

CONTRACT FOR SERVICES

THIS AGREEMENT, made and entered into this 23rd day of May, 2005, by and between the Board of County Commissioners of Nassau County, Florida, a political subdivision of the State of Florida, (hereinafter referred to as "COUNTY"), and CAROLYN KING, (hereinafter referred to as "Ms. King"), authorized to do business in the State of Florida at 4 Royal Tern Road, Fernandina Beach, FL. 32034.

WITNESSETH

WHEREAS, Ms. King agrees to execute the services described below for the specified fee and as contained in Exhibit "A", and

WHEREAS, Ms. King as an independent contractor may contract with other entities for same services, and

NOW, THEREFORE in consideration of \$40.00 per hour not to exceed 24 hours per week and No/100 (not to exceed \$49,920.00 for a period of not more than 52 weeks) and reimbursement of any map (Jacksonville, Tallahassee etc.) miles at .29 per mile and conformance with all county and Family Matters travel policies and other mutually agreed upon consideration, the receipt of which and the adequacy of which are mutually acknowledged, it is mutually covenanted, promised and agreed by the parties hereto as follows:

- The work performed by Ms. King shall conform to the requirements set forth in Exhibit "A", as attached.
- Task list information shall be provided to the County with each invoice. Progress reports shall be in a form approved by the Judith K. Dey, Director, Family Matters.
- The County's representative regarding this contract shall be Judith K. Dey, Director, Family Matters, whose address is 86004 Christian Way, Yulee, Florida 32097; telephone: (904) 548-4850.

- Ms. King will complete the work described in the scope of work which is in the attached hereto as Exhibit "A", in a timely manner unless delayed by unavoidable factors beyond its control including, but not limited to, Acts of God. A delay due to such factors shall not be deemed a default on the part of Ms. King. The scope of work pursuant to the Agreement shall be completed by June 30, 2006. The contract may, upon the recommendation of the Executive Director, be extended by Nassau County for a period to be determined by the County and the Consultant.
- It is expressly understood by the parties that this undertaking is not a joint venture or partnership.

This contract shall terminate automatically upon completion by Ms. King of the services specified in this Agreement. Ms. King shall be paid based upon specifications as set forth in Exhibit "A" and the contract.

- This Agreement shall be deemed null and void if not signed by the County within forty-five days of being signed by Ms. King.
- Ms. King will perform all of the work described in the scope of work listed in Exhibit "A", as attached hereto. Ms. King shall be responsible for the accuracy of the work, and shall promptly make necessary revisions or corrections as requested by the County.
- Ms. King shall comply with any and all applicable Federal, State and Local laws, Ordinances, Rules and Regulations as the same exist and may be amended from time to time. Such laws, rules, and regulations, include but are not limited to, Chapter 119, Florida Statutes, (the Public Records Act) and Section 286.011, Florida Statutes, (the Florida Sunshine Law). If any of the obligations of the Agreement are to be performed by a subcontractor(s), the provisions of this section shall be incorporated into and become a part of the subcontract.
- Ms. King will be provided with any specialized billing formats, programs, invoices, or any other considerations with the signed agreement, prior to the first billing cycle of the project.
- Both parties acknowledge that the State of Florida must approve this Agreement prior to execution by the parties.
- Failure of Ms. King to comply with the terms of this Agreement and/or failure to satisfactorily complete the work as set forth in Exhibit A shall be considered as a breach of this Agreement. Should the county bring an action to enforce the terms of the Agreement and is the prevailing party, the County

shall be entitled to costs including attorney's fees. Any action brought pursuant to this Agreement or any disputes shall not allow Ms. King to cease work on this project.

- Ms. King shall invoice the Clerk of the Court, with a copy to the County Administrator and the Director of Family Services, every fourteen (14) days. Ms. King shall submit written invoices not more often than every two weeks in such form as task list information required by the Director of Family Services and the Clerk of Courts or their designees in order to establish charges and to enable compensation therefore by the County of each such invoice within forty five (45) days and pursuant to Section 218.70, Florida Statutes, the Florida Prompt Payment Act. The Director of Family Services shall sign each invoice as certification to the Clerk for payment. Each such invoices shall include the amount of payment requested, the amount previously paid, the total contract value, and any other such information as may be reasonable and necessary. Each invoice shall contain a statement that is made subject to the provisions and penalty of Section 837.06, Florida Statutes.
- Any dispute arising under this Contract shall be addressed by the representatives of the County and the Consultant as set forth herein. Disputes shall be set forth in writing to the County Administrator with a copy to the Family Matters Director and provided by overnight mail, UPS, FedEx, or certified mail, with a response provided in the same manner prior to any meetings of representatives. The initial meeting shall be with the County Administrator and the Family Matters Director or their designee and a representative of the Consultant. If the dispute is not settled at that level, the County Attorney shall be notified in writing by the Family Matters Director or his/her designee, and the County Attorney and the County Administrator and the Family Matters Director or their designee(s) shall meet with the Consultant's representative(s). Said meeting shall occur within sixty (60) days of the notification by the County Administrator. If there is no satisfactory resolution, the claims disputes, or other matters in question between the parties to this Agreement arising out of or relating to this Agreement or breach thereof, if not disposed of by agreement as set forth herein, shall be submitted to mediation in accordance with mediation rules as established by the Florida Supreme Court. Mediators shall be chosen by the County and the cost of mediation shall be borne by the Consultant. If either party initiates a Court proceeding, and the Court orders, or the parties agree to, mediation, the cost of mediation shall be borne by the Consultant. Consultant shall not stop work during the pendency of mediation or dispute resolution. No litigation shall be initiated unless and until the procedures set forth herein are followed.
- The individual/officer/agent/official signing this Agreement certifies that the County has the ability, based on State funding, to compensate Ms. King for


the work described herein and that he or she is duly authorized to sign this document on behalf of the County.

- The Chairman of the Board of County Commissioners, by execution of this agreement, certifies that the County Administrator has certified to him/her that Ms. King has the ability to perform the work and that, as Chairman, she has the authority to bind Ms. King. Further, the County Administrator certifies that the individual performing the work is qualified and has the authority to accomplish the requirements as set forth on Exhibit "A".
- Limitation of Liability. To the extent that the County asserts a claim against Ms. King for breach of this agreement or professional negligence in connection with the services provided by this agreement, the County agrees that Ms. King's liability pursuant to such claim shall not exceed the total amount of compensation paid to Ms. King pursuant to this Agreement.
- This agreement constitutes the entire agreement between the parties with respect to the subject matter hereof. Any alteration or deviation from the above specifications involving extra costs will only be executed upon the County's written orders for same, and will be charged to the County at Ms. King's then effective rates.
- The County shall pay to Ms. King the fixed hourly rate of \$40.00 with no more than 24 hours per week not to exceed the amount of Forty nine thousand nine hundred and twenty dollars and No/100 (\$49,920.00).
- Reimbursement of map mileage at \$.29/mile for any Quality Assurance and/or Quality Improvement meetings attended by Ms. King on behalf of Family Matters of Nassau County.
- Family Matters will pay for Ms. King to attend two in-state conferences on Quality Assurance and/or Quality Improvement within this contract period.
- Appropriations necessary for the funding of this Agreement is based upon the contract DJ992, with the Department of Children and Families, State of Florida. If for any reason the State does not fund this contract either in its entirety or partially the county is not liable for payments to Ms. King.
- Nassau County, the Department of State, or any of their duly authorized representatives shall have access to any books, documents, papers, and records of the contractor which are directly pertinent to that specific contract, for the purpose of making audit, examination, excerpts, and transcription. Contractors shall be required to maintain all required records for FIVE years after Grantee makes final payment and all other pending matters are closed.
- There are no damages for delay.

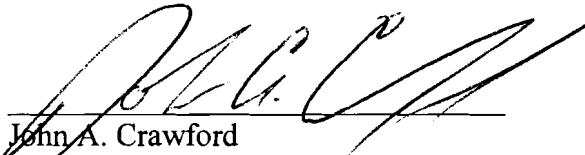
- Time is of the essence.

This Agreement shall be binding upon all parties hereto and their respective heirs, executors, administrators, successors, and assigns.

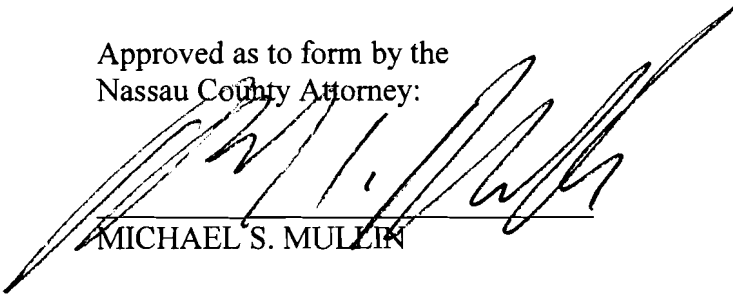
IN WITNESS WHEREOF, the parties hereto have executed, or caused to be executed by their duly authorized officials, this Agreement in two (2) copies, each of which shall be deemed an original on the dated first above written.


ANSLEY N. ACREE
Its: Chairman

ATTEST:


John A. Crawford
Its: Ex-Officio Clerk

Approved as to form by the
Nassau County Attorney:


MICHAEL S. MULLIN


CAROLYN KING

RECEIVED

FEB 28 2005

Family Matters
of Nassau County



FLORIDA DEPARTMENT OF

**CHILDREN
& FAMILIES**

Northeast Zone

Contract Performance Unit

Contract Monitoring Report:

Family Matters of Nassau County

Nassau County Board of County Commissioners

Contracts:

DJ992, CW/CBC Lead Agency

DH587, Purchased Therapeutic Services

DJ989, Community Based Prevention Initiative

February 21, 2005

Executive Summary

Date: February 21, 2005

Subject: Contract Performance Monitoring – Family Matters of Nassau County, Nassau County Board of County Commissioners

DJ992, Child Welfare/Community-Based Care, \$9,348,325

(This represents a five-year contract)

DH587, Purchased Therapeutic Services, \$27,247.75

DJ989, Community Based Prevention Initiative, \$26,519.00

The above provider was monitored December 6 through 17, 2004. The focus of the monitoring was to ensure that the provider maintained contract compliance in the delivery of quality services to clients in the community.

Monitoring by the Contract Performance Unit was based on compliance with contract provisions, Florida Statutes and Administrative Codes. The contract monitoring was conducted in accordance with the Department of Children and Families Operating Procedure 75-8, which details the monitoring process and monitoring requirements for contracts with the Department of Children and Families.

This summary is intended to provide a brief overview of the findings and recommendations contained in the report. It is not intended to be all-inclusive or explanatory of the conditions giving rise to our conclusions and recommendations. The full report should be considered in developing a comprehensive understanding of the conditions described herein.

Summary

- Provider has billed Purchased Therapeutic Services to the Child Welfare/Community Based Care contract.
- Provider has not reported Substance Abuse and Mental Health Services to the Department's One Family data reporting system.
- Monitors were unable to determine if the provider's contract within the County for information technology related problems and system integration was qualified, due to the County's non-response to a written request for a copy of the individual's application for employment.
- The provider's Family Service Counselor Supervisors are not licensed as Child Protection Professionals.
- The provider failed to notify local law enforcement regarding an abuse disclosure by a client.

- The provider failed to notify the Florida Abuse Hotline in a timely manner regarding a possible neglect incident.

Provider Strengths

- Strong support from Nassau County Administration
- The accounting process is managed by Nassau County, which is familiar with governmental standards and procedures.
- Accurate reporting of expenditures to include supporting documentation based on a cash basis.

Provider Weaknesses

- Lack of documentation for direct services and activities related to staff and clients.
- Lack of fiscal policies and procedures specific to child welfare and community-based care requirements.
- Timely submission of monthly reporting requirements.

Introduction

Provider Name:

Family Matters of Nassau County, Nassau County Board of County Commissioners

Provider Contact Person:

Judith K. (Judy) Dey, Executive Director

Contracts:

DJ992: Child Welfare/Community-Based Care, \$9,348,325 (This represents a five-year contract), March 1, 2004 – February 28, 2009

DH587: Purchased Therapeutic Services, \$27,247.75, August 8, 2004 – June 30, 2005

DJ989: Community Based Prevention Initiative, \$26,519.00, June 29, 2004 – November 30, 2004

Contract Managers:

Gaye Harris, Operations Review Specialist
Renee Baskaran, Operations Review Specialist

Review Period:

July 1, 2004 through November 30, 2004

Monitoring Dates:

December 6 – 17, 2004

Entrance Conference:

December 6, 2004

Exit Conference:

January 27, 2005

Report Date:

February 21, 2005

Corrective Action Response Due Date:

March 25, 2005

Submit Copies of the Corrective Action to:

Dineen Cicco, MSW, Contract Performance Unit
Gaye Harris, Contract Manager
Renee Baskaran, Contract Manager

Provider Staff Interviewed for Report:

Judy Dey, Family Matters Executive Director
Rachel Steele, Family Matters Program Coordinator
Teresa Brown, Family Matters Supervisor
Karen Hurbean, Family Matters Funding Specialist
Patsy Bunch, Human Resources Coordinator, Nassau County

Monitoring Team Members:

Dineen Cicco, Lead, Contract Performance Unit
Fred Carey, Contract Performance Unit
Linda Dalton, Contract Performance Unit
Robert Wallace, Contract Performance Unit
Zenaida Panajon, Contract Performance Unit
Leslie Frye, Contract Performance Unit

Contact Person for DCF:

Dineen Cicco, MSW, Government Analyst I

Objective of Contract:

As required by Florida Statue 409.1671, the Department of Children and Families must privatize foster care and related services. This privatization effort is called Community-Based Care (CBC). Through a competitive procurement process, a lead agency for Community-Based Care is selected and authorized to take over foster care and related services in a designated geographical area.

Family Matters of Nassau County, Nassau County Board of County Commissioners, located in Yulee, Florida was selected as the lead agency for CBC in Nassau County.

Family Matters is a newly created program under the Nassau County Board of County Commissioners. This program was formed for the purposes of becoming the lead agency for foster care and related services in Nassau County. This agency is one of two in the entire state in which a county government was selected to implement CBC.

The program is not accredited and has been in operation for less than two years. Select services were transitioned from the Department to Family Matters starting December 2003. Completion of the transition and a full service contract to provide all services started March 2004. This is the first contract monitoring to occur since Family Matters entered into a full services contract with the Department.

The focus of the monitoring was to ensure that the provider maintained contract compliance in the delivery of quality services to families while ensuring the safety, permanency and well-being of the children we serve. The monitoring also

allows the Department and the provider to identify areas of strengths, areas needing improvement and best practices that may be shared with others.

Monitoring by the Contract Performance Unit was based on compliance with contract provisions, Florida Statutes and Administrative Codes. The contract monitoring was conducted in accordance with the Department of Children and Families Operating Procedure 75-8, which details the monitoring process and monitoring requirements for contracts with the Department of Children and Families.

Scope of Monitoring:

The scope of monitoring included administrative and programmatic areas. In conjunction with monitoring by the Contract Performance Unit, a quality assurance review was being conducted by the Department's Quality Assurance Team. This review consisted of case file reviews to ensure compliance with federal and state requirements including the safety, permanency and well being of the children served. The results of the quality assurance review have been issued in a separate report.

Administrative areas reviewed include: Records, Accounting and Financial System Policy Review, Cost Allocation Plan review, Time Log Review, Invoice Processes, Check Reviews, Payroll, Match Requirements, Required Reports, Travel, Fixed Assets, Insurance, Assignments and Subcontracts, Purchasing, Sponsorship, Data Security and Validation, Human Resource Administration, Personnel Files, Training Plans, Training Records, Time Sheets and Policies and Procedures.

Programmatic areas reviewed include: Data Reporting, Incident Reports, Prevention Services, Road to Independence Scholarship, Quality Management and Quality Assurance Processes, Foster Care Exit Interviews, Foster/Adoptive Parent Recruitment, Retention, Licensing and Re-Licensing activities and Foster Home Capacity.

Authority Sources:

I. PROGRAMMATIC AUTHORITY (FEDERAL)

- A. Federal foster care services:** Social Security Act, Title IV-B and Title IV-E, as amended (42 U.S.C. 670-679a; 45 C.F.R. 1355-1357); P.L. 96-272, Adoption Assistance and Child Welfare Act of 1980 (42 U.S.C. 670, et seq.); P.L. 100-485, Family Support Act of 1988 (42 U.S.C. 602; 42 U.S.C. 1396a; 45 C.F.R. 92.32 Uniform Requirements for Grant and Cooperative Agreements Equipment; 45 C.F.R. 95, 204-206, 233, 234, 260); P.L. 103-382, S. 551, The Multiethnic Placement Act of 1994 (MEPA); P.L. 104-188, S. 1808, Removal of Barriers to Interethnic Adoption; P.L. 105-89, Adoption and Safe Families Act of 1997; P.L. 106-169, Foster Care Independence Act of 1999.

- B. Federal child welfare services: Social Security Act, as amended; Adoption Assistance and Child Welfare Act of 1980 (42 U.S.C. 620-628a; 45 C.F.R. 1355-1357)
- C. Federal family preservation and support services: Social Security Act, as amended (42 U.S.C. 629-629e; 45 C.F.R. 1355-1357).
- D. The provider shall ensure compliance with Title IV-B of the Social Security Act, Title IV-E of the Social Security Act, Social Services Block Grant (SSBG), Title XIX (Medicaid), and Temporary Assistance for Needy Families (TANF).

II. FLORIDA STATUTES

A. Child Welfare/Community-Based Care Program

- CH 39 Proceedings Relating to Children
- CH 63 Adoption
- CH 402 Health and Human Services Miscellaneous Provisions (Child Welfare Training)
- CH 435 Employment Screening
- CH 455 Business And Professional Regulation: General Provisions
- CH 490 Psychological Services
- CH 491 Clinical, Counseling, And Psychotherapy Services
- CH 760 Discrimination In The Treatment Of Persons; Minority Representation
- CH 827 Abuse Of Children

B. Substance Abuse and Mental Health Services

- CH 381 Public Health: General Provisions
- CH 394 Mental Health
- CH 397 Substance Abuse Services
- CH 893 Drug Abuse Prevention And Control

C. Department of Management Services

- Section 112.061 Per Diem and travel expenses of public officers, employees, and authorized persons.
- Section 112.3185 Contractual services.
- Section 215.422 Warrants, vouchers, and invoices; processing time limits; dispute resolution; agency or judicial branch compliance.

D. Statewide Requirements

- CH 119 Public Records
- CH 282 Communications and Data Processing

III. FLORIDA ADMINISTRATIVE CODE (RULES)**A. Child Welfare/Community-Based Care Program**

- 65C-12 Emergency Shelter Care
- 65C-13 Substitute Care Of Children
- 65C-14 Group Care
- 65C-15 Child-Placing Agencies
- 65C-16 Adoptions

B. Substance Abuse and Mental Health Services

- 65E-4 Community Mental Health Regulation
- 65E-5 Mental Health Act Regulation
- 65E-10 Psychotic and Emotionally Disturbed Children - Purchase of Residential Service Rules
- 65E-12 Public Mental Health, Crisis Stabilization Units, Short-Term Residential Treatment Programs
- 65E-14 Community Alcohol, Drug Abuse and Mental Health Services - Financial Rules
- 65E-15 Continuity of Care Case Management
- 65E-20 Forensic Client Services Act Regulation

IV. CHILD WELFARE/COMMUNITY-BASED CARE OPERATING PROCEDURES:

The provider may develop operating procedures to be approved by the Department equivalent to the following subjects. In the interim, the provider must follow the Department's equivalent operating procedures.

- | | |
|--------------|---|
| CFOP 15-12 | Procedures for Releasing Selected Information Pertaining to an Abuse, Neglect, Abandonment or Exploitation Report |
| HRSOP 175-26 | Confidentiality of Children and Families Records |
| CFOP 175-29 | Temporary Assistance for Needy Families (TANF) Funding for Services |
| CFOP 175-34 | Removal and Placement of Children |
| CFOP 175-42 | Case Chronological Documentation |
| CFOP 175-58 | Re-licensing of Family Foster Homes and Emergency Shelter Care Homes |
| CFOP 175-61 | Exit Interviews for Children in Shelter/Foster Care |
| CFOP 175-64 | Family Foster Home Waivers |
| CFOP 175-76 | Employees Involved In Reports Of Abuse, Neglect, Abandonment Or Exploitation |
| CFOP 175-80 | Independent Living Services (Ages 16 to 21) |

CFOP 175-81	Subsidized Independent Living (SIL)
CFOP 175-93	TANF Uses in Family Safety
CFOP 175-94	Direct Access To Information for Background or Criminal History Checks for Investigations, Emergency Placements, and Out of the Ordinary Circumstances
CFOP 175-96	Coordination of Services Including Mental Health and Substance Abuse Services for Youth in the Care and Custody of DCF and Served by the DJJ
CFOP 215-6	Incident Reporting and Client Risk Prevention

V: MISCELLANEOUS

A. Department of Children and Families Operating Procedures

CFOP 15-4	Records Management
CFOP 75-2	Contract Management System for Contractual Services
CFOP 75-8	Contract Monitoring
CFOP 125-1	Community Resources/Volunteer Management
CFOP 155-10	Mental Health Services for Children in the Custody of the Department
CFOP 180-4	Mandatory Reporting Requirements to the Office of the Inspector General

B. Information Systems Operating Procedures

CFOP 50-2	Security of Data and Information Technology Resources
CFOP 50-7	Policy on Enhanced Workstations and Statewide Office Automation Standards.
CFOP 50-6	Security
CFOP 50-9	Policy on Information Resource Requests

C. Federal Cost Principles (www.whitehouse/omb/circulars/index)

OMB Circular A-87	Cost Principles for State, Local and Indian Tribal Governments
OMB Circular A-122	Cost Principles for Non-Profit Organizations
OMB Circular A-133	Audits of States, Local Governments, and Non-Profit Agencies

Tools:

To assess compliance with contracts, the review team utilized a variety of tools developed by the Department's Office of Contracted Client Services and additional tools developed locally. These tools contain standards set by the Department of Children and Families. The Department's standards are specific to the provider's contract, and include all attachments and contract-referenced authorities.

Sampling:**Human Resources and Training**

Eleven personnel files and ten staff training files were reviewed.

Travel

Fourteen travel vouchers paid in July 2004 were reviewed to determine if approved travel policies were being followed.

Invoice Validation

Based on a 95% confidence level and 5% confidence interval, a sample of eighty-six checks were selected for review. The check disbursements and supporting documentation were reviewed compared to policies and procedures and the provider's Cost Allocation Plan.

Foster Home Licensing

Using a random sample calculator, eighteen foster homes were chosen for review. In further analysis it was determined that out of the eighteen homes only five homes were submitted for re-licensing under the provider. The remaining thirteen homes were licensed under the Department prior to transition of services to the provider.

Time Logging

A judgmental sample of 678 case management events taken from the random sample of clients selected for the Quality Assurance review, were reviewed to ensure that the selected activities were documented in Home Safenet.

Prior Corrective Action Plan:

This is the provider's first contract performance monitoring.

Report Format:

Standards required by contract, Florida Statute or Administrative Rule resulting in findings of non-compliance requires corrective action. Findings that are not required by contract are referenced as recommendations. The recommendations do not require corrective action, but rather are items the team believes are good business practice that will improve the provider's administrative and programmatic operations, thereby enhancing the quality of service delivered to children and their families. The provider is required to provide a written response to corrective action items within thirty calendar days of receipt of the Department's monitoring report. The Department would also appreciate a response to the recommendations. Electronically, a copy of the corrective action plan format will be sent to the Executive Director to assist in preparing the corrective action plan.

Review Results

Service Location and Equipment

The monitoring team conducted the monitoring at the Family Matters site located at 86004 Christian Way, Yulee, Florida. A portion of the administrative monitoring was conducted at the Nassau County office located at 191 Nassau Place, Yulee, Florida. The provider sites appeared to be in safe and good condition and conducive to the services provided.

Administrative Review

I. Records

The county's policy on record retention was reviewed to ensure compliance with the terms and conditions of the contract. The county follows the state issued guidelines on record retention as stipulated in GS1-11.

ii. Audits

Family Matters is part of Nassau County Board of County Commissioners with a September 30, 2004 fiscal year end. Audit for fiscal year ending September 30, 2004 was not completed at the time of the monitoring. The first fiscal year of this program is fiscal year ending 2003-04. The audit in September 2003 was performed by Farmand & Farmand, CPA.

III. Accounting and Financial System

Nassau County Board of County Commissioners uses Munis Accounting software. This system contained the basic books of accounting needed by Family Matters. The contract requires the provider to have adequate and approved financial policies and procedures.

1. Finding:

Family Matters has not developed internal fiscal policies and procedures specific to child welfare and community-based care requirements. The provider functions and follows the accounting policies and procedures of Nassau County Board of County Commissioners.

1. Recommendation:

Family Matters should create internal fiscal policies and procedures to ensure compliance with federal and state child welfare allowable expenditures.

IV. Cost Allocation Plan

An approved Cost Allocation Plan is the basis for preparation of the invoice for Child Welfare and Community-Based Care services under contract DJ992. Time logging is an integral part of the cost allocation plan. The time logs are the basis for all allocated costs. The provider has an approved Cost Allocation Plan. See Administrative Review, Section VIII and Programmatic Review, Section VI for specific findings related to invoice submission and time logging.

V. Payroll

The provider was found to be in compliance, there were no findings or corrective actions for this component.

VI. Advancements and Estimated Payments

During state fiscal year 2003-2004, the Department issued a Request for Proposals for prevention services. Family Matters was the winning applicant and was awarded funding through contract number DJ989. Funds were received late in the fiscal year and consequently the provider was unable to implement the program and returned these funds to the Department. The provider was advanced the full amount of funds as stated in their contract.

Contract DJ992, Community-Based Care requires that advancements be deposited in an insured, interest bearing account and that interest earned is returned to the Department on a monthly basis.

2. Finding:

The provider was required under contract DJ989 to submit an expenditure report for services delivered. During the review, it was noted that the provider failed to submit a properly completed expenditure report based on the budget line items. The provider also did not include any back-up documentation to support the expenditures. Without a correctly completed expenditure report and proper back-up documentation the Department was unable to determine the amount of funds that must be returned.

2. Corrective Action:

The provider must submit a properly completed expenditure report that includes proper back-up documentation to determine the amount of funds that must be returned to the Department.

3. Finding:

The interest earned on advancements was not submitted monthly to the Department as required by contract number DJ992. Nassau County submitted a check for \$1,131.56 on December 10, 2004 for interest earned on advancements.

3. Corrective Action:

Nassau County must submit interest earned on advancements monthly to the Department as required.

VII. Method of Payment and Service Verification

The provider is to request reimbursement monthly by submitting a properly completed and Department approved invoice based on the provider's Cost Allocation Plan. The provider is to maintain service delivery and expenditure supporting documentation as stipulated in the contract. A review of checks issued under contract number DJ992 was conducted. A total of 111 checks were

issued for the period of July and August 2004. Based on a 95% confidence level and 5% confidence interval, a sample of 86 checks were selected.

Family Matters is part of Nassau County Board of County Commissioners. The County processes and manages their accounting records. Each check reviewed contained adequate supporting documentation. Also, as part of the invoice validation, we reviewed the Monthly Expenditures section of the invoice against Family Matters accounting records and supporting documentation. Family Matters reported their expenditures based on a cash basis. This is the requirement for a cost reimbursement contract. There was no variance found between the monthly invoice and the accounting records of Family Matters.

4. Finding:

During the monitoring, the monthly invoice submitted for the months of July and August 2004 were not completed accurately nor submitted within the time frame required in the contract. Submission of the monthly invoices for September through November 2004, were not submitted to the Department; at the time of the monitoring; however, the provider has since done so.

4. Corrective Action:

Family Matters must submit a correctly completed monthly invoice for July and August 2004, in the approved Department format.

5. Finding:

The expenditures reported in the Expense/Input section of the invoice for the month of July 2004 does not comply with the Cost Allocation Plan.

5. Corrective Action:

Family Matters must re-submit the monthly invoice for the months of July and August 2004 in accordance with their Cost Allocation Plan.

VIII. Match

The Social Security Act, Title IV-B, Subpart 2, Promoting Safe and Stable Families requires a 25% match in the form of cash or in-kind. Match source and amount must be documented and submitted to the contract manager on a monthly basis for any expenditure under this funding source. There were no findings noted for this area.

IX. Memorandums of Agreement

6. Finding:

The provider is required to maintain memorandums of agreements with several agencies as stated in the contract. During the review, it was noted that the provider does not have an agreement with Department of Juvenile Justice.

6. Corrective Action:

The provider must obtain an agreement with Department of Juvenile Justice as stated in their contract.

X. Travel

7. Finding:

Fourteen travel vouchers processed in July 2004 were reviewed. One travel voucher did not indicate the time of travel on the trips performed. Therefore, meals could not be verified. Twelve travel vouchers did not properly distinguish the map mileage and the vicinity mileage.

7. Corrective Action:

Family Matters employees must be provided a training session on properly completing travel vouchers.

Xi. Personnel

Eleven personnel files were reviewed for staff qualifications and required documents.

8. Finding:

One staff member working with children under the age of 18 did not have a complete background screening according to Level 2 standards, as outlined in Section 409.175 Florida Statute (F.S.). An FBI and local record check was found in the file; however, no Florida Department of Law Enforcement (FDLE) results were found. The employee was hired in March 2004.

8. Corrective Action:

The provider must complete Level 2 background screening for the referenced employee. The identification of the employee may be obtained from either a member of the monitoring team or the Contract Manager.

9. Finding:

Family Service Counselors and supervisors are required to obtain and maintain Child Protection Professional certifications. During a review of personnel qualifications, it was found that neither of the supervisors is currently certified. One of the supervisors failed to complete her initial certification, and the other allowed the certification to lapse.

9. Corrective Action:

The provider must ensure that Family Service Counselors and supervisors have completed the certification process, as required under Chapter 402 F.S. and that certificates are provided to the Human Resources office for personnel files.

10. Observation:

The I-9 Immigration and Naturalization forms found in files were not properly completed in all files reviewed. Document numbers and expiration dates were missing on some of the forms. Staff in the Human Resource office advised they had corrected all the forms, prior to completion of the review. No further action is required.

XII. Staff Training

As required by the provider's contract, and as stated in their system of care, in-service training will be provided to staff. The provider must develop a training plan and maintain documentation that staff training has occurred.

11. Observation:

During the review, ten training files were reviewed. Staff has received some training since the contract began, but the review period is too short for staff to have received any significant number of hours of in-service. Absent a training plan, verification that a plan was followed could not be made. It was noted during the review; however, that staff had been given the opportunity to receive training from a professional trainer on topics relevant to their duties and responsibilities.

11. Recommendation:

Staff training will be a monitoring component during the next on-site review. It is recommended staff be diligent in accessing and attending training to ensure in-service standards are met and that the training plan, once developed, is followed. Staff should also be encouraged to routinely review personnel and/or training files to ensure they are up to date and reflect all training events attended.

12. Finding:

During the review, it was noted that the provider has not developed a training plan.

12. Corrective Action:

The provider must develop and implement a training plan.

XIII. Property and Equipment

The provider was found to be in compliance. There were no findings or corrective action for this component.

XIV. Insurance

The provider was found to be in compliance. There were no findings or corrective actions for this component.

XV. Subcontracts

During an interview with the provider, it was determined the provider has not entered into any subcontracts.

XVI. Purchasing

The provider was found to be in compliance. There were no findings or corrective actions for this component.

XVII. Sponsorship

The provider was found to be in compliance. There were no findings or corrective actions for this component.

XVIII. Publicity

The provider was found to be in compliance. There were no findings or corrective actions for this area.

XIX. Lobbying

The provider was found to be in compliance. There were no findings or corrective actions for this area.

XX. Federal Requirements

HIPAA:

According to staff, the provider does not share Personal Health Information electronically with any entity. Family Matters is not a provider of health care services.

Additional federal requirements were monitored during the review and are discussed under the appropriate categories.

Programmatic Review

I. Scope of Service

The provider has contracted with the Department to provide child abuse and neglect prevention, foster care and related services. All services are to be provided in Nassau County, Florida

II. Clients to be Served

Children and families who are in need of child abuse and neglect prevention or child protection and permanency services shall be served. Children and families in need of child protection and permanency services shall be referred to the provider through the protective investigations unit operated by the Department. Children and families in need of prevention services are provided services voluntarily before abuse and/neglect occurs or they are in crisis. Referrals for these services may come from community-based agencies or be self-referred.

III. Deliverables

Data Security

The provider has not identified an in-house Data Security Officer; however, access to the Department's HomeSafenet and One Family systems, is granted only by the Department. System integration, maintenance and problem resolution are provided by Nassau County's Information Technology office. There was no response to a request to review the application for employment of the Information Technology Director, in order to assure appropriate skills and education.

Data Validation

The provider has a contract with the Substance Abuse and Mental Health Program Office, (SAMH) for Purchased Therapeutic Services (PTS). At the time of monitoring, no services had been billed to the SAMH contract. During the review; however, staff indicated some treatment services had been purchased for clients since the contract was executed. According to staff, services were not billed to the SAMH contract, but were billed to the Child Welfare/ CBC contract. Data that would have been reported to the One Family reporting system for PTS services; therefore, was not entered into One Family. Thus, it was not possible to validate data.

13. Finding:

The provider has billed services provided under contract DH587 Purchased Therapeutic Services to contract DJ992, the Child Welfare/CBC contract. When this was discovered, the Department's contract manager provided training and technical assistance to the provider on invoicing procedures under contract DH587.

13. Corrective Action:

The provider must review its records, identify the clients and services incorrectly billed to the Child Welfare/CBC contract and submit a properly completed invoice to the Contract Manager for PTS services.

PTS services billed to the SAMH contract must be reported to the One Family data reporting system. The provider's staff has previously attended One Family training with the SAMH Data Liaison, Jerry Baker, and access to One Family has been granted. Staff at Family Matters denied having knowledge of the requirement to report SAMH related data to the Department.

13. Recommendation:

It is recommended staff responsible for preparing and submitting invoices for PTS services and entering data into the One Family reporting system., must contact Mr. Baker for refresher training.

Monthly Reports

The contracts contain several reports that are required to be submitted to the contract manager on specific dates. During the review, required reports were reviewed to determine if they were submitted on time.

14. Finding:

During the review, all required reports were reviewed to ensure that the provider was complying with required due dates. It was noted that the provider has not submitted all required reports in a timely manner.

14. Corrective Action:

The provider must ensure that all required reports are submitted in a timely manner as outlined in the contract.

IV. Client Risk Prevention and Incident Reporting

The provider has a Critical Incident Reporting policy that meets the requirements of CFOP 215.6. The policy has been expanded to require Disease Epidemics, Criminal Activity, Abuse/Neglect/Abandonment/Threat of Harm, Theft/Vandalism/Damage and, "Other incidents of a serious nature that pose physical or emotional danger to client, family members or staff" to also be reported following prescribed timeframes. According to staff, there were no critical incidents during the review period.

15. Finding:

Policy for incident reporting does not include a procedure for notifying medical, emergency or law enforcement personnel when appropriate. The responsibility to report suspected abuse and neglect to the hotline is not addressed, nor is the procedure for notifying law enforcement regarding runaways. Foster family responsibilities are not addressed in the policy. Timeframes and documentation requirements have not been addressed.

15. Corrective Action:

The policy for incident reporting must be expanded to provide procedural guidelines for reporting and documenting both critical and non-critical events. Instances that are not deemed critical, such as an injury to a child or a foster parent that does not require medical attention or an accident involving staff transporting a child should be documented in an incident report. A runaway may not be a critical incident, but needs to be fully documented and the necessary notifications made. These types of "non-critical" events must be addressed.

16. Finding:

There were two reportable instances that were noted during the review that required the Family Services Counselor to contact local law enforcement and the Florida Abuse Hotline. One incident was related to an injury that occurred at a daycare center to a child who was in out-of-home care. The incident occurred on November 4, 2004 and was not reported to the abuse hotline until December 20,

2004. The second incident involved a disclosure of an affair with a minor child that resulted in the birth of a child. The Family Services Counselor noted the disclosure in Home Safenet, but failed to report the incident to local law enforcement.

16. Corrective Action:

The provider must ensure that staff is trained, and all instances that involve abuse and neglect are reported to the appropriate authorities.

17. Observation:

The provider does not maintain a master file of incident reports. Reports, as they are received, are placed into the appropriate client file. This practice could pose difficulties in the future, if the report(s) needs to be retrieved. Future staff may not be able to locate an incident report due to being unfamiliar with the event or the child involved. Reports in closed and stored files could be extremely difficult to locate in the future.

17. Recommendation:

It is recommended a master file of all incident reports be maintained for easy reference and quality assurance/quality improvement trends analysis. A numbering system is also recommended, from one FY to another.

V. Independent Living Services

The provider is required to provide independent living skills to children in licensed out-of-home care that are at least sixteen years of age. Services provided to this population, who have not aged out of the system, are reviewed as part of the quality assurance reviews conducted by the Department's Quality Assurance Team. Clients who have aged out of the system are eligible to receive funds through Road to Independence program, which will assist with the cost of living expenses as long as the individual(s) meet the eligibility requirements. Tree Road to Independence client files were reviewed.

18. Finding:

To be eligible for the Road to Independence, the child must be considered dependent, pursuant to Chapter 39, and living in licensed foster care or in subsidized independent living at the time of his or her 18th birthday. There was no documentation to determine eligibility located in the client file.

18. Corrective Action:

The provider must maintain documentation of dependency for the child.

19. Finding:

The client file must contain the following identification data: child's name, sex, date of birth, social security number, race or ethnicity, place of birth, religion and referral source. During the review, it was noted that all the identification data was not included in the client files.

19. Corrective Action:

The provider must ensure that all identification data is contained in the file. One suggestion for this information is to maintain a cover sheet with all pertinent information on the child.

VI. Time Log Data Validation

A total of 678 activity events were tracked from the time log work sheets to the data entry into Home Safenet. Lack of documentation in the client file or Home Safenet means that the service event is not supported. In accordance with the terms and conditions of the contract, 100% of events are to be entered into HomeSafenet.

20. Finding:

Of the 678 events reviewed, 155 events were found documented in HomeSafenet. This represents a 22.86% compliance with the time log requirements stated in the contract.

20. Corrective Action:

The provider must ensure that 100% of all activities are documented in HomeSafenet as required by the contract.

VII. Foster / Adoptive Parent Recruitment

The provider has developed a recruitment and retention plan for foster and adoptive parents. The plan was developed in September 2004. The plan has only been in place for three months of the review period. An interview was conducted with staff to determine the extent to which the plan has been implemented and the status of strategies and action steps. There were no findings noted for this area.

VIII. Foster/Adoptive Licensing and Re-Licensing

As required by the contract, the provider is to submit foster home re-licensing information to the Department thirty days prior to the expiration of the current license. A sample of five files was reviewed to ensure compliance with the contract.

21. Finding:

Four out of five foster home licensing packets were submitted to the Department beyond the thirty-day submission period. One licensing packet submitted resulted in the lapse of the license for the home. This home contained a child that was not moved and remained in the unlicensed home.

21. Corrective Action:

The provider must ensure that all re-licensing packets are submitted to the Department thirty days in advance of the expiration date of the current license. The provider must ensure that children are not placed in unlicensed homes.

IX. Emergency Shelter and Foster Care

Placement

The provider maintains an informal agreement with Boys Home located in Jacksonville to provide placement activities. Boys Home is a sub-contracted service center under Family Support Services (FSS), the lead agency for CBC in Duval County. Boys Home provides placement services and child welfare services in Duval County.

22. Observation:

The provider utilizes policies and procedures for placement that were developed for FSS. The procedures are tailored for Duval County and not for Nassau County.

22. Recommendation:

The provider should update policies and procedures for placement that are tailored to their agency.

Waivers

In accordance with Operating Procedure 175-64, Placement Waiver, approval for placement of foster children must be obtained prior to the placement resulting in the overcapacity of the current foster home license. A sample of eighteen foster homes was reviewed. It was determined that there were no placements made that required waivers. There were no findings for this area.

Exit Interviews

Exit interviews are to be conducted with children who exit an emergency shelter placement or family foster home placement. The interviews are conducted on children ages five to seventeen who have been in a licensed shelter home or family foster home for more than thirty days. The purpose of the interviews is to gain the child's perspective concerning the safety and quality of care received while in placement.

23. Finding:

Foster care exit interviews were reviewed from a data run for the review period. It was determined that eleven children exited a placement and meet the criteria for an exit interview. There was no documentation that any exit interviews have taken place. During an interview with provider staff, it was stated they were aware of the lack of exit interviews being conducted and have recently addressed this with casework staff during weekly staff meetings.

23. Corrective Action:

The provider must conduct exit interviews on all eligible children, as stated in their policy and CFOP 175-61.

X. Quality Assurance and Quality Management

The provider, as part of the CBC Readiness Process, was to develop and submit to the Department a Quality Assurance Plan. During the on-site monitoring, documentation was reviewed to determine if the plan was being implemented.

24. Finding:

The provider has not implemented their quality assurance and quality management plan.

24. Corrective Action:

The provider must implement the quality assurance and quality management plan that was submitted to the Department. The provider must review the current plan and make modifications as needed to ensure implementation of the plan.

XI. Prevention Services

Prevention services are required to be provided to children and families at risk or in crisis. During state fiscal year 2003-2004, the Department issued a Request for Proposal for prevention services. Family Matters was the winning applicant and was awarded funding through contract number DJ989. Funds were received late in the fiscal year and consequently the provider was unable to implement the program and returned these funds to the Department.

During the current fiscal year, the same prevention funds were directly allocated to the provider as required by the legislature. The Department requested a plan from Family Matters for the use of prevention funds. The plan was submitted and approved. The provider is currently in the process of implementing the services as described in their plan for prevention.

XII. Purchased Therapeutic Services

Contract DH587, Purchased Therapeutic Services (PTS), allows the provider to purchase a variety of needed services for children and their families who have experienced abuse and/or neglect. This contract began August 8, 2004, and the provider had not submitted any invoices for services provided during the review period.

25. Finding:

In an interview with provider staff, it was determined that services had been provided that are eligible for reimbursement through their PTS contract; however, services were not billed under this contract. Services were billed to contract DJ992 Child Welfare and Community-Based Care under administration. The Department's contract manager provided technical assistance to the provider on December 9, 2004 to ensure proper billing of services in the future.

25. Corrective Action:

The provider must ensure that eligible services are billed to contract DH587. If possible, the provider should revise prior billings under contract DJ992 that should have been billed under contract DH587.

XIII. System of Care

The provider, as part of the CBC Readiness Process, was to develop and submit to the Department a description of their system of care. During the on-site monitoring, interviews were conducted with staff regarding implementation of the system of care.

26. Finding:

The system of care states that the Family Services Counselor (FSC) will provide case management, intervention services and supports to families on their caseload. Through time log documentation and staff interviews, it was determined that intervention services were not being provided to the families by the FSC. The FSC's were providing case management and supports, but did not have time based on caseload size to provide additional needed intervention services. The provider had already identified the lack of time the FSC has to provide additional services and is in the process of developing a subcontract with First Coast Family Center to provide Parent Aide Services. This service will provide intensive in-home interventions and supports to families who have experienced abuse and neglect.

26. Corrective Action:

The provider must ensure that families have access to and are provided intervention services and supports to ensure the safety, permanency and well being of children in families.

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FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
CPU						
#2 Required under DJ989 to submit an expenditure report for services delivered. Provider failed to submit a properly completed expenditure report based on the budget line items. Back-up Documentation not included.	Family Matters returned unspent funds in the amount of \$25,254.09, February 2005. The final expenditure report with copies of all invoices charged to the contract was attached for close out and was accepted by the contract manager.	Funding Specialist			March 2, 2005	
#3 Interest earned on advancements was not submitted monthly as required by the Contract DJ992.	Interest checks have since been submitted through the month of February 2005. I have sent the referenced page, 25 of contract DJ992 to Clerk Financial Services attention: Chris Lacambra, CPA. Discussed have occurred and Clerk Financial Service is aware of the importance of complying with the contract.	Funding Specialist			March 2005	
#4 & #5 Monthly invoice submitted for the months of July and August 2004 were neither completely accurate nor submitted within the time frame required in the contract. Expenditures reported in the Expense/Input Section for the month of July 2004 does not comply with the Cost Allocation Plan.	Monthly invoice for the months of July and August 2004 has been corrected, signed and submitted to Contract Management. Monthly invoice for the month of July 2004 has been corrected, signed and submitted	Funding Specialist			April 15, 2005	

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FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
#6 Provider does not have an agreement with DJJ.	An agreement with the Department of Juvenile Justice will be developed and implemented within 90 days	Executive Director	April 25, 2005	July 25, 2005		
# 7 Fourteen travel vouchers processed in July 2004 were reviewed. One travel voucher did not indicate the time of travel on the trips performed. Therefore, meals could not be verified. Twelve travel vouchers did not properly distinguish the map mileage and the vicinity mileage.	An internal training session on filing out travel vouchers was conducted during March 2005. Appropriate handouts, "Map Mileage for Jacksonville and Surrounding Areas" were also distributed. Due to continual confusion, Family Matters has scheduled a DCF training session for May 4, 2005.	Funding Specialist		May 4, 2005		
#8 One staff working with children < 18 not background cleared	It is the policy of Family Matters and Human Resources to require background checks prior to employment. The person who was not checked has resigned from the Agency. All employees have passed background checks.	Executive Director			April 25, 2005	
#9 Neither of the supervisors are currently certified.	One of the supervisors is no longer at the Agency. The new hire will begin training when new classes start.	Executive Director	April 25, 2005	April 25, 2006		
#12 Provider has not developed a training plan	The Agency Training Plan was developed in the fall of 2004. A copy of this plan is attached. The Executive Director will contact private providers to schedule the staff training.	Program Coordinator/ Executive Director			April 21, 2005	
# 13 Provider has billed services provided under contract DH587, Purchased Therapeutic Services to contract DJ992, the Child	Contract DH587, Purchased Therapeutic Services was effective on August 25, 2004, as referenced on page 5, Section III, Part A, Effective and Ending Dates. Due to the confusion of the contract state date, it is	Funding Specialist			February 2005	

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FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
<p>Welfare/CBC contract. When this was discovered, the Department's contract manager provided training and technical assistance to the provider on invoicing procedures under contract DH587.</p> <p>#XII Contract DH587, Purchased Therapeutic Services began August 8, 2004 and provider had not submitted any invoices for services provided during the review period.</p> <p>#25 It was determined that services that services had been provided that are eligible for reimbursement through their PTS contract, however, services were not billed under this contract, Services were billed to contract DJ992, Child Welfare and Community Based Care under administration. The Department's contract manager provided technical assistance to the provider on December 9, 2004 to ensure proper billing of services in the future.</p>	<p>believed the monitoring staff identified seven invoices during the window of August 8 – August 25, 2004.</p> <p>Family Matters staff received technical Training from the contract manager with the Department of Children and Families.</p> <p>After review of all invoices, Family Matters located 4 invoices totaling \$500.00 billed to Purchased Therapeutic Service contract DH587 in error. Each date of service occurred before the effective date of August 25, 2004. Date of service was used as the determining factor as opposed to invoice date. Corrections of the four (4) invoices were completed by Nassau County and Family Matters and charged to contract DJ992, Child Welfare and Community Based Care under administration. A revised September 2004 invoice was submitted February 4, 2005.</p>					

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FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
#14 Provider has not submitted all required reports in a timely manner.	Provider received additional technical assistance from DCF personnel. This training assisted Family Matters staff in preparing reports and submitting on time.	Funding Specialist/ Program Coordinator/ Office Manager			February 2005	
#15, #16 Provider's Incident Reporting Policy was not complete and 2 instances were not reported properly.	<p>Family Matters developed an incident reporting plan in February of 2005 (see attached). All staff has been educated on what to report. Since the implementation of this new plan, several critical incidents have been reported (see attached). All incident reports are submitted by the Counselor to their Supervisor, the Program Coordinator and the Executive Director. A master file of all incident reports are kept by the Office Manager. The Program Coordinator gives the Office Manager a copy of the incident report to maintain in the master file. A copy of Family Matters' current incident reporting plan is attached.</p> <p>Previous to this plan being developed, Counselors were unaware of the incident reporting requirements. Subsequently, 2 critical incidents were not reported properly. Once incident was reported one month after the incident occurred and another incident involving the disclosure of an affair with a minor child was reported to law enforcement during the Contract Monitoring Review. All Supervisors and Counselors have worked diligently to learn and understand the critical incident reporting plan and have responded properly.</p>	Program Coordinator/ Executive Director			February 2005	

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FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
<p>#18, #19 Road to Independence Program did not have documentation of child eligibility as well as identification data included in the file.</p>	<p>Family Matters Program Coordinator went through each Independent Living File (both for RTI, Transitional and Aftercare) and printed out the ICWSIS screen proving the child was in care on their 18th birthday (copies attached). Adjudication Orders were also placed in the file for cases where this documentation was found.</p> <p>The Program Coordinator prints out this information and requires an Adjudication Order before a scholarship application is approved.</p> <p>Family Matters has also placed a face sheet with all identifying information in each Independent Living File. This has become standard practice (see attached).</p>	<p>Program Coordinator</p>			<p>4/14/2005</p>	
<p>#20 Time Logging not in compliance</p>	<p>The time logging issue needs addressing in an ongoing way. Since the monitoring report, Marie Lamb held a training session with staff to improve this area. With new staff being added, we will have additional training in the coming months.</p>	<p>Executive Director</p>	<p>April 25, 2005</p>	<p>October 25, 2005</p>		
<p>#21 Four out of Five foster home licensing packets were submitted under the 30-day required period, which resulted in the lapse of one foster home license.</p>	<p>Since January 1, 2005, Family Matters has submitted five foster home licensing packets to the Department. Of these five homes, one was submitted in accordance with the thirty-day policy. Family Matters has not let any foster home license lapse. There have been no children in unlicensed foster homes.</p> <p>Currently, the Program Assistant ensures that all foster parents receive a renewal</p>	<p>Program Coordinator</p>	<p>January 2005</p>	<p>November 2005 and ongoing</p>		

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FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
	letter detailing needed information 60 days prior to the license expiring. A home visit is scheduled 45 days prior to the license expiring. All foster parents are expected to have their information submitted to Family Matters before the 30-day deadline. Failure to submit required documentation will result in a license being placed on inactive status.					
#23 Provider did not have any documentation that exit interviews were being completed on foster children.	Attached please find a copy of Family Matters Exit Interview Procedure. The Program Coordinator inquires at each weekly staff meeting of children moved during the week and in need of an exit interview. Several have been turned in (see attached). This has become standard practice for all staff.	Program Coordinator			February 2005	
#24 Family Matters had not implemented the Quality Assurance/ Quality Improvement Plan.	An updated QA/QI Plan was developed in February of 2005. A copy of this plan is attached. On March 23, 2005, staff held their first Quarterly Peer Review. On 4/1/2005 and 4/13/2005, the Program Coordinator reviewed two cases with the QWICA tool. The findings of these reviews were written in report form and shared with staff at the weekly staff meeting. The Program Coordinator will also be participating in the Family Support Services review on May 17 th and 18 th , 2005.	Program Coordinator			April 21, 2005 and ongoing	
#26 Family Matters was not providing intervention services to families as stated in the System of Care.	Family Matters updated the System of Care in February of 2005 to reflect the changes in staff task and responsibility. A copy of this plan is attached. Currently, intervention services and in-home services are contracted out by Family Matters to First	Program Coordinator/ Executive Director			February 2005	

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CORRECTIVE ACTION PLAN**

FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
	Coast Family Center for the Parent Aide Program.					
QWICA						
<p>[REDACTED]</p> <p>(30) Were there a minimum of monthly face-to-face home visits between the counselor and the child.</p> <p>(31) Were there a minimum of monthly face-to-face home visits between the counselor and the parents when the goal is reunification or maintain and strengthen.</p> <p>(32) Is there evidence of discussion about achieving case plan goal during monthly face-to-face contacts with the child, mother, father and caregiver.</p> <p>(33) Is there evidence that monthly face-to-face contacts were purposeful with the child, mother, father and caregiver.</p> <p>(34) Is there evidence that</p>	<p>(30) As of February 2005 all children have been seen by their assigned counselors in the home.</p> <p>(31) Within 6 months of reunification we are attempting to see parents in the home on a monthly basis.</p> <p>(32) We have ongoing training in the agency focused on discussing Case Plan goals during each visit with parents & children. We have implemented a new form for workers to take to visits to use in addressing Case Plan matters.</p> <p>(33) The remedy goes back to #32 and results should be evident in forthcoming monitoring.</p> <p>(34) We will make sure that child</p>	Executive Director	April 25, 2005	October 25, 2005		

**CONTRACT MONITORING REPORT
CORRECTIVE ACTION PLAN**

FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
<p>child safety was a focus during monthly face-to-face contacts with the child, mother, father and caregiver.</p> <p>(35) During monthly contacts, is there documentation that the case manager observed the child's physical appearance and interaction with caregivers.</p> <p>(36) Was initial contact with the child, the parents or caregivers to initiate service provision made within a reasonable amount of time following acceptance of the case.</p> <p>(38) Has the counselor identified needed services for the child, mother, father and caregiver.</p> <p>(40) Is there evidence indicating all parties are actively engaged in completing case plan activities.</p>	<p>issues which are always addressed are entered in HS_n. The Home Visit form includes this checkmark.</p> <p>(35) Physical appearance & interaction with caregivers are all part of the Home Visit form now being used by Family Matters counselors.</p> <p>(36) Once accepted initial contact must be made within 5 working days. Supervisors are responsible for seeing that the case is assigned and contacted. Executive Director will follow up to see that it's being done.</p> <p>(38) We have _____ in 100% of cases for needs of fathers (see #39). Apparently, we have not documented the identified needs. Will be looked into.</p> <p>(40) Counselors have been told and reminded to document in HS_n participation of family members in the Case Plan. Supervisors are follow up to see that it has been done.</p>					

**CONTRACT MONITORING REPORT
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FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
<p>(41) Did the case file document communication between the counselor and service providers.</p> <p>(42) Have the child's educational needs been identified and formally addressed in the case plan.</p> <p>(43) Have appropriate services been provided to the child to facilitate educational achievements appropriate to his/her abilities.</p> <p>(44) Has the case manager monitored the results of the service provision to determine if progress is being made and emerging needs are being met and identified.</p> <p>(45) If case was closed, were services provided for the child a minimum of 6 months in the home of the current caregiver.</p>	<p>(41) Once again, we have a documentation issue for correction. Workers do communicate with providers regularly but have not documented accordingly.</p> <p>(42) Educational needs are assessed as part of the CA – workers need to put these needs in Case Plans and Judicial Reviews. This domain correlates with #14 (Educational Needs) on the Matrix.</p> <p>(43) As we better document the educational needs we can better see that they are addressed.</p> <p>(44) Better documentation is needed in this area.</p> <p>(45) We do not understand our 67% compliance in this area. We know that we supervise for 6 months post placement and would expect this to be at 100%.</p>					

**CONTRACT MONITORING REPORT
CORRECTIVE ACTION PLAN**

FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
<p>(46) Is there evidence that supervisor reviews occurred on a quarterly basis.</p> <p>(47) If no, is there evidence that a supervisory review occurred at least once during the review period.</p> <p>(48) For cases with supervisory reviews, was appropriate guidance and case direction provided by the supervisor.</p>	<p>(46) Supervisors have supervised staff weekly but have not been entering in HSn. They have been told to correct this and Executive Director will follow up.</p> <p>(47) Same as above (#46)</p> <p>(48) To be examined with Supervisors to see what needs changing or documenting differently.</p>					
<p>[REDACTED]</p> <p>(51) Does the case file document that the child's health needs are being met.</p> <p>(52) Were the child's mental health needs identified and treated.</p> <p>(53) For a child 5 years of age and older, is there</p>	<p>(51) This domain correlates with #15 (Physical & Mental Needs) on the matrix. Staff will be made aware of this deficiency and by using the Home Visit Report will address these issues on a regular basis.</p> <p>(52) We were slow in establishing Comprehensive Assessment for all our children. This percent should improve in future monitoring.</p> <p>(53) Same as above.</p>	Executive Director	April 25, 2005	October 25, 2005		

**CONTRACT MONITORING REPORT
CORRECTIVE ACTION PLAN**

FINDING/ISSUES	CORRECTIVE ACTION	POSITION RESPONSIBLE	TARGET START DATE	PROPOSED DATE TO COMPLETE	ACTUAL DATE COMPLETED	OUTCOME MEASURES
<p>documentation in the case file that the child received a screening within 30 days of removal to identify any need for mental health or substance abuse treatment.</p> <p>(55) Was an assessment conducted that included a comprehensive review.</p> <p>(56) Was the comprehensive assessment completed within 30 days of entering foster care</p> <p>(58) Has the MH/SA provider selected to treat the child's identified mental health/substance abuse diagnosis implemented services within 30 days of the completed referral.</p>	<p>(55) Same as above (see #52).</p> <p>(56) Same as above (see #52).</p> <p>(58) We will discuss with Sutton Place the need for response to our referrals within 30 days.</p>					
<p>██████████</p> <p>(59) Is there a case plan in the file.</p> <p>(60) Was the initial case plan developed within 60</p>	<p>59) We have a number of cases over one year and have not updated the case plans in a timely matter.</p> <p>60) The Executive Director will oversee Supervisors</p>	Executive Director	April 25, 2005	October 25, 2005		

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<p>days of removal or initial contact with the family.</p> <p>(61) Is there evidence in the case file that the parents and child participated in the development of the case plan.</p> <p>(62) Is the case plan individualized and does it include appropriate tasks and services for all parties.</p> <p>(63) If mental health or substance abuse needs were identified for the child, does the case plan address those mental health and substance abuse needs.</p> <p>(64) Are the services to be provided to the child consistent with the identified needs in the comprehensive assessment.</p> <p>(65) Is there a concurrent plan to place the child for adoption while reasonable efforts are made.</p> <p>(66) Does the case plan indicate the current placement.</p>	<p>to ensure development of Case Plans within 60 days.</p> <p>(61) This may be a documentation issue as we routinely bring parents in for Case Plan conferences.</p> <p>(62) More effort will be made to involve children in case planning.</p> <p>(63) Counselors & Supervisors will ensure that identified needs are put into Case Plans.</p> <p>(64) More effort will be made to follow through on CA recommendations.</p> <p>(65) We are puzzled by this finding. It is our idea that concurrent goals are routinely being done. We will look into further.</p> <p>(66) No Case Plan will be signed by Supervisor unless current placement is identified.</p>					

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<p>(69) Does the case plan include all tasks and services ordered by the court in the initial disposition order or judicial review order for the period being monitored.</p> <p>(70) Does the case plan specify that the provider will take steps to ensure that the child will receive proper care in a safe environment.</p> <p>(71) For reunification case plans extended past 12 months, is there documentation of extraordinary circumstances.</p> <p>(72) Does the case plan include names and addresses of all service providers.</p> <p>(73) Were the following persons actively involved in the case planning activities or is there documented justification for non-involvement-mother, father, child,</p>	<p>(69) We are not clear on the funding and need to further explore. Maybe that Case Plans are not updated to reflect changes from Judicial Reviews.</p> <p>(70) Apparently due to Case Plans not being updated. Needs further clarity.</p> <p>(71) A start-up deficiency. Will be corrected.</p> <p>(72) Will be addressed in Case Plans and Judicial Reviews.</p> <p>(73) We do involve mother, fathers and guardians (see #62).</p>					

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<p>guardian.</p> <p>(74) Was the case plan amended when appropriate.</p>	<p>(74) We need additional staff to monitor.</p>					
<p>[REDACTED]</p> <p>(97) For children placed outside the community or county of their parents residence, is the reason for the location of the placement clearly related to helping the child achieve his or her case plan goals.</p> <p>(99) Is this the first entry into care for this child.</p> <p>(100) Have any previous entries resulted from the same general reason.</p> <p>(102) Was the child's placement stable during this episode of care.</p> <p>(103) Was there parental notification in the case file for all changes in the child's placement that</p>	<p>(97) We have only started development of foster homes in Nassau County. Therefore, some children are placed out of County because of present necessity. (This domain correlates with # 1, 2, 3 & 5 on matrix)</p> <p>(99) This percentage would seem related to factors outside of our control as a newly developing agency.</p> <p>(100) Since we opened our service, several cases have been reopened. This area needs further examination and tracking.</p> <p>(102) Our teenage population has seriously inflated this figure and is an ongoing problem.</p> <p>(103) This documentation will be improved</p>	<p>Executive Director</p>	<p>April 25, 2005</p>	<p>October 25, 2005</p>		

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<p>occurred during the review period.</p> <p>(105) Did the placement changes occur for reasons directly related to helping the child achieve the goals in the case plan.</p> <p>(106) Was an appropriate assessment of child safety and satisfaction conducted at change of placement.</p> <p>(107) Is the current placement setting stable.</p> <p>(111) Are separated siblings provided monthly visitation.</p> <p>(112) Are the children and their siblings provided monthly contact with their parents.</p> <p>(114) Is there evidence of a strong, emotionally supportive relationship between the child in care and the child's parents.</p> <p>(116) Were there a</p>	<p>(105) Most replacements have been initiated by foster parents who are neither committed to the child or willing to deal with serious behavior problems.</p> <p>(106) Exit Interviews are now mandatory. Rachel Steele addresses this area the Contract Performance Review, Corrective Action Plan.</p> <p>(107) We care close to compliance here.</p> <p>(111) We need to work on this area.</p> <p>(112) We would to analyze further which parents are not having monthly visits. Where appropriate , make extensive efforts for monthly visitations.</p> <p>(114) Unclear as to issue here – lack of emotionally, supportive relationship has a lot to do with previous neglect, abandonment and abuse or may have.</p> <p>(116) That has been corrected and</p>					

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<p>minimum of monthly face-to-face home visits between the counselor and the caregiver.</p> <p>(118) Has the child been appropriately identified as a juvenile sexual offender, aggressor or victim.</p> <p>(125) Was TANF eligibility re-determined annually.</p> <p>(126) If the child is in out of home care, was an initial health screening provided within 72 hours of removal.</p> <p>(127) If the child is in out of home care, was an initial mental health screening or assessment provided upon entry into care.</p> <p>(128) If the child is 11 years or older, has been removed 6 months or longer, and has more than one placement, has an assessment for RGC been completed.</p> <p>(130) Was the family referred to the relative</p>	<p>already reflected in March figures.</p> <p>(118) Two of our children had been appropriated, one identified and one not.</p> <p>(125) Our current TANF numbers are much improved.</p> <p>(126) We only had one child not screened within 72 hours.</p> <p>(127) This should be improved as CA's are conducted at an early stage.</p> <p>(128) This finding is based on a total of two children. We need to further look into this area.</p> <p>(130) We believe this is a documentation area and will go over with the counselors.</p>					

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<p>caregiver program.</p> <p>(131) Does the record contain a current family assessment for children placed with relatives or non-relatives upon initiation of services and every 6 months.</p> <p>(132, 133, 134) Were the appropriate background checks completed on all caregivers.</p>	<p>(131) Each child's situation and that of the family is updated every 6 months in the Judicial Review.</p> <p>(132, 133, 134) We require background checks within 15 days of placement. We would appreciate knowing the particular cases so this can be remedied immediately.</p>					
<p><u>#9 Section VIII Adoption Program, Domain correlates with Time to Adopt, Permanency and Stability and Number of Finalized Adoptions on the Matrix.</u></p> <p>(135) When the permanency goal was changed to adoption, the petition for TPR was many times not filed within 30 days of the permanency hearing.</p>	<p>(135) Family Matters will now have the Program Coordinator at all permanency staffings where the goal is recommended to be changed to adoption. The Program Coordinator will follow each case through the TPR process and will track each court date, ensuring the TPR petition is filed within 30 days of the permanency hearing.</p> <p>The Counselors and Supervisors will be required to inform the Program Coordinator of all permanency staffings where the goal of adoption is being recommended. The Counselors and Supervisors currently notify the Office Manager of all permanency staffings.</p> <p>The Program Coordinator will provide feedback to all staff on this new process during the weekly staff meetings. The Program Coordinator will track all TPR</p>	<p>Program Coordinator</p>	<p>February 2005</p>	<p>October 2005</p>		<p>90% compliance by October 2005</p>

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<p>(136) If the court terminated parental rights, the order of disposition proving a hearing to be held within 30 days to provide an amended case plan identifying the permanency goal was only at 75% compliance.</p> <p>(138) Post TPR, the child was registered on the Adoption Exchange System within 30 days 67% of the time.</p>	<p>cases on an excel spreadsheet and update accordingly. This tracking mechanism will be shared with the Executive Director on a monthly basis.</p> <p>(136) Family Matters is having the Program Coordinator follow each case from the permanency hearing (where the goal is changed to adoption) through to the finalization of the adoption.</p> <p>The Counselors and Supervisors will be required to notify the Program Coordinator after each court date where parental rights were terminated.</p> <p>The Program Coordinator will then track the hearing date for the amended case plan to be submitted to ensure the date is in accordance with statutory requirements. This tracking mechanism (excel spreadsheet) will be shared with the Executive Director on a monthly basis.</p> <p>(138) Family Matters' Program Coordinator is currently working closely with CWLS to gather information regarding TPR petitions filed and granted. This information is provided to the Program Coordinator in a timely manner and all children are registered on the Adoption Exchange within the required time frame.</p> <p>Counselors and Supervisors continue to provide the Program Coordinator with the</p>					

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<p>(139a,b and 140) Children not officially placed in an adoptive home were not web authorized with a photo on the Adoption Exchange System to begin recruitment within 90 days of TPR. Staff was not documenting appropriate reasons for delays in HSn.</p>	<p>information regarding children available for adoption. In addition, the Program Coordinator checks with CWLS on a monthly basis to ensure all children are reported and subsequently, placed on the Adoption Exchange System by the Program Coordinator.</p> <p>The Program Coordinator monitors this piece and works with the Adoptions Counselor, Supervisor and CWLS on a weekly basis to ensure that all children post-TPR are placed on the AES system within 30 days of TPR. This requirement is tracked on an excel spreadsheet.</p> <p>(139a,b and 140) Currently, the Program Coordinator and Adoptions Counselor meet on a weekly basis to discuss all children available for adoption. Time frames are discussed and if a family wanting to adopt a child is slow in getting paperwork in or is having some other acceptable delay, the Adoptions Counselor will document in HSn the reason for a child not being web authorized on AES.</p> <p>The Adoptions Counselor and Program Coordinator were not aware that documentation needed to be entered in HSn regarding this requirement. The Program Coordinator will ensure that all information regarding a child's case is properly documented in HSn with acceptable reasons for a delay.</p>					

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<p>(143) Child's background information being provided to the adoptive family was not documented in HSn or the child's case file.</p> <p>(144) Birth parents were not notified in writing of the adoption reunion registry prior to the termination of their parental rights.</p>	<p>The Program Coordinator meets with the Adoptions Counselor on a weekly basis to discuss delays, progress and provide guidance. These staffings are recorded on an excel spreadsheet. All appropriate delays will be recorded in HSn and unacceptable delays will be discussed with solution-oriented direction being provided.</p> <p>(143) The child study has always been presented to the adoptive family prior to adoption placement. However, Family Matters was not documenting this in HSn. Currently, the Adoptions Counselor is aware that all child studies being handed out to adoptive parents must be documented in HSn. The Program Coordinator monitors this to ensure the requirement is being met. The Program Coordinator signs the child study written by the Adoptions Counselor and checks HSn to verify the delivery of the child study was documented.</p> <p>(144) Currently, the Program Coordinator sends out via the U.S. Postal Service the Florida Adoption Reunion Registry brochure and a letter explaining it's intent once the TPR petition has been filed. The Program Coordinator receives an email from CWLS detailing what TPR petitions have been filed and when. The Program Coordinator then enters a note to HSn documenting this effort.</p>					

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<p>(145) There was no documentation of pre-placement physicals being completed on children within 6 months of the memorandum of agreement being signed.</p> <p>(146) The adoptive parents were not notified in writing of the adoption reunion registry prior to placement.</p>	<p>The Program Coordinator ensures that all biological parents are informed in writing of the Florida Adoption Reunion Registry prior to TPR.</p> <p>The Program Coordinator tracks this information on an excel spreadsheet and updates the Executive Director on a monthly basis.</p> <p>(145) Currently, the Adoptions Counselor continues to inform the current caregiver of this requirement. However, previously subsidy packets were being approved without a pre-placement physical being conducted. Currently, subsidy packets are not approved until all required information is obtained, including a pre-placement physical.</p> <p>The Adoptions Counselor is taking a more active role to ensure this requirement is being met.</p> <p>The Program Coordinator will not approve any subsidy packets where a pre-placement physical has not been conducted. This information is tracked by the Program Coordinator and discussed with the Executive Director on an ongoing basis.</p> <p>(146) Currently, the Adoptions Counselor provides the adoptive family with the Florida Adoption Reunion Registry brochure at the same time the child study is</p>					

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<p>(147b,c,i and 148h, j) The adoptive home study file did not contain all Affidavits of Good Moral Character and Criminal Record checks including fingerprints. The adoptive home study did not contain education information and discipline techniques on the parents.</p>	<p>delivered. These efforts are then documented in HSn.</p> <p>The Program Coordinator monitors the Adoptions Counselor to ensure this requirement is being met. The Program Coordinator does not approve adoptive placements until it is documented that all required information has been given to the adoptive family.</p> <p>The Program Coordinator tracks this requirement. Adoptive placements are not approved and submitted to the Executive Director until all required information has been documented and provided to the adoptive family.</p> <p>(147b,c,i and 148h, j) All Affidavits of Good Moral Character and Criminal Record checks have been placed in the adoptive home study file. Some information was previously placed in the child's case file. The Program Coordinator now ensures that all information required for the adoptive home study is placed only in the adoptive home study file.</p> <p>The Executive Director and Program Coordinator were unaware of the requirement for adoptive home studies to contain educational information as well as discipline techniques discussed. All home studies written from February 2005 on will have the appropriate topics covered in the</p>					

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	adoptive home study.					
<p>[REDACTED]</p> <p>(164-170) Has coordination between DJJ and Family Matters staff occurred.</p>	<p>(164) We will develop an agreement with DFF and a plan for working together. We do not have that at this point.</p>	Executive Director	April 25, 2005	October 25, 2005		
<p>[REDACTED]</p> <p>(173) Is placement history entered accurately into HS_n.</p> <p>(174) Was current placement data entered into HS_n within 48 hours of placement.</p> <p>(175) Are the face-to-face home visits in the child's residence consistent with the data in the case file.</p> <p>(176) Are 75% or more of the face-to-face home visits in the child's residence</p>	<p>(173) In the past two months we have pushed to get HS_n corrected. These figures should show improvement.</p> <p>(174) Timeliness has been addressed and should be reflected in next report.</p> <p>(175) Counselors are being trained to have Case Plan issues addressed _____ and documented in HS_n. Supervisors have responsibility to track this area.</p> <p>(176) Timeliness issues have been addressed.</p>	Executive Director	April 25, 2005	October 25, 2005		

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entered in HSn within 48 hours of the visit. (177) Are the dates entered into HSn for photographs.	(177) We will be at 85% by the end of April.					