



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Franklin County Commissioners
Commissioners Complex
19 North Main Street
Chambersburg, PA 17201

FEB 07 2018

RE: Franklin County CYS
Franklin County Human Services Building
425 Franklin Farm Lane
Chambersburg, PA 17202
License #: 312960

Dear Franklin County Commissioners:

As a result of the Department of Human Services' annual licensing inspection on November 30, 2017, and December 1, 2017, of the above facility, the violations with 55 Pa. Code Ch. 3130 specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa. Code Ch. 3130 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Cathy A. Utz".

Cathy A. Utz
Deputy Secretary

Enclosure
Licensing Inspection Summary

**COUNTY CHILDREN AND YOUTH AGENCY
ANNUAL SURVEY AND EVALUATION SUMMARY**

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|---|--------------------|-----------|------------------------|---|---|------------|
| NAME OF AGENCY/FACILITY: Franklin County Children and Youth Services | | | | TELEPHONE: 717-263-1900 | OCYF REGIONAL STAFF APPROVAL | DATE |
| ADDRESS: 425 Franklin Farm Lane, Chambersburg, PA 17201 | | | | COUNTY: Franklin | <i>Harold Ahe</i> Program Representative | 01/22/2018 |
| INSPECTED BY: Karla Blake, Frank Adams, Kip Cherry, Mark Schrode, Sally Lupini | | | | INSPECTION DATES: 11/30/2017 and 12/01/2017 | <i>Kim DeWitt</i> Supervisor | 1/26/18 |
| INITIAL INSPECTION | RENEWAL INSPECTION | COMPLAINT | UNANNOUNCED INSPECTION | RANDOM SAMPLE | <i>Gabe Mc</i> Regional Director | 1/26/18 |
| | X | | | | | |

The Department of Human Services conducted an Annual Licensing Inspection of Franklin County Children and Youth Services on November 30, 2017 and December 1, 2017 for the licensing year extending from 03/01/2017 to 03/01/2018. During the inspection Departmental staff reviewed 49 of 49 Personnel records, 14 of 14 new Personnel records, 10 of 168 Placement records, 4 of 17 Adoption records, 10 of 529 Child Protective Service records, 10 of 1474 Intake records, 10 of 1568 Screen Out records, 10 of 107 In-Home records, 1 of 2 records that involved the Interstate Compact on the Placement of Children, 1 of 1 Resumption of Care records, 1 of 6 Shared Case Responsibility records, 4 of 5 Resource Home records, including 4 new resource family records, and visited with 2 resource families.

The following areas of non-compliance were noted:

The following chapters 3350, 3700, 3130, 3490, CPSL and Chapter 20 were reviewed during the annual licensing review. Based on violations with regard to chapters 3130, 3490 and 3700, the Department of Human Services, Office of Children, Youth and Families is issuing the following citations which require a plan of correction.

REGULATORY FINDINGS REQUIRING PLAN OF CORRECTION

| 1. 55 PA CODE CHAPTER | 2. NON-COMPLIANCE AREA | 3. CORRECTION REQUIRED | 4. REQUIRED CORRECTION DATE | 5. PROVIDERS PLAN OF CORRECTION OR RESPONSE | 6. STATUS OF CORRECTION |
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| 3130.61 (c, d, e) | In 1 of 10 Placement records reviewed the parent was not provided the opportunity to sign the Child Permanency Plan dated [REDACTED] In 1 of 10 Placement records reviewed there was no documentation that the | The county agency shall provide family members, including the child, their representatives and service providers the opportunity to participate in the development and amendment of the service plan if the opportunity does not jeopardize the child's safety. The method by which these opportunities are provided shall | The agency is required to come into compliance with this requirement immediately and ongoing. | Caseworkers and Supervisors will receive refresher training with respect to the FSP's, FSPR's and CPP's regulatory requirements. This will be completed by the Assistant Administrator and Program Specialist. | PLAN ACCEPTED <i>KSB 01/22/18</i> |


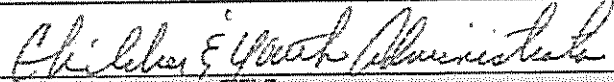
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| | <p>child and parent were provided the opportunity to sign the Family Service Plan and Child Permanency Plan dated [REDACTED]</p> <p>In 1 of 10 Placement records reviewed there was no documentation that the father received a copy of the service plan dated [REDACTED]</p> | <p>be documented. The service plan shall be signed by the county agency staff person responsible for management of the case, the parent or legal guardian and the child, if 14 years of age or older, shall be given the opportunity to sign the service plan. The county agency shall inform the parent or guardian that signing the plan constitutes agreement with the plan. The county agency shall provide family members, their legal counsel, other representatives and agencies or facilities providing services to the child and family with a copy of the service plan, including service plan amendments and results of reviews.</p> <p>The supervisor shall review each In-Home and Placement record as part of their review process to ensure that the required family members and representatives are given the opportunity to participate in the development of all Family Services Plan and Reviews. Additionally, the supervisor shall review each In-Home record as part of their monthly supervisory review process to ensure that all Family Service Plans and Reviews are distributed to family members, their legal counsel and other representatives as required.</p> | | <p>Random QA file checks shall ensure continued compliance. These will be conducted by Assistant Administrator and Program Specialist.</p> <p>CAPS will be utilized to assist the agency in meeting regulatory requirements and continued compliance</p> <p>These actions were instituted on 12/4/17, and will be required on an on-going basis.</p> | |
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| <p>3130.88 OCYF Bulletin 3130-12-02, Children in Foster Care Act (Act 119 of 2010)</p> | <p>In 1 of 10 Placement records reviewed there was no documentation of the Child Grievance Policy being reviewed with the child at the time of placement.</p> | <p>The child grievance procedure shall be explained to the child or the child's parent or other responsible person (when a child is too young to understand the procedure) as soon as the child is placed in out of home care. A plan should be developed to assure that this mandate is being met. The plan should state the staff position/person that is responsible for the review and enforcement of this policy with staff.</p> | <p>The agency is required to come into compliance with this requirement immediately and ongoing.</p> | <p>Caseworkers and Supervisors will receive refresher training with respect to the regulatory requirements. This will be completed by the Assistant Administrator and Program Specialist.</p> <p>Random QA file checks shall ensure continued compliance. These will be conducted by Program Specialist.</p> <p>The in house placement checklist will be reviewed by the supervisor to verify all necessary paperwork is being completed timely.</p> <p>These actions were instituted on 12/4/17, and will be required on an on-going basis.</p> | <p>PLAN ACCEPTED KSB 01/22/18</p> |
| <p>3700.51 (e)</p> | <p>In 1 of 10 Placement records reviewed the child did not receive a dental appraisal by a licensed dentist within 9 months of the initial appraisal.</p> | <p>The FFCA shall ensure that a child, 3 years of age or older, receives a dental appraisal by a licensed dentist within 60 days of admission, unless the child has had an appraisal within the previous 6 months and the results of the appraisal are available. After the initial appraisal the FFCA shall ensure that dental examinations are given to children 3 years of age and older at least once every nine months of placement. A plan should be developed to assure that this mandate is being met. The plan should state the staff position/person that is responsible for the review and enforcement of this policy with</p> | <p>The agency is required to come into compliance with this requirement immediately and ongoing.</p> | <p>Caseworkers, Supervisors and Providers will be notified with respect to the regulatory requirements on dental exams. This will be completed by the Assistant Administrator and Program Specialist.</p> <p>Random QA file checks shall ensure continued compliance. These will be conducted by Program Specialist.</p> <p>CAPS will be utilized to assist the agency in meeting regulatory requirements and continued compliance.</p> <p>These actions were instituted on 12/4/17, and will be required on an on-going basis.</p> | <p>PLAN ACCEPTED KSB 01/22/18</p> |

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| | | staff. | | | |
| 3130.21(b) Safety Assessment | In 1 of 10 Intake records reviewed the caregivers were not seen and a safety assessment was not completed. | The executive officers shall ensure that the agency is operated in conformity with applicable Federal, State and local statutes, ordinances and regulations. The Safety Assessment and Management Process requires that caregivers are seen and safety assessments are completed and documented at specified intervals prior to case closure. A plan should be developed to assure that this mandate is being met. The plan should state the staff position/person that is responsible for the review and enforcement of this policy with staff. | The agency is required to come into compliance with this requirement immediately and ongoing. | Caseworkers and Supervisors will receive refresher training with respect to the required face to face contact and safety assessments regulatory requirements. This will be completed by the Assistant Administrator and Program Specialist. Random QA file checks shall ensure continued compliance. This will be completed by the Program Specialist. The Assistant Administrator shall ensure that Supervisors are reviewing safety assessment in a timely manner to meet regulations. CAPS will be utilized to assist the agency in meeting regulatory requirements and continued compliance. These actions were instituted on 12/4/17 and will be required on an on-going basis. | PLAN ACCEPTED KSB 01/22/18 |
| 3490.234 (b) | In 1 of 10 Intake records reviewed there was no documentation of written notice to the parents and the primary person who is responsible for the care of the child of the county agency's decision to accept or not accept the family for general protective services within 7-calendar days of making the decision. | The county agency shall provide written notice to the parents and the primary person who is responsible for the care of the child of the county agency's decision to accept or not accept the family for general protective services within 7-calendar days of making the decision. A plan should be developed to assure that this mandate is being met. The plan should state the | The agency is required to come into compliance with this requirement immediately and ongoing. | Intake Caseworkers and Supervisors will receive refresher training with respect to the closing letter regulatory requirements. This will be completed by the Assistant Administrator and Program Specialist. Random QA file checks shall ensure continued compliance. This will be completed by the Program Specialist. | PLAN ACCEPTED KSB 01/22/18 |

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| | | staff position/person that is responsible for the review and enforcement of this policy with staff. | | The Assistant Administrator shall ensure that Intake Supervisors are verifying that closing letters are completed to meet regulations. These actions were instituted on 12/4/17 and will be required on an on-going basis. | |
| CPSL 6344 | In 2 of 14 new Personnel records reviewed the staff person began to work with children prior to the agency obtaining an FBI clearance for the staff person. | The county agency shall obtain the required clearances for staff persons as outlined in CPSL 6344 prior to the staff person having any contact with children. A plan should be developed to assure that this mandate is being met. The plan should state the staff position/person that is responsible for the review and enforcement of this policy with staff. | The agency is required to come into compliance with this requirement immediately and ongoing. | The Program Specialist will work with the Human Resource Department and Risk Management Department to verify that all required Clearances are obtained in a timely manner. A copy will be maintained in the Personnel File on site at CYS. The Assistant Administrator shall ensure that the Program Specialist has the documents in a timely manner to meet regulations. These actions were instituted on 12/4/17 and will be required on an on-going basis. | PLAN ACCEPTED KSB 01/22/18 |

THE LEGAL ENTITY REPRESENTATIVE MUST COMPLETE COLUMN 6, SIGN ON THE SIGNATURE LINE AT THE BOTTOM AND DATE ALL PAGES OF THIS DOCUMENT.
RETURN THIS ENTIRE DOCUMENT TO YOUR REGIONAL OFFICE BY: JANUARY 24, 2018

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| SIGNATURE OF LEGAL ENTITY REPRESENTATIVE | TITLE |
| 1/18/18 | 717-263-3286 |
| DATE | TELEPHONE NUMBER |