services. I agree to return all materials to the Foster Family Agency approving my home upon termination of my certification by _____ or removal of my last placed child, whichever comes first.

I acknowledge that violation of this Certified Foster Parent Confidentiality Agreement may subject me to civil and/or criminal action and that the County of Los Angeles will seek all possible legal redress.

Name _____
(Signature)

Name _____
(Print)

Date _____

	CHILD WELFARE SERVICES PROGRAM	
31-401 (Cont.)	PLACEMENT	Regulations

31-401	GENERAL REQUIREMENTS FOR PLACEMENT	31-401
	(Continued)	

HANDBOOK CONTINUES

- .412 A parent of a voluntarily placed child has the authority to modify or prohibit consent by a foster parent if a written agreement regarding such modification or prohibition exists between the agency and the parent.
- .413 A court of competent jurisdiction has the authority to issue an order limiting foster parent's authority to give such consent.

HANDBOOK ENDS HERE

- .5 For a child placed in-state or out-of-state, the placement shall be in an appropriately licensed or approved facility which accords the child the same personal rights afforded children in California as specified in California Code of Regulations, Title 22, Division 6, Chapter 9.5, Article 3, Section 89372 and incorporated in MPP Section 31-445.3.

NOTE: Authority Cited: Sections 16001.9, 10553, and 10554, Welfare and Institutions Code; and Section 1530, Health and Safety Code and Assembly Bill 1695, Section 21. Reference: Sections 309(d), 319(f), 361.2(h), 727, 1601.9, and 11402 (as amended by AB 1695, Chapter 653, Statutes of 2001) and 16501, Welfare and Institutions Code; Sections 1501, 1505, 1530.6, and 1531, Health and Safety Code, and 42 U.S.C. 677.

31-405	SOCIAL WORKER RESPONSIBILITIES FOR PLACEMENT	31-405
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- .1 When arranging for a child's placement the social worker shall:
 - .11 Consider the non-custodial parent pursuant to Welfare and Institutions Code Section 361.2.
 - .12 Give preferential consideration for placement of the child to an adult who is a grandparent, aunt, uncle or sibling of the child.
 - .121 In the case of an Indian child Active Efforts shall be made to comply with the ICWA placement preferences and standards as required by Section 31-420.3. The first preference shall be placement with a member of the child's extended family, as defined in Section 1903(2), of 25 U.S.C.
 - .122 As required by Welfare and Institutions Code Section 361.3, a finding that the relative is not willing to adopt or seek guardianship for the child cannot be used as the sole basis for denying placement with a relative.
 - .123 As assessment shall be conducted for the relative(s) and shall include but not be limited to the factors required in Welfare and Institutions Code Section 361.3.

**CHILD WELFARE SERVICES PROGRAM
PLACEMENT**

Regulations

31-405 (Cont.)

31-405 SOCIAL WORKER RESPONSIBILITIES FOR PLACEMENT
(Continued)

31-405

HANDBOOK BEGINS HERE

The ICWA Section 1903(2) provides that an Indian child's ""extended family member" shall be as defined by the law or custom of the Indian child's tribe or, in the absence of such law or custom, shall be a person who has reached the age of eighteen and who is the Indian child's grandparent, aunt or uncle, brother or sister, brother-in-law or sister-in-law, niece or nephew, first or second cousin, or stepparent."

HANDBOOK ENDS HERE

- .13 Consider relatives identified by the social worker as willing and appropriate to care for the child if no non-custodial parent or relative given preferential consideration is available.
- .131 In the case of an Indian child, Active Efforts shall be made to comply with the ICWA placement preferences and standards as required by Section 31-420.3 for foster care placement and shall:
- (a) Consider the placement preferences of the child's tribe.
 - (b) Consider the Tribally Specified Home when designated as the preference of the Indian child's tribe.
 - (c) If adoption of the child is being considered the social worker shall take into account the ICWA preferences for adoptive placement which, absent good cause to the contrary as determined by the court, are a placement with:
 - (1) A member of the child's extended family
 - (2) Other members of the Indian Tribe or
 - (3) Other Indian families.
- .132 As required by Welfare and Institutions Code Section 361.3, a finding that the relative is not willing to adopt or seek guardianship for the child cannot be used as the sole basis for denying placement with a relative.
- .133 An assessment shall be conducted for the relative(s) and shall include but not be limited to the factors required in Welfare and Institutions Code Section 361.3.

31-405 (Cont.)	CHILD WELFARE SERVICES PROGRAM PLACEMENT	Regulations
31-405	SOCIAL WORKER RESPONSIBILITIES FOR PLACEMENT (Continued)	31-405
.14	Consider nonrelative extended family members identified by the social worker/probation officer as willing and appropriate to care for the child if no noncustodial parent, relative given preferential consideration, or relatives identified by the social worker/probation officer as willing and appropriate is available.	
.141	An assessment shall be conducted for the nonrelative extended family member(s) and shall include but not be limited to the factors required in Welfare and Institutions Code Section 361.3.	
.15	Ensure that the requirements specified in Section 31-445 have been met prior to the placement of the child in the home of a relative or nonrelative extended family member.	
.16	When considering the placement of an Indian child in a Tribally Approved Home, the following requirements shall apply:	
.161	The social worker must conduct the caregiver background checks on all adults (over age 18) living in the home or persons that may have significant contact with the child unless the tribe has an authorized Tribal Agency that conducts the caregiver background checks pursuant to Welfare and Institutions Code section 10553.12.	
.162	If the tribe has a Tribal Agency that is approved to receive criminal and child abuse registry information from the California Department of Justice pursuant to Welfare and Institutions Code section 10553.12 the social worker shall secure documentation of the following:	
(a)	The Tribal Agency's certification that it has completed caregiver background checks, pursuant to the standards set forth in Sections 1522 and 1522.1 of the Health and Safety Code, with respect to any prospective foster parent, adoptive parent, or any adult who resides or is employed in the Tribally Approved Home.	
(1)	The certification must provide the address of the home, the names of the individuals in the household that have been cleared, the date of the completion of the clearance for each individual, and if any exemptions were granted.	
(2)	Documentation that the Tribal Agency has agreed to report, within 24 hours to the county social worker responsible for the child placed in the Tribally Approved Home, any notification to the Tribal Agency by the Department of Justice of a subsequent state or federal arrest or disposition notification involving an individual associated with the Tribally Approved Home.	
(b)	The social worker shall conduct the verifications required by Section 31-445.14.	

	CHILD WELFARE SERVICES PROGRAM		
Regulations	PLACEMENT		31-405 (Cont.)

31-405	SOCIAL WORKER RESPONSIBILITIES FOR PLACEMENT	31-405
	(Continued)	

- .163 Should the social worker have any concerns about the safety of the home, the social worker must consult and collaborate with the tribe to address any concerns.
- .164 The social worker must follow the ICWA placement preferences, which include the Tribally Approved or Tribally Specified Home designated by the child's tribe. Deviation from the preference order may occur only with good cause, as determined by the court. The social worker must provide the court with facts and supporting evidence that justify a request to deviate from the placement preferences and must ask the court for a finding that there is good cause to deviate from the ICWA placement preferences.
- .17 Meet the requirements specified below when placing a child under the age of six in a group home:
 - .171 A child under the age of six shall not be placed in a group home unless one or more of the following conditions are met, and the placement facility meets the licensing standards specified in Title 22, Division 6, Subchapter 2:
 - (a) The placement will provide comprehensive diagnostic assessment to enable long-term decisions about the child's future.
 - (b) The placement meets the child's special treatment needs which can be met by the group home while program planning and testing occur to prepare the child for a less restrictive, permanent placement;
 - (c) The placement enhances and supports the case plan goal of family reunification with parents or kin or for adoption when no other suitable, less restrictive placement is available;
 - (d) The placement is for temporary shelter care and shall not be for more than thirty days and no other, less restrictive placement is available; or
 - (e) The placement will keep a sibling group together until a more suitable, less restrictive placement is found.

	CHILD WELFARE SERVICES PROGRAM	
31-405 (Cont.)	PLACEMENT	Regulations

31-405	SOCIAL WORKER RESPONSIBILITIES FOR PLACEMENT	31-405
	(Continued)	

- (f) Effective 1/1/2000, any child under the age of six shall be placed in a family like setting as defined in Title 22, Section 84201(f)(2). In the event such a setting is unavailable, the county shall request approval from the Department for any alternative placement in excess of 30 days. The Department has the authority to approve these placements if the request is in the best interest of the child and shall in no instance be detrimental to the health and safety of the child. The county welfare director shall submit the request to the Department with substantiating evidence supporting the request and specifying that the child has special needs that render the child extremely difficult to place, and there is no family like setting that can meet the child's special needs. The Department shall provide a written approval or denial of the request within 5 days of receipt of the request.
- .18 Ensure that a child under the age of six placed for temporary shelter care in a county operated or county contracted emergency shelter care facility, shall not be placed in the facility for more than thirty days.
- .181 A county operated or county contracted emergency shelter care facility shall conform to all regulations in Title 22, Division 6, Subchapter 2 except as noted below:
- (a) The facility shall be exempt from the licensing standards specified in Sections 84200(a)(2)(A) through (C).
- (b) For an unlicensed county operated emergency shelter care facility only, the Plan of Operation required by Section 84222 must be kept only on file at the facility and need not be submitted to the Department for approval.
- .19 Assist each child in understanding the reason(s) for placement.
- .20 Arrange for preplacement visitation between the child and the out-of-home care provider, if possible.
- .21 Assist each child to maintain his/her cultural and ethnic identity.
- .22 Monitor the child's physical and emotional condition, and take necessary actions to safeguard the child's growth and development while in placement.

Regulations	CHILD WELFARE SERVICES PROGRAM PLACEMENT	31-405 (Cont.)
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31-405	SOCIAL WORKER RESPONSIBILITIES FOR PLACEMENT	31-405
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(Continued)

- .23 Ensure that information regarding available CHDP services is provided to the out-of-home care provider within 30 days of the date of placement.
- .24 Ensure that the child receives medical and dental care which places attention on preventive health services through the Child Health and Disability Prevention (CHDP) program, or equivalent preventive health services in accordance with the CHDP program's schedule for periodic health assessment.
 - .241 Each child in placement shall receive a medical and dental examination, preferably prior to, but not later than, 30 calendar days after placement.
- .25 Make certain that arrangements for, and monitoring of, the child's educational progress while in placement are undertaken.
- .26 Make arrangements for the out-of-home care provider to have telephone access to a social worker 24 hours a day, seven days a week in case of emergencies involving his/her foster child(ren).
- .27 Ensure that the out-of-home care provider understands and supports the child's case plan, and is aware of any change(s) thereto.
- .28 Provide the out-of-home care provider the child's case plan that identifies the child's needs and services.
- .29 Provide the out-of-home care provider the child's background information as available, including, but not limited to, the following histories:
 - .291 Educational.
 - .292 Medical.
 - .293 Placement.
 - .294 Family.
 - .295 Behavioral.

31-405 (Cont.)	CHILD WELFARE SERVICES PROGRAM PLACEMENT	Regulations
31-405	SOCIAL WORKER RESPONSIBILITIES FOR PLACEMENT (Continued)	31-405
.30	Provide the out-of-home care provider(s) information of any known or suspected dangerous behavior of the child being placed.	
.301	The social worker shall document in the case record any information provided to the out-of-home care provider(s) regarding the child's known or suspected dangerous behavior, including the following:	
	(a) Date information was provided.	
	(b) Name of person receiving information.	
	(c) Specific facts provided.	
	(d) Affirmation that the person informed was advised that the facts were confidential and that unauthorized disclosure could result in a fine up to \$1,000.	
.31	Ensure completion of the documentation necessary to initiate AFDC-FC payments, as appropriate.	
.32	Assist the parents to understand their rights and responsibilities while their child is in foster care.	
.33	Document the reason(s) for the following, when applicable:	
.331	The child's transfer to another placement location.	
	(a) In the case of an Indian child, in addition to documenting the reasons for the transfer, also document the Active Efforts taken to make the transfer within the order of ICWA placement preferences as required by Section 31-420.3, which shall include making contact with the child's tribe to solicit assistance and support in identifying an appropriate placement for the child.	
.332	The child's out-of-county or out-of-state placement.	
.34	Develop a discharge plan for any child who:	
.341	Is under six years of age; and	
.342	Is leaving a group home placement to return to parent(s), guardian(s), or Indian custodian(s), relative(s) or extended family member(s) or an adoptive family or to a placement in a foster family home.	

NOTE: Authority Cited: Sections 10553 and 10554, Welfare and Institutions Code and Assembly Bill 1695, Section 21. Reference: Sections 224.6, 309, 319, 361.2, 361.3, 361.31, 361.4, 361.7, 362.7, 10553.12, 11467.1, and 16501, Welfare and Institutions Code; Sections 1505 and 1530.8, Health and Safety Code; 25 USC 1915 and 1931; and 45 CFR 1355.20.



Department of the Treasury
Internal Revenue Service

Notice 1015

(Rev. December 2016)

Have You Told Your Employees About the Earned Income Credit (EIC)?

What is the EIC?

The EIC is a refundable tax credit for certain workers.

Which Employees Must I Notify About the EIC?

You must notify each employee who worked for you at any time during the year and from whose wages you did not withhold income tax.

However, you do not have to notify any employee who claimed exemption from withholding on Form W-4, Employee's Withholding Allowance Certificate.

Note: You are encouraged to notify each employee whose wages for 2016 are less than \$53,505 that he or she may be eligible for the EIC.

How and When Must I Notify My Employees?

You must give the employee one of the following.

- The IRS Form W-2, Wage and Tax Statement, which has the required information about the EIC on the back of Copy B.
- A substitute Form W-2 with the same EIC information on the back of the employee's copy that is on Copy B of the IRS Form W-2.
- Notice 797, Possible Federal Tax Refund Due to the Earned Income Credit (EIC).
- Your written statement with the same wording as Notice 797.

If you give an employee a Form W-2 on time, no further notice is necessary if the Form W-2 has the required information about the EIC on the back of the employee's copy. If you give an employee a substitute Form W-2, but it does not have the required information, you must notify

the employee within 1 week of the date the substitute Form W-2 is given. If Form W-2 is required but is not given on time, you must give the employee Notice 797 or your written statement by the date Form W-2 is required to be given. If Form W-2 is not required, you must notify the employee by February 7, 2017.

You must hand the notice directly to the employee or send it by first-class mail to the employee's last known address. You will not meet the notification requirements by posting Notice 797 on an employee bulletin board or sending it through office mail. However, you may want to post the notice to help inform all employees of the EIC. You can download copies of the notice at www.irs.gov/formspubs. Or you can go to www.irs.gov/orderforms to order it.

How Will My Employees Know If They Can Claim the EIC?

The basic requirements are covered in Notice 797. For more detailed information, the employee needs to see Pub. 596, Earned Income Credit (EIC), or the instructions for Form 1040, 1040A, or 1040EZ.

How Do My Employees Claim the EIC?

An eligible employee claims the EIC on his or her 2016 tax return. Even an employee who has no tax withheld from wages and owes no tax may claim the EIC and ask for a refund, but he or she must file a tax return to do so. For example, if an employee has no tax withheld in 2016 and owes no tax but is eligible for a credit of \$800, he or she must file a 2016 tax return to get the \$800 refund.

PAYMENT RESOLUTION NOTIFICATION

Business Information Systems Division (BIS) is currently in the process of modifying The Foster Care Search System (FCSS) to allow Foster Care Services Contractors and non-contracted Foster Care Providers (FFA, STRTP, and ISFC-FFA) to submit their Foster Care payment discrepancies online. We are anticipating the updates to be available for use in mid-2018.

Procedural Guide
E060-0530
OVERPAYMENT POLICY

Date Issued: **10/24/12**

- New Policy Release
- Revision of existing Procedural Guide E060-0530, Overpayments, dated: 02/19/02

Revision Made: This is a complete re-write of the existing 2/19/02 policy. It has been written in the revised format, and updated to ensure compliance with all State and Federal requirements.

Cancels:

POLICY/BACKGROUND STATEMENT

The Department continues to focus on the three priority outcomes. We have identified improved safety for children, reduced reliance on out-of-home care, and improved timelines to permanency. Timely permanence is achieved, with the first permanency option being reunification, followed by adoption and legal guardianship with a relative followed by legal guardianship with an unrelated caregiver.

APPLICABLE TO

This Management Directive is applicable to Title IV-E Overpayments Collection.

WHAT CASES ARE AFFECTED

The Procedural Guide is an update to the new format, a revision of all sections regarding state regulations applicable to Aid to Families of Dependent Children – Foster Care (AFDC-FC) identification of overpayments and collection of overpayments from foster care providers. This policy is to ensure regulatory compliance standards continue to be met. This policy is applicable to all new and existing referrals and cases in which AFDC-FC overpayments were or have been discovered on or after 7/1/2009 regarding foster care providers.

OPERATIONAL IMPACT

Welfare and Institutions Code (WIC) Section 11004 requires that overpayments, which occur in public social services programs, be collected. Senate Bill 84 adopted various statutes to implement the Federal Improper Payments Act of 2002. This bill directed the State to update and create regulations defining overpayments and allowing for the collection of overpayments from all forms of foster care providers, including GHs or FFAs. As all forms of foster providers are subject to overpayment collection, this policy will address discovery of overpayments and determinations regarding the collectability of overpayments. The policy will note the different criteria governing the determination regarding collectability of overpayments from single foster homes relatives, non-related family members (NERFM) and non related legal guardians versus the criteria governing collectability of overpayments from GHs and FFAs. The policy will also review the type of due process required for all foster care providers, outlining the rights of the foster providers to request either or both an informal and/or State Fair Hearing (SFH) to dispute the overpayment discovered by the County. Last, the policy will address when an overpayment is collectible and identified for purposes of federal remittance of the 60% share along with the reporting process for uncollectible or uncollected debt to the California Department of Social Services (CDSS).

Definition of an Overpayment

An “overpayment” will be any amount of aid paid which a foster care provider received on behalf of a child to which the provider was not entitled, or an expenditure made by a Foster Family Agency or a Group Home provider not in conformity with WIC Section 11-404. A “Foster Care Provider” includes, but is not limited to, Group Homes (GHs), Foster Family Agencies (FFAs), Small Family Homes, Foster Family Homes (FFHs), Relative Homes (RHs), Non-Related Extended Family Members (NREFMs), and Non-related Legal Guardians (NRLGs). (See CDSS Eligibility and Assistance Standards (EAS) 45-304.1.11.)

The amount a provider is not entitled to is “an amount paid for any period of time in which the foster child was not cared for in that home” (CDSS EAS 45-304.122). However, if an AFDC FC eligible child is temporarily absent from an eligible facility, not more than 14 days, for school, work or training, hospitalization, visiting, vacationing, emergency circumstance, the County may make payment to the eligible facility in order to continue to meet the child’s needs. (CDSS EAS 45-302). An expenditure made by a Foster Care Provider can include payments in which a child was not in the home and will also include those expenditures not in conformity with the items outlined in Section 11-404 (CDSS EAS 45-304.11, 11-404, 11-403(c) and 11403.8.

PROCEDURES

A. WHEN: NEW DETECT LISTING INDICATES A POTENTIAL OVERPAYMENT

Overpayment/Recovery Staff Responsibilities:

1. Receive a new Overpayment Detect listing and/or assignment of potential overpayment from Eligibility (ES).
2. Access APPS, CWS/CMS and the Automated Overpayment Collection System – Integrated Financial System (IFS).
3. Review and reconcile the data on the computer systems to verify the reason for the overpayment.
 - a. If APPS, CWS/CMS and the IFS are consistent, proceed with step B. or C.
 - b. If APPS, CWS/CMS and the IFS are not consistent, contact the regional Eligibility Supervisor (ES)/Eligibility Worker (EW)/CSW and resolve the inconsistent information.

B. WHEN: THERE IS AN INVALID OVERPAYMENT/BUDGET CODING

An invalid overpayment is caused by a budget coding error. All or part of the overpayment may be invalid.

Overpayment/Recovery Staff Responsibilities:

1. Review the APPS, CWS/CMS and IFS. Determine if the regional EW's corrective budget action eliminated the overpayment on APPS.
 - a. If the corrective budget action eliminated or decreased the overpayment, enter the overpayment status code, appropriate adjustment code, and comments on the Automated Overpayment Collection System. If there is a legitimate partial overpayment remaining, proceed to step 5.
 - b. b. If the corrective budget action did not function or did not eliminate the overpayment, forward the information to the ES.

Eligibility Supervisor Responsibilities:

1. Inform the regional ES/EW/CSW via e-mail to advise them of the need for corrective action to eliminate the overpayment.

C. WHEN: THERE IS A DISCOVERED OVERPAYMENT**Overpayment/Recovery Staff Responsibilities:**

1. Determine the type of foster care provider and if the overpayment is collectible or uncollectible (See section "D" to determine if collectible or uncollectible. The criteria noted in section "D" does not apply to GHs or FFAs. See section "E" regarding uncollectable criteria for GHs and FFAs.
 - a. Access the APPS and IFS and enter the overpayment status code, adjustment and comments. The following must be documented:
 - Amount of the overpayment;
 - Date of discovery of the overpayment;
 - The actual days overpaid and/or identify the expenditure not in conformity with State Regulation 11-404.
 - Aid code for which the overpayment was made;
 - Description of the circumstances that resulted in the payment error.

NOTE: Overpayment recovery will not be initiated when it has been more than one year since the initial discovery of an overpayment. The date of discovery is controlling, not the date of the actual overpayment. The initial discovery of the overpayment may occur more than one year after the actual overpayment occurred and recovery will be sought.

D. WHEN: DETERMINING IF THE OVERPAYMENT IS UNCOLLECTIBLE FROM A FFH, RH, NRLG OR NREFM**Overpayment/Recovery Staff Responsibilities:**

1. An overpayment will **not** be collected from a FFH, RH, NRLG or NREFM when any of the following conditions exist:
 - a. The overpayment was exclusively the result of a County administrative error.
 - b. Neither the County nor the provider was aware of the information that would establish that the child was not eligible for foster care benefits in the provider's home.

- c. The provider did not have knowledge of, and did not contribute to, the cause of the overpayment(s).
- d. The cost of the collection exceeds the amount of the overpayment, i.e. costs which the County will consider when determining the cost effectiveness to collect are total administrative and personnel costs, legal filing fees, investigative costs, and any other costs which are applicable. (This will require a Director's Write-Off. See Management Directive #11-03, dated 11/10/11.)
- e. If the above circumstances in (a), (b), or (c) occur, this is considered an Uncollectible Overpayment. The staff will request a voluntary repayment (SOC 841). If the circumstance is as set forth under (d) above, Director's Write-Off, no further attempts to collect, including voluntary repayment, will occur.
 - Initiate the SOC 841, Notice of Overpayment and Request for Voluntary Repayment. If the provider does not respond, no further collection efforts are to be made. The overpayment remains an "Uncollectible Overpayment."
 - If the caregiver agrees to a voluntary repayment of the overpayment, determine the method of payment:
 1. Voluntary lump sum repayment;
 2. Voluntary repayment agreement; or
 3. Voluntary grant offset.
 - Complete the Voluntary Repayment Agreement as appropriate.
- f. If any of the circumstances listed in 1 a, b, c, or d have occurred and the overpayment remains uncollectible or should not be pursued, the staff will ensure that the documentation required by Management Directive # 11-03 is reviewed and prepared. Further, ensure that the report and supporting documentation are included in the monthly report to the State Department of Social Services regarding uncollectible overpayments.

NOTE: Caregiver and Department of Children and Family Services (DCFS) staff must sign the Voluntary Repayment Agreement. Regulations do not prevent counties from collecting an overpayment that results from the payment of aid paid pending.

E. WHEN: DETERMINING IF THE OVERPAYMENT IS UNCOLLECTIBLE FROM A GH OR FFA

Overpayment/Recovery Staff Responsibilities:

1. An overpayment is not collectible from a GH or FFA under the following conditions:
 - a. The GH or FFA is no longer in business (CDSS EAS 45-304.126).
 - b. The GH or FFA is no longer licensed by the State Department of Social Services (CDSS EAS 45-304.126);
 - If the overpayment involved payment to a GH or FFA for periods of time when the child was not in the home, and it is discovered during the process that the agency has gone out of business or is no longer licensed by the CDSS, the County will not take any further action or activity which could lead to the establishment of an overpayment. The County is required to contact the CDSS and seek prior written approval from CDSS to continue to take action to collect. If CDSS denies the County the right to collect, the overpayment will be uncollectible and the Department will be relieved from repayment of the federal share (CDSS EAS 45-304.126); (a) and (b) and WIC 11466.23(c)(1)(C).
 - If the overpayment involved a GH or FFA which identified expenditures not in conformity with State Regulation 11-404, the County will not initiate a financial or fiscal audit nor will it take any action in furtherance of an existing financial or fiscal audit. The County will not perform any activity that could lead to the establishment of an overpayment. Again, the County is required to contact CDSS and seek prior written approval of CDSS to continue to take action to collect. If CDSS denies the County the right to collect, the overpayment will be uncollectible and the County will be relieved from repayment of the federal share (CDSS EAS 45-304.126); (a) and (b) and WIC 11466.23(c)(1)(C).
 - Again, under these circumstances no voluntary attempts (SOC 841) to collect the overpayment should be attempted, if the CDSS does not authorize collection processes to continue.
 - The following will be maintained in DCFS files indefinitely: 1) Letter to CDSS regarding the overpayment and closure or loss of license and requesting direction on collection within 30 days; 2) CDSS written response denying collection or documentation of no response from CDSS authorizing collection within 30 days; 3) All supporting documentation regarding the discovery of overpayments including, but not limited to, signed vouchers, Auditor Controller Reports, documentation on attempts to resolve the amount, information supporting the closure and/or lack of licensure of the GH or FFA; 4)

Any other records developed up to and including the written response or lack thereof, from CDSS denying the ability to take further action to collect.

- c. If the cost of the collection exceeds the amount of the overpayment, (i.e. costs which the County will consider when determining the cost effectiveness to collect are total administrative and personnel costs, legal filing fees, investigative costs, and any other costs which are applicable) see Management Directive #11-03 regarding Director's Write-Off and preparation of the report for documentation and reporting to the CDSS as an uncollected debt (CDSS EAS 45-304.125 and WIC 11466.23(c)(1)(B).

F. WHEN: THE OVERPAYMENT IS DETERMINED COLLECTIBLE FROM THE FOSTER CARE PROVIDER

Overpayment/Recover Staff Responsibilities:

1. GH, FFA, FFH, RH, NRLG, NREFM.

Take the following steps:

- a. Determine from whom the overpayment may be recovered;
 - b. Document the amount of the overpayment;
 - c. Document actual dates of the overpayment and/or the items not in conformity with State Regulation 11-404.
 - d. Document the date the overpayment was discovered. (This is the date it was determined that the amount was a valid, collectable overpayment);
 - e. Enter the Aid code for overpayment;
 - f. Document the reason that the overpayment occurred.
2. Complete the NA 1261, Notice of Action sending two (2) copies to the provider and maintain one copy in the overpayment file. Document by proof of mailing or by cover letter the date the NA 1261 was mailed. If this is a GH or FFA overpayment identified by Audit, ensure that all other necessary documents are also issued with the NA 1261 (Audit Report, FCAP, etc.)
 3. Log the information regarding the NA 1261 into the SB 84, Control Log (in Excel).

4. Set a control date for a 30-day response for request of an Informal Hearing and a 90-day response to verify if a request for SFH has been made to the DCFS Appeals State Hearing Unit.

NOTE: The foster care provider has 30 days from the mailing of the NA 1261 to either fully pay the overpayment, enter into a mutually agreed upon repayment plan or provide a written request for Informal Hearing. If the foster care provider does not request a 30-day Informal Hearing, the foster care provider will have 90 days from the date of mailing the NA 1261 to request a SFH. Failure to request an informal review of the County overpayment determination, either by Informal Hearing or SFH, will result in the overpayment being identified for collection two (2) days after the date the overpaid foster care provider's time frame to request review has elapsed or has been exhausted.

- a. An overpayment will only be collected from a provider who actually received the overpayment. Overpayments will not be collected from subsequent providers who provide care to a child for whom overpayment was assessed.
- b. For recoupment of overpayments made to GHs and FFAs which are not in conformity with State Regulation 11-404, the repayment will reduce any subsequent payments by an amount equal to the amount of the administrative portion of the monthly payment to the provider using an offset methodology indicated in State Regulation 45-305 (CDSS EAS 45-304.33). The Department can consider other forms of grant offset and, by analogy to other regulations, could allow offset up to the amount of 10% of the monthly administrative portion.
- c. If the overpayment is for periods of time when the child was not present in the care of the foster provider, and the child for whom the overpayment was assessed is no longer in the home of the provider, grant adjustment and grant offset will not be used to recover the amount of the overpayment. This applies even if the provider is caring for other foster care children. However, if the child is still in the care of the foster care provider:
 - Determine the appropriate recovery method and the amount to be recovered.
 1. Voluntary lump sum repayment;
 2. Voluntary repayment agreement; or
 3. Voluntary grant offset.

- Explain “voluntary grant offset’ to the caregiver who is still providing foster care to the child for whom the overpayment is assessed.
 1. If the caregiver is willing to voluntarily repay the overpayment, complete a written agreement with the caregiver indicating the amount of the overpayment and include the repayment schedule. Ensure the caregiver signs and dates the agreement.
 2. If this is an overpayment for a GH or FFA and it includes expenditures not in conformity with CDSS EAS 11-404 as a result of an Auditor Controller Report, provide the necessary information to the Treasurer Tax Collector (TTC) if a voluntary settlement agreement has been reached.

G. WHEN: GH, FFA, FFH, RH, NRLG OR NREFM RESPONDS TO AN OVERPAYMENT NOTICE WITH CASH, CHECK OR MONEY ORDER

Overpayment/Recovery Staff Responsibilities:

DCFS has a “collections account” that provides timely deposits of collected revenue and eliminates the risk of loss of funds. This is an interdepartmental collaboration with the Treasurer-Tax Collector and DCFS. The account is known as the “Sweep Account for Overpayment Collections.”

1. Receive payment in the following manner:
 - a. Cash;
 - b. Check; or
 - c. Money order
2. If paid by check or money order, confirm the following:
 - a. Amount indicated is the same both in written section and the dollar amount section.
 - b. Confirm that it is signed.
 - c. Checks should be made payable to DCFS and/or County of Los Angeles.
3. Complete the payment control log. Annotate the cross-reference to the GH/FFH/relative/foster parent. Photocopy the check or money order. Annotate on the payment control log the following:
 - a. Check number;

- b. Invoice number;
 - c. Amount submitted.
4. Initial the check or money order.
 5. Endorse, by stamping all checks and money orders "for deposit only" immediately.
 6. If cash is received, ensure that a non-vested designated person witnesses the amount and receipt.

NOTE: It is illegal to photocopy cash. All case transactions will be witnessed and verified by staff with non-vested interest.

7. Reconcile the payment control log with the cash, checks and/or money orders received.
 - a. If the list and amounts are not reconciled, proceed with step 2 above until accountability is accomplished.
8. Deliver the cash, checks, and deposit forms to the Finance Deposit Unit.
9. Deliver one copy of the checks, supporting documents and deposit forms to the Overpayment Recovery Unit Clerk.

NOTE: The Unit Clerk will enter/post payments to the Automated Overpayment Collection system. The Unit Clerk will forward the copy of the checks, supporting documents and payment control log to the appropriate overpayment Account Clerk.

Reconciliation Staff Responsibilities:

1. Finance Deposit Unit identifies inconsistencies on the Deposit Forms.
2. Receive Deposit Permit Report from e-CAPS.
3. Reconcile e-CAPS report to the Cash deposit log.

Quality Assurance Staff Responsibilities:

1. Conduct a random sampling of all Overpayment Recovery Unit activities.
2. Complete a report of the findings and deliver the report to the manager.

H. WHEN: GH, FFA, FFH, RH, NRLG OR NREFM RESPONDS TO AN OVERPAYMENT NOTICE WITH A WRITTEN REPAYMENT PLAN

Overpayment/Recovery Staff Responsibilities:

1. When the County and caregiver reach a mutually agreed upon repayment plan solely related to overpayments of aid when the child was not in the home:
 - a. Access the IFS and review the specific ledger and statement.
 - b. Enter the status and comments.
 - c. Complete and sign voluntary repayment agreement and ensure provider reviews and signs.
 - d. Set a control for receipt of all agreed upon monthly payments.

NOTE: There are no State Appeals Hearing rights regarding overpayments made to foster care providers, including GHs and FFAs where the claimant entered into a voluntary repayment agreement.

I. WHEN: GH, FFA, FFH, RH, FOSTER PARENT, NRLG OR NREFM RESPONDS TO AN OVERPAYMENT NOTICE WITH A WRITTEN REQUEST FOR AN INFORMAL HEARING AND OR STATE FAIR HEARING

Administrative Assistant Responsibilities:

Informal Hearing Requested

1. When an Informal Hearing Request is received:
 - a. Access the Hearing Control Log entering the status and comments.
 - b. Forward the Informal Hearing request and any attached supporting documentation to the ES for review.
2. Contact the provider and schedule date, time and location of informal hearing. Give the provider a written notice of the time and place of the informal hearing, not less than ten (10) days prior to the hearing date.
3. The notice will provide a scheduled date, time and location information to the Informal Hearing designee. The notice should also provide a contact number for the Informal Hearing designee to assure contact can be made at the location where the Informal Hearing will occur. (See Notice form to

Single Family Foster Home/Relative/Legal Guardian/NERFM and Notice for to Foster Family Agency/Group Homes.)

Overpayment/Recovery Eligibility Supervisor Responsibilities:

1. Review for completeness the Informal Hearing Request and any attached documentation.
2. Obtain any additional supporting documentation to confirm the disputed overpayment.
3. Forward the Informal Hearing Request and supporting documentation to the designee who will be conducting the hearing.

Informal Hearing designee Responsibilities:

1. The Informal Hearing designee will be a person designated by the County, knowledgeable in the subject area and will not be the person who made the initial overpayment decision or the person who supervised the person who made the initial overpayment decision.
2. At the time of the Informal Hearing the Informal Hearing designee will discuss with the provider and will be limited to considering the following:
 - a. The informal hearing will be limited to consideration of the correctness of the initial overpayment determination for any foster provider. If the foster provider is a Foster Family Home, Relative Home, NERFM or non-related Legal Guardians, the Informal Hearing designee will determine whether any of the following conditions in CDSS EAS 45-304.123 exist: in Section 45-304.123:
 - The overpayment was exclusively the result of a County Administrative error;
 - Neither the County nor the provider was aware of the information that would establish that the child was not eligible for foster care benefits in the provider's home;
 - The provider did not have knowledge of, and did not contribute to the cause of the overpayments.
3. If asked by the provider or questions arise regarding voluntary repayments, the County may discuss methods of voluntary overpayment recovery, as appropriate.
4. After the hearing, the County employee who conducted the informal hearing will prepare a letter, which contains the decision on each issue considered

at the informal hearing and set forth all regulations, which support the written decision. The decision will be mailed to the provider. The written decision will also inform the provider that they can appeal the informal hearing decision at a formal state fair hearing. A copy of the written decision will be retained in the overpayment case.

5. When an informal hearing is requested, it suspends the 90 day period the provider has to request a State Fair Hearing. Therefore, when the written decision regarding the informal hearing is mailed, it restarts the time period for a request for a State Fair Hearing. The provider will have 90 days to request a State Fair Hearing from the date of mailing of the decision. Therefore, DCFS needs to assure that the date of mailing is accurately recorded either by proof of service or verification that the decision was placed in the U.S. mail on a specified date.
6. If a provider requests an informal hearing and withdraws or fails to appear at the informal hearing, the provider will have 90 days from the date of withdrawal or failure to appear, whichever ever occurs first, to request a State Fair Hearing (CDSS EAS 45-306.3).
 - a. If the Informal Hearing designee receives a telephone call or a letter withdrawing the request for informal hearing, the Informal Hearing designee will send a confirming letter regarding the telephone call or receipt of the letter. The letter will also include a statement that the provider will have 90 days from the date of withdrawal to request a State Fair Hearing.
 - b. If the Informal Hearing designee sets a hearing and the person fails to appear at the set time, date and location, the Informal Hearing designee will attempt to contact the provider by telephone after waiting 45 minutes for their appearance. If the party is reached, the Informal Hearing designee can determine good cause and re-schedule the hearing. If the party is not reached, the Informal Hearing designee will issue a letter. The letter will indicate that an informal hearing was scheduled on the set time, date and location and will attach the notice issued. The letter will further state that the failure to appear concluded the informal process and that the provider will have 90 days from the date of failure to appear to request a State Fair Hearing.

Formal State Fair Hearing Requirements:

1. The foster care provider can request either or both the informal hearing and State Fair Hearing. The staff tracking the administrative rights of the foster care provider will consider the following, prior to determining the regulatory hearing processes have concluded.

- a. No Request Received for Either Informal or State Fair Hearing: If the foster care provider never requested review of the County determination on an overpayment, either by informal hearing within 30 days of mailing the NA 1261 or a State Fair Hearing within 90 days of mailing the NA 1261, upon the 92nd day, the overpayment is identified and the providers time frame to request review has lapsed and the overpayment is collectible.
- b. Request for Informal Hearing: If the foster care provider requests an informal hearing. See Informal Hearing designee above in steps 5 and 6. If no State Hearing is requested within 90 days of the issuance of the Informal Hearing Decision, 90 days after withdrawal or 90 days after failure to appear at the informal hearing, the overpayment will be identified for collection on the 92nd day, the date the overpaid provider exhausted administrative processes.
- c. Request for State Fair Hearing after Receipt of Decision in Informal Hearing or absent a request for Informal Hearing: If an informal hearing is requested and conducted, the 90 day period to request a State Fair Hearing is suspended until DCFS issues an informal decision after hearing. The person requesting the informal hearing will have 90 days from the date the decision is mailed to request the State Fair Hearing. (See steps 5 and 6 above.)
- d. DCFS can verify with the DCFS Appeals State Hearing Unit if they have received a request for State Fair Hearing and if so, what date occurred.
 - If a State Fair Hearing has been requested, the amount is not collectible until the administrative process is exhausted. DCFS must await the decision of the Administrative Law Judge and proceed, as ordered.
 - If no request for a State Fair Hearing has occurred, the administrative process will be considered exhausted on the 92nd day, and the overpayment will be identified and collectible.

J. WHEN: NO RESPONSE IS RECEIVED FROM A GH, FFH, RH, NRLG OR NREFM

Overpayment/Recovery Staff Responsibilities:

1. At the control date (30 days), (see step 4 on page 8), if the provider does not return the overpayment, enter into a mutually agreed-upon repayment plan, or has not requested an Informal Hearing. (If the provider requested an Informal Hearing, see Informal Hearing designee Responsibilities, Informal Hearing Request above.) Call the agency and continue to make additional attempts to voluntarily resolve payment issue(s), during the 90

day period. Do not discuss with the agency State Fair hearing rights. If questions are asked, refer them to the NOA 1261 and any other documents, issued regarding their rights to dispute the overpayment.

2. If the provider has requested a 30 day Informal Hearing, contact the person designated to hear the matter regarding the date set. Thereafter, request the date the hearing decision was mailed to the foster care provider. Set a 90 day control date, from the date of mailing to determine if the provider requests a State Fair hearing.
3. If no Informal Hearing was requested, await the control date of 90 days, to determine if the provider returns the overpayment, enters into a mutually agreed upon repayment plan or requests a State Fair Hearing. If by the 92nd day, there is no request for review of the County overpayment, the amount(s) will be deemed collectible and identified. (If the provider did request a State Fair Hearing, see Formal State Fair Hearing Requirements on page 14. Do not process collection until exhaustion of the administrative hearing process or the foster provider determines to enter a voluntary agreement.)
4. If payment issue is not resolved and administrative due process has lapsed or been exhausted, 92 days from the date of mailing the NA 1261 or two (2) days after the exhaustion of administrative due process, the overpayment is now identified and an aid claim adjustment for the federal share is required. The overpayment is now collectible and no further options to dispute the County determination of overpayment are required. The County can collect under the involuntary processes set forth in CDSS EAS 45-305.3, if the provider continues to refuse to enter into a voluntary repayment plan.
 - a. Upon the 92nd day, two days after the date the overpaid provider's time frame to request administrative review has elapsed, the overpayment is considered identified. The County will remit the federal share to CDSS no later than 20 calendar days after the end of the month in which the overpayment was identified by making an aid claim adjustment in the amount equal to the federal share.
 - b. For voluntary repayment by any type of foster care provider, see Section F. step 4.c.
 - c. For involuntary repayment for foster family homes, relative homes, NERFMs and non-related legal guardianships. These actions will only be used when voluntary agreements to repay have failed or there has been a failure of repayment under the provisions of a voluntary agreement. Below is the priority of involuntary collection.
 - Grant adjustment. The overpayment is due to aid paid when the child was not in the home of the provider agency (CDSS EAS 45-

304.122). The subject child remains in the home or agency of the foster care provider. Grant offset is not available when the provider is caring for different children other than the child for whom the overpayment was assessed. DCFS can deduct no more than 10% of the total monthly grant, each month (CDSS EAS 45-305.321).

- Collection of interest. Interest will be calculated based on principal and interest of 5 percent of the annual income prorated on a monthly basis, with simple interest on the overpayment amount based on the Surplus Money Investment Fund. Interest can not be collected if it will cause financial hardship for the provider to provide adequate care. Interest can not be collected if 1) the payment was made to meet the child's needs while the child was absent from the home; 2) the overpayment was the exclusive fault of the County; or 3) the provider did not contribute to the overpayment. (See CDSS EAS 45-305.331-332.)
 - Civil Judgment. If the provider fails to comply with a voluntary agreement, a demand for repayment and a grant offset is not available as the provider is no longer providing services to the child for whom the overpayment was assessed, the County will, unless the costs exceed the amount of the overpayment by instigating civil action, obtaining a judgment, recording abstract of civil judgment, executing a civil judgment or providing the information that the cost of the above described actions will exceed the amount of the overpayment to allow for a Director's Write-Off of the amount. (See MD #11-03, dated 11/10/11).
- d. For involuntary repayment for Group Homes and Foster Family Agencies. These actions will only be used when voluntary agreements to repay have failed or there has been a failure of repayment under the provisions of a voluntary agreement. The County is to follow the priority of involuntary collection procedures set forth in Administrative Standards for Eligibility and Assistance Programs AFDC-Foster Care Rates (EAS), Section 11-402.66. Per MPP 45-305.34, the term "County" in MPP 11-402.66 (and sub-sections), is to be substituted for the word "Department" wherever it appears in MPP 11-402.66. The priority of collection processes for Group Homes and Foster Family Agencies is as follows:
- Lump sum payment. The GH/FFA can choose one payment or the GH/FFA re-payments over a 12 month period. No interest to be assessed if an amount under \$100,000 is paid in 6 months. No interest to be assessed if an amount over \$100,000 is paid in 12 months. From the date of the executed agreement, interest shall not be assessed. If this is a self reported overpayment by the FFA or Group Home and 30 days have not elapsed, the FFA or GH has the right of reconciliation. If they fail to reconcile the self reported

overpayment within the 30 day period pursuant to 11-402.632(a), speak to county counsel regarding additional activities required by the FFA or GH. Have the county counsel review the regulations and the attempted at reconciliation, prior to determining the GH/FFA was provided the opportunity to reconcile the “overpayment” amount in the audit and failed. A group home provider who fails to reconcile in accordance with Section 11-402.632(a)(1) shall be subject to Sections 11-402.3, 11-402.5, and 11-402.6. This is satisfied by the pre-exit and final exit conference provided by the Auditor Controller’s Office. Further, the County can use a balancing process whenever an amount is owed to a provider by crediting the amount owed towards repayment of a sustained overpayment. (CDSS EAS .11-402.662)

- Demand for repayment agreement. 30 days after overpayment is identified or 30 days from the postmark date of letter notifying the GH/FFA of the demand for overpayment agreement, **after the informal hearing and State Fair Hearing processes have completed**, either by actual hearing in favor of DCFS or failure of the GH/FFA to request either hearing, the GH/FFA can enter into a repayment agreement. This agreement is required to contain specific language set forth in CDSS EAS 11-402.663 (a) thru (g). The repayment agreement will set forth a repayment schedule to repay amounts, which include interest, not to exceed a 9-year period. Interest begins to accrue on the date of issuance of the audit report containing the overpayment amount. The minimum monthly amount, including interest, will be 3% of the program’s monthly income. Interest will be based on simple interest calculations (see calculations set forth in CDSS EAS 11-402.663(c)1-3). This agreement may be re-negotiated if it results in severe harm to children in placement and specified conditions exist (conditions set forth at 11-402.663(g) 1 & 2). (CDSS EAS 11-402.663)
- Mandatory repayment agreement. When the GH/FFA provider fails to enter into the repayment agreement in the above bullet or there are three (3) outstanding payments on a repayment agreement before the overpayment is repaid, the County can set forth a mandatory repayment agreement in accordance with WIC 11466.22(d)(4). The requirements and the amount can be raised to an amount which will assure it is repaid in seven (7) years. Otherwise, the repayment period is not to exceed seven (7) years, minimum monthly amount will be 5% of the monthly income, including interest, and can be collected by off setting against the current group home provider reimbursement rates (CDSS EAS 11-402.664).

- Administrative offsets MPP 45-304.33, the County will employ an offset to the administrative portion of subsequent payments by the method noted MPP 45-305. (See Section J. step 4.c. above).
- Additional Action/Supplements to Rate. In addition to the collection process in the 2nd bullet under d. on page 17, when a GH/FFA is subject to mandatory repayment the following requirements apply; a) In addition to the repayment reduction of 11-402.664, 50% of any California Necessities Index (CNI) increases and any adjustments to the Standardized Schedule of Rates in the AFDC-FC program will be withheld and applied and b) The GH/FFA program will be ineligible to receive program change that results in an increased rate classification level (RCL) until the amount is recovered or a waiver is granted by CDSS. (If waiver granted and an increased RCL occurs, it will be subject to 11-402.664 recovery amounts. (See CDSS EAS 1-402.665 and contact county counsel for assistance.)
- Additional Action/Certificate against real or personal property of group home. In addition to collection processes, the County may also file a certificate against the real or personal property of a group home provider, in accordance with WIC 11466.33. The code section contains multiple requirements to review, prior to making the determination to file a certificate. If all requirements are met to file the certificate, it is to be filed with the County Clerk. The County Clerk may then file a lien against the property. The County may bring action within a 10-year period and seek judgment, allowing for the filing of an abstract of judgment. (See CDSS EAS 11-402.666.)
- Additional Action/County action impacting RCL Rate. This section (in conjunction with .668) indicates contact can be made with CDSS regarding the GH/FFA's failure to repay an overpayment and request termination of the RCL. If DCFS determines to take this action, DCFS should only do so after the providers due process has completed in favor of the County by State Fair Hearing or civil judgment. The Initial Statement of Reasons, issued with the emergency regulations, limit the action of the County to "collection". Contact with County Counsel should occur to determine if this action could occur and assure that the requirements of CDSS EAS 11-402.667 have been met.
- Additional Action/County request for RCL rate termination. The County, DCFS, does not have the right to act in the capacity of CDSS for the purpose of terminating a Group Home or Foster Family Agencies' rate as indicated in CDSS EAS 11-402.3.393 and 394. As indicated in the bullet above, the County could request CDSS to consider terminating an RCL rate in conjunction with its collection actions. The Initial Statement of Reasons issued with the emergency

regulations limit the action of the County to “collection.” Contact with County Counsel should occur to determine if this action could occur and assure that the requirements of CDSS EAS 11-402.668 have been met.

5. CONTRACTUAL REMEDIES, in the event CONTRACTOR does not return payment, or enter into an agreement for payment on a mutually agreed upon timeframe:

- Prepare a recommendation to place the home on “Hold”/“Do Not Refer: (DNS)“Do Not Use” (DNU) and submit to the manager for approval process to the Director of DCFS. (See Foster Family Agency or Group Home Contracts regarding the process for “Do Not Refer.”)
- In the event CONTRACTOR does not return an Overpayment, either under the terms of a voluntary agreement or under the terms of an involuntary repayment agreement after exhaustion of due process in favor the COUNTY, COUNTY may place a Hold Status, DNR Status, DNU Status, Corrective Action Plan.
- County will provide written notice of its intention to place CONTRACTOR on a Hold/DNR/DNU Status at least 15 days in advance.
- COUNTY will notify CONTRACTOR in writing within 72 hours of DCFS’ decision to place CONTRACTOR ON Hold/DNR/DNU.
- Verbal notification of such actions will be provided prior to or at the time of CONTRACTOR’S placement on Hold/DNR/DNU Status to the extent possible.

NOTE: When Hold/DNR/DNU Status is recommended, the written notification letter will include the reason(s) for placing Contractor on Hold/DNR/DNU. It will also invite Contractor to participate in a Review Conference to discuss the COUNTY’s decision and include a deadline by which the CONTRACTOR must indicate its intent to participate in the Review Conference. Fax the notification to the GH/FFA, keeping a copy of the confirmation of receipt of FAX.

CONTRACT INVESTIGATION, MONITORING, AND AUDIT REMEDIES AND PROCEDURES

These internal policies and procedures are attached to the Foster Care Placement Services (FCPS) Contracts to inform CONTRACTORS of Department of Children and Family Services' (DCFS) and the Probation Department's (Probation) investigation, monitoring, and audit remedies and procedures. These policies and procedures are subject to revision by DCFS and the Probation, upon 30 days prior written notice to CONTRACTOR (which will not require a contract amendment), and DCFS and Probation may vary from these protocols and procedures when such variance is required to protect the health and safety of the children, except that all Do Not Refer (DNR) and Do Not Use (DNU) actions must be approved by DCFS' Director or the Probation's Chief Probation Officer or his or her Deputy Director level designee. Such variance may not be arbitrary and capricious, unreasonable, or discriminatory.

DCFS and Probation are responsible for monitoring and investigating, as a whole, all facilities licensed by Community Care Licensing Division (CCLD) to provide out-of-home care when there are allegations of child abuse, neglect or exploitation, or for administrative, programmatic or fiscal non-compliance.

During the normal course of its compliance monitoring or as the result of an investigation, DCFS or Probation may take action, when necessary, to protect placed children in these facilities, including requesting immediate corrective action, placing the CONTRACTOR on Hold, Administrative Hold, DNR, or DNU status. Staff may recommend a corrective action plan, Hold, Administrative Hold, DNR, or DNU Status, regardless of whether law enforcement or CCLD take similar action.

The County of Los Angeles Auditor-Controller is also responsible for completing fiscal review audits of CONTRACTORS. Fiscal review audit findings are not addressed in this Exhibit N, except to the extent discussed below or specifically referenced in other parts of the Contract. Nothing in this paragraph shall prevent the COUNTY from relying on the findings of the Auditor-Controller as a basis for imposing any of the Administrative Remedies provided below.

A. Administrative Remedies

DCFS and Probation may utilize one or more of the following actions in response to findings uncovered in the normal course of monitoring, as a result of investigations of abuse and neglect in out-of-home care, or in audits of program or fiscal contract requirements.

1. **Corrective Action Plan (CAP)** - When DCFS and Probation reasonably determines that a CONTRACTOR's noted non-compliance is correctable; a CAP shall serve as the CONTRACTOR's commitment to resolve noted areas or items of non-compliance.
2. **Administrative Hold** – After providing the CONTRACTOR with a 15 business day Notice of Intent to place CONTRACTOR on an Administrative Hold, if during which time the CONTRACTOR cannot demonstrate its resolution of the issues, COUNTY retains the right to temporarily suspend referrals of children to CONTRACTOR by placing CONTRACTOR on an Administrative Hold status, for up to a 45-day period. Administrative Holds are for administrative, programmatic, and fiscal non-compliance issues requiring immediate resolution that are not related to child safety.

Limited to an additional 45 days, an Administrative Hold status may be extended for extenuating circumstances beyond the control of DCFS and Probation, with the understanding that the

extension of the Administrative Hold status on a CONTRACTOR will require the approval of the Director or his Deputy Director level designee.

3. **Investigative Hold Status** - COUNTY retains the right to temporarily suspend referrals of children to CONTRACTOR by placing CONTRACTOR on Hold status, for up to a 45-day period at any time during an investigation, monitoring, or audit, when based on prima facie evidence, DCFS or Probation reasonably believes, in its sole discretion, that the CONTRACTOR has engaged in conduct which may jeopardize a minor or minors. Limited to an additional 45 days, a hold status may be extended for extenuating circumstances beyond the control of DCFS and Probation, with the understanding that the extension of Hold status on a CONTRACTOR will require the approval of the Director or his Deputy Director level designee. Hold Status may also be implemented when there has been a serious event that may implicate the CONTRACTOR, in issues of abuse or neglect; there is serious risk of abuse or neglect; or non-compliance with a significant administrative, fiscal, or programmatic requirement of the Contract for which the CONTRACTOR failed to take corrective action (when appropriate) pursuant to Part I, Section 16.0 of FCPS Contracts. A Hold request must be approved by a Division Chief, or Bureau Chief.
4. **Do Not Refer (DNR) Status** - DNR refers to the suspension of new DCFS and Probation placements when COUNTY reasonably believes, in its sole discretion, based on prima facie evidence that the CONTRACTOR has engaged in conduct which may jeopardize children; there has been a serious event that may implicate the CONTRACTOR in issues of abuse or neglect; there is serious risk of abuse or neglect; or in issues of non-compliance with significant administrative, fiscal, or programmatic requirements of this Contract for which the CONTRACTOR failed to take corrective action (when appropriate) pursuant to Part I, Subsection 16.1 of the FCPS Contracts, and as further described in Exhibit N. A DNR recommendation must be approved by a Deputy Director or a Deputy Chief.
5. **Do Not Use (DNU) Status** - DNU means that all Placed Children are removed from the CONTRACTOR's care within a specified period of time. No placement referrals may be made to the facility. DNU Status is used when COUNTY reasonably believes, in its sole discretion, based upon prima facie evidence, that the CONTRACTOR has engaged in conduct which may jeopardize children; there has been a serious event that may implicate the CONTRACTOR in issues of abuse or neglect; there is serious risk of abuse or neglect; or in issues of non-compliance with significant administrative, fiscal, or programmatic requirements of this Contract for which the CONTRACTOR failed to take corrective action (when appropriate) pursuant to Part I, Subsection 16.1 of the FCPS Contracts, and as further described in Exhibit N. A DNU recommendation must be approved by a Deputy Director or a Deputy Chief.
6. **Termination Hold** - In the event either COUNTY or CONTRACTOR terminates this Contract for convenience or for default, COUNTY shall suspend referrals of children to CONTRACTOR and remove, or cause to be removed, all Placed Children prior to the effective date of termination. In such an event, the procedures described in this exhibit will not occur. A Termination Hold must be approved by a Division Chief or a Bureau Chief.

B. Corrective Action Plan (CAP) Procedures

1. Any verbal notice that is given to CONTRACTOR to make needed corrections, requested by DCFS or Probation, that requires immediate action to resolve child safety issues (including safety of Non-Minor Dependents) shall include specific due dates, not to exceed beyond three calendar days. DCFS or Probation will provide written confirmation of the requested corrective action within three business days.

2. Where immediate action is not required, CONTRACTOR shall submit CONTRACTOR's proposed CAP to DCFS and Probation within 30 calendar days from receipt of the written confirmation from DCFS or Probation (Contractor Notification Letter); the timeframe depends on the nature of the non-compliance. The CONTRACTOR's CAP is reviewed and approved by DCFS and Probation within 15 business days.
3. The CAP must address each finding made in the Contractor Notification Letter. An appropriate CAP identifies the noted non-compliance, includes a brief statement of the estimated root-cause and includes the detailed action that will be implemented to correct the noted non-compliance. This is followed by an explanation of how the corrective action will be implemented; an explanation of what actions will take place to ensure that the corrective action is maintained; and the CONTRACTOR's plan to prevent subsequent repeated instances of the same non-compliance or inappropriate action. The CAP should include the requisite timeframes necessary for full implementation and identify the title(s) of the CONTRACTOR's staff that will insure the corrective actions are implemented. The CAP should also include the CONTRACTOR's internal Quality Assurance or Continuous Improvement Process to allow for an appropriate adjustment of CONTRACTOR's policies, procedures as necessary and when the CONTRACTOR will complete its internal root-cause analysis as necessary. A CAP addendum will be required if the CAP does not adequately address all issues.
4. DCFS or Probation (or together if necessary) will conduct follow-up to assess for implementation of CONTRACTOR's approved CAP. This may include where necessary, unannounced visits to the resource family approved home, the STRTP or ISFC sites, and if necessary to other CONTRACTOR locations to verify the corrective action implementation. Once the corrective action has been completed and verified, the CONTRACTOR is notified in writing.
5. A Hold, DNR, or DNU Status may be imposed at the discretion of DCFS or Probation, if the requested corrective action is not implemented and maintained or if the CONTRACTOR does not submit an approved CAP or CAP addendum within the agreed-upon timeframes.

C. Administrative Hold Procedures

1. COUNTY will notify CONTRACTOR in writing via electronic mail 15 business days prior to the effective date of DCFS or Probation's (or both) intention to place CONTRACTOR on an Administrative Hold for Administrative reasons not related to child safety. The COUNTY will notify the CONTRACTOR by phone call prior to sending out the Notice of Intent letter to place the CONTRACTOR on Administrative Hold.
2. The Contractor Notification Letter will also invite the CONTRACTOR to participate in a Review Conference and include a deadline for the CONTRACTOR's response (desire to participate) within 5 business days. Failure by the CONTRACTOR to respond by the deadline will result in default or waiver by the CONTRACTOR to proceed with the Review Conference.
3. During the Review Conference, the CONTRACTOR will meet with the Departments' representative at the Children's Administrator III, Assistant Regional Administrator, Probation Director, Probation Senior Director, or higher level, other COUNTY (DCFS, Probation, and Auditor-Controller) Departmental staff, or CCLD to discuss the investigative or administrative findings and to provide an opportunity for the CONTRACTOR to respond to the findings. The Review Conference will be held within 30 days of the date of the Contractor's Notification Letter of placement on Hold, DNR, or DNU Status, unless CONTRACTOR waives the time limit. The Review Conference is provided to ensure that the CONTRACTOR is afforded a process for

responding to allegations against them and for airing their grievances. One week prior to the then scheduled Review Conference, the CONTRACTOR has the right to present written evidence in the form of relevant declarations, affidavits, and documents and a written statement intended to be presented during the Conference. The CONTRACTOR may also request that DCFS or Probation interview any witnesses identified by the CONTRACTOR who have not already been interviewed.

4. Based on the reason (i.e., Fiscal, Contractual, Programmatic), an appropriate designated middle management level staff will conduct the Review Conference. DCFS, Probation, and CONTRACTOR will have the opportunity to present information related to the findings and each will be able to question the other with respect to each finding. Information provided by DCFS or Probation during the conference must be consistent with confidentiality laws. The CONTRACTOR may choose to seek authorization from the Juvenile Court to access additional documentation and information pertaining to the allegations, and to use such documentation and information during the Review Conference. The authorization or the approval must be in writing from the Court. DCFS and Probation will consider any new information presented in the CONTRACTOR's written statement and information presented during the Conference.

Consistent with the informal and non-adversarial atmosphere of the Review Conference, CONTRACTOR and COUNTY agree that only appropriate CONTRACTOR personnel and appropriate DCFS, Probation, Auditor-Controller, or CCLD personnel shall participate in the Review Conference; and legal representatives shall not be present at the Review Conference.

5. The Children's Administrator III, Assistant Regional Administrator, Director, or higher level staff will assess the information presented by the CONTRACTOR and make a final determination whether to withdraw the recommendation or to consult with others within DCFS or Probation with regard to the intended recommendation. This determination will be put in writing and provided to CONTRACTOR within 15 business days of the Review Conference.
6. Hold, DNR, or DNU Status may be lifted at any time that DCFS or Probation obtains information which leads them to believe that: 1) the original basis for imposing such status is no longer applicable, or 2) Hold, DNR, or DNU status is no longer appropriate. In instances where Hold, DNR, or DNU Status no longer applies, DCFS and Probation shall act as expeditiously as possible to remove CONTRACTOR from such status.

D. Investigative Hold, Do Not Refer (DNR), and Do Not Use (DNU) Procedures

1. COUNTY will notify CONTRACTOR in writing via electronic mail within 72 hours of DCFS or Probation's (or both) decision to place CONTRACTOR on an Investigative Hold, Hold, DNR, or DNU for reasons related to child safety. The COUNTY will notify the CONTRACTOR by phone call prior to sending out the written notice of placement on an Investigative Hold, Hold, DNR, or DNU. To the extent possible and reasonable, and without interfering with any law enforcement investigation, and consistent with statutes and regulations related to confidentiality, notification will include the reason(s) for the Hold, DNR, or DNU Status. The Contractor Notification Letter will also invite the CONTRACTOR to participate in a Review Conference and include a deadline for the CONTRACTOR's response (desire to participate) within 5 business days. Failure by the CONTRACTOR to respond by the deadline will result in default or waiver by the CONTRACTOR to proceed with the Review Conference.
2. The Contractor Notification Letter will also invite the CONTRACTOR to participate in a Review Conference and include a deadline for the CONTRACTOR's response (desire to

participate) within 5 business days. Failure by the CONTRACTOR to respond by the deadline will result in default or waiver by the CONTRACTOR to proceed with the Review Conference.

3. During the Review Conference, the CONTRACTOR will meet with the Departments' representative at the Children's Administrator III, Assistant Regional Administrator, Director, or higher level, other COUNTY (DCFS, Probation, and Auditor-Controller) Departmental staff, or CCLD to discuss the investigative or administrative findings and to provide an opportunity for the CONTRACTOR to respond to the findings. The Review Conference will be held within 30 days of the date of the Contractor's Notification Letter of placement on Hold, DNR, or DNU Status, unless CONTRACTOR waives the time limit. The Review Conference is provided to ensure that the CONTRACTOR is afforded a process for responding to allegations against them and for airing their grievances. One week prior to the then scheduled Review Conference, the CONTRACTOR has the right to present written evidence in the form of relevant declarations, affidavits, and documents and a written statement intended to be presented during the Conference. The CONTRACTOR may also request that DCFS or Probation interview any witnesses identified by the CONTRACTOR who have not already been interviewed.
4. Based on the reason (i.e., Fiscal, Contractual, Programmatic), an appropriate designated middle management level staff will conduct the Review Conference. DCFS, Probation, and CONTRACTOR will have the opportunity to present information related to the findings and each will be able to question the other with respect to each finding. Information provided by DCFS and Probation during the conference must be consistent with confidentiality laws. The CONTRACTOR may choose to seek authorization from the Juvenile Court to access additional documentation and information pertaining to the allegations, and to use such documentation and information during the Review Conference. The authorization or the approval must be in writing from the Court. DCFS and Probation will consider any new information presented in the CONTRACTOR's written statement and information presented during the Conference.

Consistent with the informal and non-adversarial atmosphere of the Review Conference, CONTRACTOR and COUNTY agree that only appropriate CONTRACTOR personnel and appropriate DCFS, Probation, Auditor-Controller, or CCLD personnel shall participate in the Review Conference; and legal representatives shall not be present at the Review Conference.

5. The Children's Administrator III, Assistant Regional Administrator, Director, or higher level staff will assess the information presented by the CONTRACTOR and make a final determination whether to withdraw the recommendation or to consult with others within DCFS and Probation with regard to the intended recommendation. This determination will be put in writing and provided to CONTRACTOR within 72 hours of the Review Conference.
6. Hold, DNR, or DNU Status may be lifted at any time that DCFS or Probation obtains information which leads them to believe that: 1) the original basis for imposing such status is no longer applicable, or 2) Hold, DNR, or DNU status is no longer appropriate. In instances where Hold, DNR, or DNU Status no longer applies, DCFS and Probation shall act as expeditiously as possible to remove CONTRACTOR from such status.

Revised 1/9/2018

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REPORT ON OUTSIDE EMPLOYMENT ACTIVITIES

- Any [insert Contractor name] employee or independent contractor who is providing services under a contract with the Los Angeles County Department of Children and Family Services is required to complete a Report on Outside Employment Activities and to consult with his or her supervisor for approval.
- The Report on Outside Employment Activities must be completed on an annual basis and submitted to [insert Contractor name].
- Outside employment includes any gainful profession, trade, business or occupation for any person, firm, corporation or governmental entity and includes self-employment.

EMPLOYEE/INDEPENDENT CONTRACTOR INFORMATION		
Name:	Title:	Work Location:
Duties:	Employee Number:	Telephone Number:

I. DECLARATION – *[Please mark the statement that applies to your situation.]*

- I am not presently engaged and will not be engaged in the future in any outside employment (including self-employment). If I decide to engage in outside employment in the future, I understand I must immediately complete a new Report on Outside Employment Activities and provide the updated report to my supervisor.
- I am presently engaged or will be engaged in the future in outside employment (including self-employment). This outside employment:
 - Is not in conflict with my official duties for [insert Contractor name];
 - Does not involve advisory or consultant services which might conflict with interests of the County of Los Angeles; and
 - Does not involve work using a professional license such that, when combined with my work for [insert Contractor name], will exceed the allowable caseload or hours under applicable rules and regulations.

[Please complete the attached description of outside employment.]

II. ACKNOWLEDGMENT

I certify the accuracy of the information I have provided and acknowledge that the information I have provided may be subject to verification.

In addition, I agree that if there is any change in my outside employment status, I will immediately report this to my supervisor. I understand that failure to do so may result in disciplinary action, up to and including termination of my services as an employee or independent contractor.

Print Name: _____

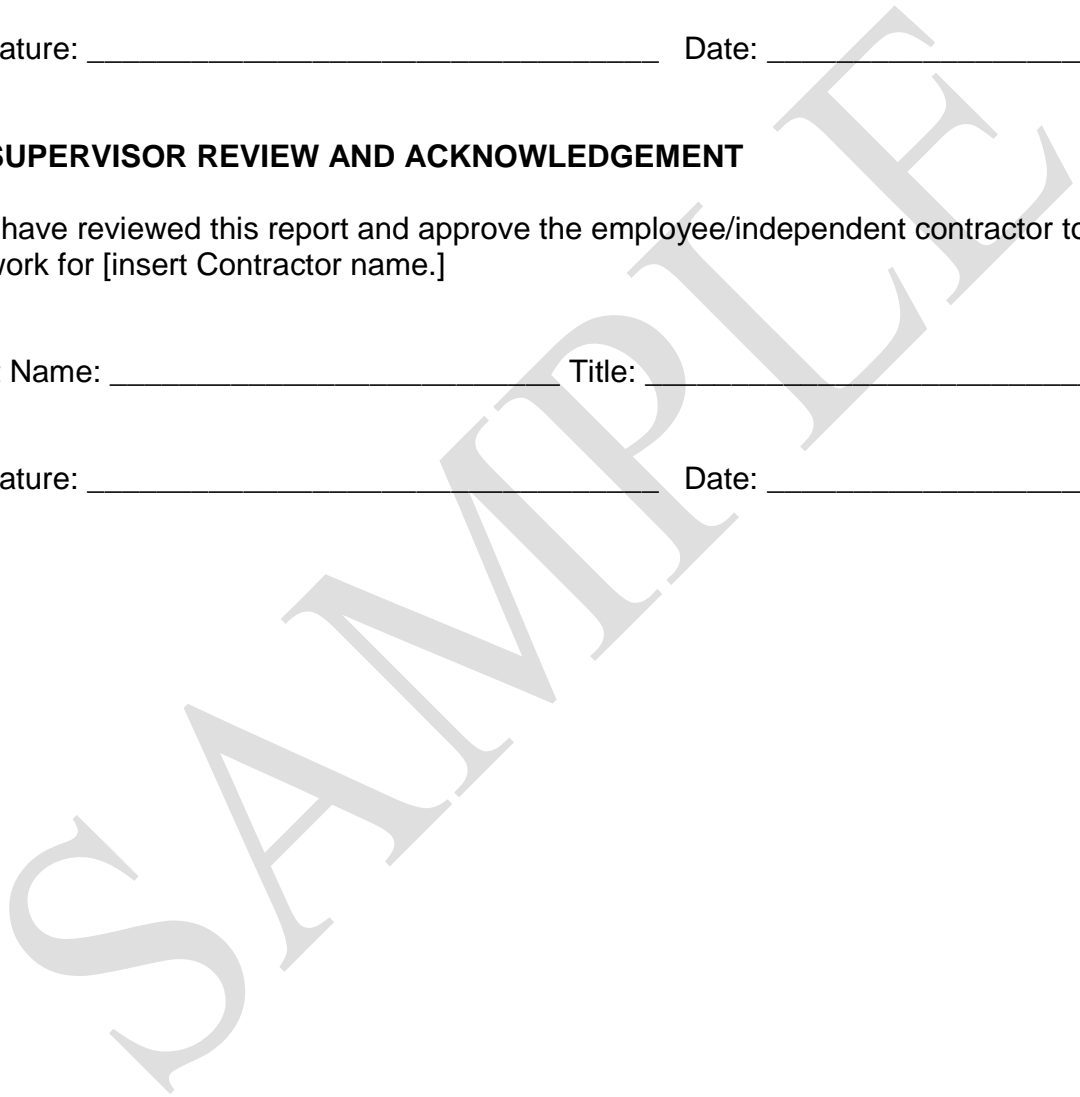
Signature: _____ Date: _____

III. SUPERVISOR REVIEW AND ACKNOWLEDGEMENT

I have reviewed this report and approve the employee/independent contractor to work for [insert Contractor name.]

Print Name: _____ Title: _____

Signature: _____ Date: _____



DESCRIPTION OF OUTSIDE EMPLOYMENT

Employer Name:
Employer Address:
Employer Telephone Number:
Employee Title:
Employee Duties:
Hours Worked (Per Week)*:

*Hours Worked must be declared to the best of your ability. "Hours vary" will not be accepted for approval.

Employer Name:
Employer Address:
Employer Telephone Number:
Employee Title:
Employee Duties:
Hours Worked (Per Week)*:

*Hours Worked must be declared to the best of your ability. "Hours vary" will not be accepted for approval.

Employer Name:
Employer Address:
Employer Telephone Number:
Employee Title:
Employee Duties:
Hours Worked (Per Week)*:

*Hours Worked must be declared to the best of your ability. "Hours vary" will not be accepted for approval.

REPORT ON CONFLICT OF INTEREST

- Any [insert Contractor name] officer, Board of Directors member, or volunteer who is providing services under a contract with the Los Angeles County Department of Children and Family Services is required to complete a Report on Conflict of Interest.
- The Report on Conflict of Interest must be completed on an annual basis and submitted to [insert Contractor name].
- Outside employment includes any gainful profession, trade, business or occupation for any person, firm, corporation or governmental entity and includes self-employment.

I. DECLARATION

I am not presently engaged nor plan to be engaged in any outside employment (including self-employment):

- Which is in conflict with my official duties for [insert Contractor name]; or
- Which involves advisory or consultant services which might conflict with interests of the County of Los Angeles.

II. ACKNOWLEDGMENT

I certify the accuracy of the information I have provided and acknowledge that the information I have provided may be subject to verification.

In addition, I agree that if there is any change in my conflict of interest status, I will immediately report this to [insert Contractor name]. I understand that failure to do so may result in termination of my services as an officer, Board of Directors member, or volunteer.

Print Name: _____

Signature: _____ Date: _____

**COUNTY OF LOS ANGELES - DEPARTMENT OF CHILDREN AND FAMILY SERVICES
CONTRACTS ADMINISTRATION DIVISION
FEDERAL AWARD INFORMATION (2CFR 200.332)
FISCAL YEAR _____**

Date of Notification: _____ Subrecipient Name: _____

Contract Number: _____ Federal Award Identification Number (FAIN): _____

Federal Award Date: _____

Subaward Period of Performance: _____ Subaward Budget Period: _____

Amount of Federal funds obligated by the pass-through entity: _____

Amount of Federal funds obligated to the Subrecipient by the pass-through entity include the current obligation:

Total Amount of Federal Award committed to the Subrecipient: _____

Federal Award Project description as required by FFATA:

Name of Federal Awarding Agency: _____ Agency's Assistance Listing Number: _____

(Formerly Catalog of Federal Domestic Assistance)

Please complete, sign the bottom portion, and return to:

Department of Children and Family Services - Contracts Administration Division

Attention: _____
425 Shatto Place, Room 410, Los Angeles, CA 90020

Agency's DUNS number: _____

Indirect Cost Rate letter: Yes No

Acknowledgment: As pursuant to 2CFR 200.332(a)(1)(xiii), this is to acknowledge that this Agency does not engage in any Research and Development under this contract.

Agency's Legal Name

Agency's representative (Print Name)

Title

Agency's representative (Print Name)

Title

Signature

Date

Signature

Date

**Certification of Compliance
Urgency Ordinance, County Code Title 2 – Administration, Division 4 –
Miscellaneous – Chapter 2.212
(COVID-19 Vaccinations of County Contractor Personnel)**

I, _____, on behalf of _____,
(the "Contractor"), certify that on County Contract(s) _____
_____ :

All Contractor Personnel* on this Contract are fully vaccinated as required by the Ordinance.

Most Contractor Personnel* on this Contract are fully vaccinated as required by the Ordinance. The Contractor or its employer of record, has granted a valid medical or religious exemption to the below identified Contractor Personnel. Contractor will certify weekly that the following unvaccinated Contractor Personnel have tested negative within 72 hours of starting their work week under the County Contract, unless the contracting County department requires otherwise. The Contractor Personnel who have been granted a valid medical or religious exemption are: [LIST ALL CONTRACTOR PERSONNEL]:

*Contractor Personnel includes subcontractors.

SAMPLE

I have authority to bind the Contractor, and have reviewed the requirements above and further certify that I will comply with said requirements.

Signature

Date

Title

Company/Contractor Name

INFORMATION SECURITY AND PRIVACY

County's Information Assets are essential to the continued operation of the County and Department and must be protected in a manner commensurate with its sensitivity, value, and criticality. It is the responsibility of the Contractor to adhere and implement the required measures and safeguards to protect and preserve the privacy, confidentiality, availability and integrity of County Confidential Information (electronic and hard copy and in any form, format or medium, in-transit and at-rest) from unauthorized disclosure, modification, or destruction, and shall safeguard them to the extent permitted by law.

Information Security and Privacy provisions and requirements extends to all subcontractors, agents, individuals, entities, and/or organization operating on behalf of the Contractor that handle (e.g., access, view, transport, transmit, store) County Information Assets to perform work under this Agreement.

Confidential Information: County requires its contractors, subcontractors, and agents to keep confidential all data, records and information (electronic and hard copy, in-transit and at-rest, and in any form, format or medium) which are designated or marked as Confidential Information as prescribed herein. The parties agree, to implement proper and sufficient administrative, technical, and physical safeguards to protect Confidential Information, and comply with legal and County mandates as applicable. Confidential Information includes information which is exempt from public disclosure in specific legislation or which is identified as personal, sensitive, or confidential such as personally identifiable information (PII), individually identifiable health information (PHI), medical records (MI), employment and education records, and non-public information as specified in all applicable federal, State and local laws and regulations. In general, any data and information that is exempt from public disclosure under either federal, State, local laws and County policies is confidential. If the receiving party is required to produce the data by law, court order, or governmental authority, the disclosing party must be promptly notified of such obligation.

The parties shall: (a) use Confidential Information, as set forth in this Contract and otherwise for the purposes or projects approved by the County; (b) ensure individual anonymity and adhere to the mandates for confidentiality; (c) not disclose or disseminate any Confidential Information including Personally Identifiable Information (PII), Protected Health Information (PHI) and Medical Information (MI) to the public; (d) implement reasonable and adequate measures and safeguards to protect and preserve the privacy, confidentiality, availability and integrity of County Confidential Information (electronic and hard copy); and (e) implement reasonable and necessary measures to timely identify, detect, protect, respond, mitigate, and prevent against any (intentional or accidental) unauthorized acquisition, access, use, modification, disclosure, loss or damage of County Confidential Information by any cause (manmade and natural); and (f) Comply, as applicable, with federal, State, local, and County data and information protection rules, laws, regulations, mandates, ordinances, standards, best practices, guidelines, directives, policies and procedures including but not limited to the California Public Records Act, First Amendment, privacy laws, the California Education Code, California Information Practices Act of 1977, the Federal Privacy Act of 1974, and the Federal

Family Education Rights and Privacy Act of 1974, California Civil Code Section 1798.82, California Penal Code Section 502, Health Insurance Portability and Accountability Act of 1996 (HIPAA), Health Information Technology for Economic and Clinical Health Act (HITECH), and Los Angeles County Board of Supervisors Policy Manual Chapters 3 (3.040 - Records Management and Archive of County Records), 5 (5.200 - Contractor Protection of Electronic County Information) and 6 of County's Policy Manual, which can be accessed at https://library.municode.com/ca/la_county_-_bos/codes/board_policy?nodeId=CH6INTE.

During the course of this Contract, the parties may provide each other with certain information, data, or materials in writing which the disclosing party has clearly marked or identified in writing as confidential or proprietary in nature or if orally disclosed, reduced to writing by disclosing party within thirty (30) days of disclosure ("Confidential Information"). The receiving party shall receive and hold Confidential Information in confidence and agrees to use its reasonable efforts to prevent disclosure to third parties of Confidential Information in the manner the receiving party treats its own similar information, but in no case less than reasonable care shall be exercised by the receiving party. Except as required by law or with permission from disclosing party, receiving party will not disclose Confidential Information.

The parties shall, as needed, inform all of its officers, employees, and agents engaged in the performance of this Contract of the confidentiality provisions of this Contract. Contractor shall have in place with its officers, employees and agents including subcontractors written agreements having the effect of requiring such individuals to protect and keep Confidential Information confidential and protected.

DATA HOSTING SECURITY

Contractor shall comply with the current Cloud Security Alliance's (CSA) Cloud Control Matrix (CCM) security requirements for Contractor hosted services or applications that are included as part of Contractor's solution (<https://cloudsecurityalliance.org/research/ccm/>), and adhere to The National Institute of Standards and Technology (NIST), and/or Information Security Management System Standards 27001 and 27002 promulgated by the International Organization for Standardization (ISO) and International Electrotechnical Commission (IEC), as such Standards relate to risk assessment, training and awareness, metrics and reporting, organization and allocation of responsibilities, incident management, and compliance.

ACCESS

Contractor shall implement multi-layered adequate administrative, technical, and physical access control mechanisms and authentication and authorization verification process while enforcing separation of duties on systems and infrastructure handling County data and information, including but not limited to, Multifactor Authentication (MFA) and to constantly monitor, protect, and limit the use and disclosure of information to minimum necessary required to accomplish the purposes described in this Agreement. Access to County data must follow the principle of least privilege and limited to those personnel with a legitimate business justification on need-to-know basis required to perform work under

this Agreement. Access to County data and information shall immediately suspend, terminated, or removed upon business need is fulfilled, upon suspension or termination of employment, contract, or agreement.

SYSTEM ACQUISITION, DEVELOPMENT, AND MAINTENANCE

Contractor shall adopt and implement adequate security and privacy measure (administrative, technical and physical) and provisions and use industry accepted standard and framework for purchase, use, or development of information systems, including application services delivered through public networks. Such measures include but not limited to use of Web Application Firewall (WAF) for all application and system that process County data and information.

VULNERABILITY ASSESSMENT

Contractor shall perform an adequate and comprehensive vulnerability assessment and address all findings prior to final delivery of the product to the County.

AUDIT TRAILS AND LOGGING

The system/application shall chronologically record, log, store and adequately retain all system events, transactions, and user activities and actions consistent with NIST SP 800-92 Guide to Computer Security Log Management (<https://csrc.nist.gov/publications/detail/sp/800-92/final>). At minimum, logs shall include but not limited to, the following:

1. Successful and failed application authentication attempts;
2. Date and time;
3. User or system account associated with an event;
4. Device used (e.g. source and destination IPs, terminal session ID, web browser, etc.)
5. Operating System type and version;
6. log on attempts (successful or unsuccessful);
7. Function(s) performed after logged on;
8. Configuration changes;
9. Account changes (e.g., account creation and deletion, account privilege assignment);
10. Successful/failed; and
11. Use of privileged accounts.

CRYPTOGRAPHY

a. STORAGE OF DATA

Contractor shall adequately secure and encrypt all County's electronic data and information while at storage (e.g., servers, workstations, portable/mobile devices, wearables, tablets, thumb drives, external hard drives, etc.) using Advanced Encryption Standard (AES) with a minimum cipher strength of 256-bit in accordance with: (a) Federal Information Processing Standard Publication (FIPS) 140-2; (b)

National Institute of Standards and Technology (NIST) Special Publication 800-57 Recommendation for Key Management – Part 1: General (Revision 3); (c) NIST Special Publication 800-57 Recommendation for Key Management – Part 2: Best Practices for Key Management Organization; and (d) NIST Special Publication 800-111 Guide to Storage Encryption Technologies for End User Devices.

b. TRANSFER OF DATA

Data and information shall be transferred and transmitted securely via online methods such as secure file transfer (SFTP) software, encrypted email or using encrypted magnetic or optical media. The Parties shall determine the transfer method appropriate for the Project. All transmitted data and information must be encrypted using the latest stable version of Secure Sockets Layer (SSL)/Transport Layer Security (TLS) with a minimum cipher strength of 128-bit in accordance with: (a) NIST Special Publication 800-52 Guidelines for the Selection and Use of Transport Layer Security Implementations; and (b) NIST Special Publication 800-57 Recommendation for Key Management – Part 3: Application-Specific Key Management Guidance.

RETURN OF DATA

Upon termination of this Agreement, Contractor must return or thoroughly and irretrievably destroy all County data and information in any form, format or medium. County data and information (electric and hard copy) must be properly purged, cleared, shredded, sanitized or destroyed in fashion that it is rendered unusable, unreadable, or indecipherable to unauthorized individuals consistent with National Institute of Standards and Technology (NIST) Special Publication 800-88, Guidelines for Media Sanitization. Contractor shall provide proper and satisfactory proof of proper destruction and sanitization of County data and information within ten (10) business days of data destruction.

CERTIFICATION

County must receive within ten (10) business days of its request, a certification from Contractor (for itself and any Sub-Contractors) that certifies and validates compliance with the encryption standards set forth above. In addition, Contractor shall maintain a copy of any validation/attestation reports that its data encryption product(s) generate, and such reports shall be subject to audit in accordance with the Contract. Failure on the part of the Contractor to comply with any of the provisions shall constitute a material breach of this Contract upon which the County may terminate or suspend this Contract.

DISCLOSURE OF SECURITY INCIDENT AND DATA BREACH

The Contractor shall notify the County no later than (48) hours or two business days upon discovery or reasonable belief of any suspected, attempted, successful, or imminent threat of unauthorized electronic or physical access, use, modification, exposure, acquisition, disclosure, compromise, breach, loss or destruction of County data and information; interference with Information Technology operations; or significant violation of County or departmental policy (“Security Incident”). Breach reports shall include, to the extent available, the identification of each individual whose Data has been, or is reasonably believed to have been accessed, viewed, acquired, or disclosed during such

breach. Security incidents that do not result in any unauthorized access, use, disclosure, modification, destruction of information or interference with system operations may be reported in the aggregate upon written request of County in a manner and frequency mutually acceptable to the Parties. The Parties acknowledge that incidents including, but not limited to, ping sweeps or other common network reconnaissance techniques, attempts to log on to a system with an invalid password or username, and denial of service attacks that do not result in a server being taken off line, may occur from time to time.

AGREEMENT TO OBEY ALL LAWS

The Parties shall at all times observe, comply with, and perform all obligations hereunder in accordance with all applicable federal, state, county, and local governmental agencies laws, ordinances, codes and regulations that in any manner affect the terms of this Agreement.

CYBER INSURANCE REQUIREMENT

As applicable, contractor will maintain sufficient cyber insurance to cover any and all losses, security breaches, privacy breaches, unauthorized distributions, or releases or uses of any data transferred to or accessed by Contractor under or as a result of this Contract. This insurance shall provide sufficient coverage(s) for the Contractor, the County, and affected third parties for the review, repair, notification, remediation and other response to such events, including but not limited to, breaches or similar incidents. The Contractor shall obtain modified coverage(s) as reasonably requested by the County within ten (10) business days of the Contractor's receipt of such request from the County.

Notice to COUNTY related to information security shall be forwarded to COUNTY and also to the DCFS Chief Information Security Officer:

Allen Ohanian
Department of Children and Family Services
Chief Information Security Officer
12440 Imperial Hwy
Norwalk, California 90650
Telephone: (323) 627-9855
Email: aohanian@dcfs.lacounty.gov