



Office of Children and Family Services

ANDREW M. CUOMO
Governor

SHEILA J. POOLE
Acting Commissioner

October 20, 2017

Hon. Thomas P. DiNapoli
New York State Comptroller
110 State Street, 15th Floor
Albany, NY 12236

Dear Comptroller DiNapoli:

In accordance with the provisions of Section 170 of the Executive Law, the following are actions that the Office of Children and Family Services (OCFS) has taken or will be taking to implement the recommendations contained in the Office of the State Comptroller's (OSC) Final Audit Report (2017- S-79) issued on July 21, 2017.

Recommendation 1: Identify and implement strategies to improve county and VA compliance with requirements for the certification and approval of foster homes, promptness and frequency of casework contact services, and timely data entry of casework contact progress notes.

Actions Taken to Date:

Certification and Approval of Foster Homes

On March 24, 2017, OCFS launched revisions to the Foster and Adoptive Development (FAD) component of CONNECTIONS, the statewide child welfare information management system, to enable enhanced oversight and monitoring of the certification and approval of foster homes by local social services departments (LSSDs) and voluntary authorized agency (VAs). The revisions require documentation in FAD of:

- Justice Center Staff Exclusion List results – the date sent and date received, and the results;
- National and State fingerprint results – the date sent and date received, the results and a safety assessment narrative for any individual with a criminal history;
- New York Statewide Central Register of Child Abuse and Maltreatment Register (SCR) database check results - the date received and the results;
- Out of State SCR check, where applicable - the results received.

OCFS also developed and is piloting a tool for use, through a desk audit of the FAD component in CONNECTIONS, to assess LSSDs and VAs compliance with completing the required elements of the Application and Home Study process.

On June 9, 2017, OCFS issued an Administrative Directive, 17-OCFS-ADM-05, reiterating the general requirements imposed on LSSDs and VAs regarding the foster home certification/approval and renewal processes and informing them of the new FAD documentation requirements. The release addresses:

- The standard steps for renewing a foster home including evaluating care, conducting required background checks and updating medical information;
- Recording information on the orientation, application and training of applicants for certification or approval;

- Reviewing available Youth Voice Questionnaires;
- Completing standardized home study and renewal templates; and
- Supervisory approval of applications for initial and renewal of certification or approval.

Casework Contacts

OCFS makes numerous different reports available to LSSDs and VAs regarding casework contact performance. CONNECTIONS has an Open Caseload inquiry report that informs individual caseworkers and their supervisors about the foster children on their workload who have not had a progress note completed regarding a face-to-face visit by the 20th day of the month.

OCFS also has Business Analysts out stationed in its Regional Offices across the state to assist LSSDs and VAs in complying with the casework contact requirements. Each Business Analyst receives monthly data reports from CONNECTIONS regarding casework contacts, and visits low performing LSSDs and VAs to assess the underlying conditions to help develop solutions. OCFS facilitates a monthly workgroup with the Business Analysts, OCFS Regional Office representatives, OCFS Home Office Quality Assurance staff and OCFS Data Warehouse staff to assess progress in casework contacts.

Recommendation 2: Formally assess potential steps to improve the effectiveness of SPAs and VARs and implement steps as warranted. Steps for consideration should include, but not be limited to:

- Withholding sample details until time of the site visits;
- Monitoring corrective action plans to ensure they address recommended and required actions; and
- Incorporating a review of certification and approval requirements at the counties.

Actions Taken to Date:

Sample Details

OCFS has considered but does not agree that sample details should be withheld until time of the site visit. OCFS has conducted oversight of LSSDs and VAs using both SPA and VAR instruments for many years. On no occasion has a situation arisen that would have necessitated the need to withhold the sample of cases to be reviewed until the time of the site visits. Providing the list of cases prior to a review assists in obtaining all the voluminous records necessary for the review in a timely manner. OCFS has a separate mechanism available to use when it has concerns about the reliability of any records provided; there is an audit trail within CONNECTIONS that indicates when documentation was data entered.

Corrective Action Plans

In 2017, OCFS developed a standard template for monitoring corrective action plans and changed the terminology it uses from "Corrective Action Plan" to "Program Improvement Plan" (PIP). For each area of review in a VAR/SPA requiring improvement, the OCFS Regional Office lead works with the applicable LSSD or VA to develop an associated PIP. These individual PIPs are then combined into a Master PIP for each LSSD and each VA. OCFS Regional Offices continue to monitor the actions on the Master and Individual PIPs until they are completed, at which point the completion date is noted in the PIP. OCFS is centralizing within its Home Office the monitoring of the completion of Individual PIPs resulting from the VARs and SPAs.

Foster Home Certifications and Approvals

As noted above in the Actions Taken to Date on Recommendation 1, certification and approval requirements will be monitored through auditing of the FAD and through the new VAR module.

In addition, OCFS developed and is piloting an oversight module specific to FBHs operated by LSSDs and VAs. It can be used as a stand-alone review or connected to other reviews of LSSDs or VAs certifying and approving FBHs, and includes a review for timely and accurate data entry.

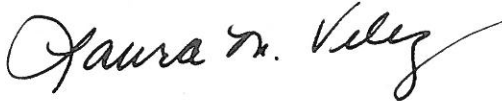
Recommendation 3. Identify and correct inconsistencies and errors in foster care population data, and take prompt steps to address those may compromise its current and future completeness and accuracy.

Actions Taken to Date

As part of our most recent case record reviews conducted as part of the federal Child and Family Services Review, monitoring of the LSSDs compliance with this requirement was done. Any case with inconsistencies was referred to the applicable LSSD for correction.

If you have any questions regarding this response, please contact Brendan Schaefer, Director of Internal Audit at 518-402-3985.

Sincerely,

A handwritten signature in black ink, reading "Laura M. Velez". The signature is fluid and cursive, with the first name "Laura" being the most prominent part.

Laura M. Velez
Deputy Commissioner
Child Welfare and Community Services