County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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January 11, 2016

To: Supervisor Hilda L. Solis, Chair
Supervisor Mark Ridley-Thomas
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Supervisor Don Knabe
Supervisor Michael D. Antonovich

From: for Cynthia McCoy Miller
Philip L. Browning
Director

ALLIANCE HUMAN SERVICES FOSTER FAMILY AGENCY FISCAL ASSESSMENT CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a fiscal compliance assessment of Alliance Human Services Foster Family Agency (the FFA) in August 2014. The FFA has two licensed offices, one office located in the Fourth Supervisorial District, and one office located in San Bernardino County; both provide services to DCFS placed children, as well as children from other counties. According to the FFA's program statement, its stated mission is: "to develop, implement, and maintain a system of care which provides children or non-minor dependents with complex circumstances options for living in the community."

At the time of review, the FFA supervised 33 DCFS placed children in 24 certified foster homes. The placed children's overall average length of placement was 21 months, and their average age was 11.

SUMMARY

CAD conducted a fiscal compliance assessment, which included a review of the FFA's financial records such as financial statements, bank statements, check register and personnel files to determine the FFA's compliance with the terms, conditions, and requirements of the FFA's contract, the Auditor-Controller Contract Accounting and Administration Handbook (A-C Handbook) and other applicable federal, State, and County regulations and guidelines.

The FFA was in full compliance with 4 of 5 areas of the fiscal assessment review; Loans, Advances and Investments; Board of Directors and Business Influence; Cash/Expenditures; and Payroll and Personnel.

CAD noted a deficiency in the area of Financial Overview, related to the FFA having a negative net asset deficit. The FFA submitted the consolidated Audited Financial Statement and Single Audit Report for its parent company, which includes the FFA, showing a positive net asset.

During CAD's contract compliance review, the interviewed children generally reported: feeling safe at the FFA, having been provided with good care and appropriate services, being comfortable in their environment and treated with respect and dignity. The certified foster parents reported they were supported by the FFA staff in their efforts to provide care, supervision, and service delivery to the children placed in their homes.

The FFA was in full compliance with 9 of 11 sections of our contract compliance review: Certified Foster Homes; Facility and Environment; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medications; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records.

CAD noted deficiencies in the areas of Licensure/Contract Requirements, related to Community Care Licensing (CCL) citations; Maintenance of Required Documentation and Service Delivery, related to one initial Needs and Services Plan not being completed timely, and one FFA social worker not conducting required visits with placed children.

Attached are the details of our review.

REVIEW OF REPORT

On November 13, 2014, Tony Curry, DCFS CAD, held an Exit Conference with the FFA representatives: Luigi Grimaldi, FFA Executive Director; Rose Rutherford, FFA Director of Adoptions; Olga Toney, FFA Quality Assurance Director; and Kayla Wright, FFA Program Director. DCFS staff included Omnaya Zaklama, CAD Fiscal; and Sonya Noil, Out-of-Home Care Management Division (OHCMD). The FFA representatives were in agreement with the review findings and recommendations, were receptive to implementing systemic changes to improve compliance with regulatory standard, and to address the noted deficiencies in a compliance Corrective Action Plan (CAP) and a Fiscal Corrective Action Plan (FCAP).

A copy of this compliance report has been sent to the Auditor-Controller and CCL.

The FFA provided the attached approved CAP and FCAP addressing the recommendations noted in this compliance report.

On December 11, 2014, OHCMD provided the FFA with technical assistance to assist them with implementing the recommendations noted in this report. CAD conducted follow-up visits to the FFA on January 29, 2015, and April 9, 2015, to verify implementation of the CAP.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager, at (213) 351-5530.

PLB:EM
LTI:tc

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Margarita Perez, Acting Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Luigi Grimaldi, Executive Director, Alliance Human Services
Lenora Scott, Regional Manager, Community Care Licensing Division
Lajuannah Hills, Regional Manager, Community Care Licensing Division

ALLIANCE HUMAN SERVICES FOSTER FAMILY AGENCY
FISCAL COMPLIANCE ASSESSMENT REVIEW
FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The fiscal compliance assessment included a review of Alliance Human Services Foster Family Agency's (the FFA's) financial records for the period of July 1, 2012 through October 31, 2014. Contracts Administration Division (CAD) reviewed the financial statements, bank statements, check register, and personnel files to determine the FFA's compliance with the terms, conditions, and requirements of the Foster Family Agency contract, the Auditor-Controller Contract Accounting and Administration Handbook (A-C Handbook) and other applicable federal, State, and County regulations and guidelines.

The on-site fiscal compliance assessment review focused on five key areas of internal controls:

- Financial Overview,
- Loans, Advances and Investments,
- Board of Directors and Business Influence,
- Cash/Expenditures, and
- Payroll and Personnel.

The FFA was in full compliance with 4 of 5 areas of the fiscal compliance assessment: Financial Overview; Loans, Advances and Investments; Board of Directors and Business Influences; and Payroll and Personnel.

FISCAL COMPLIANCE

CAD found the following area out of compliance:

Financial Overview

- The Audited Financial Statement (AFS) and Single Audit Report (SAR) for the FFA had negative net assets of $470,872 for its fiscal year ending December, 31, 2013.

The FFA provided a copy of the consolidated AFS and SAR for its parent company, Alliance Health, Inc. (AHI). After review of the additional documentation, the consolidated AFS and SAR includes the FFA as a listed covered entity, and its net asset position is $18,741,497.

Recommendation:

The FFA's management shall ensure that:

1. Its operational plan eliminates the current net asset deficit and prevents future negative net assets.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR CONTROLLER

A fiscal review of the FFA has not been posted by the Auditor-Controller.

NEXT FISCAL ASSESSMENT

The next Fiscal Compliance Assessment of Alliance Human Services will be conducted in County Fiscal Year 2015-2016.

ALLIANCE HUMAN SERVICES FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

21311 Hawthorne Blvd., Suite 325
Torrance, CA 90503
License Number: 197805864

9166 Anaheim Place, Suite 225
Rancho Cucamonga, CA 91730
License Number: 366407265

	Contract Compliance Monitoring Review	**Findings: August 2014**
I	**Licensure/Contract Requirements** (7 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Timely, Cross-Reported SIRs	2. Full Compliance
	3. Runaway Procedures in Accordance with the Contract	3. Full Compliance
	4. Are there CCL Citations/OHCMD Safety Reports	4. Improvement Needed
	5. If Applicable, FFA Ensures Complete Required Whole Foster Family Home Training	5. Not Applicable
	6. FFA Pays Certified Foster Parents (CFP) Whole Foster Family Home Payments	6. Not Applicable
	7. FFA Conducts an Assessment of CFP Prior to Placement of Two (2) or More Children	7. Full Compliance
II	**Certified Foster Homes (CFHs)** (12 Elements)	
	1. Home Study and Safety Inspection Conducted Prior to Certification	Full Compliance (All)
	2. Agency's Inquiry with OHCMD for Historical Information Prior to Certification	
	3. Timely, Criminal Clearances (DOJ, FBI, CACI) Prior to Certification	
	4. Timely, Completed, Signed Criminal Background Statement	
	5. Health Screening & TB Test Prior to Certification	
	6. All Required Training Prior to Certification	
	7. Certificate of Approval on File/Including Capacity	
	8. Safety Inspection Completed At Least Every Six Months or Per-Approved Program Statement	
	9. Completed Annual Training Hours for Re-certification and Current CPR/First-Aid/Water Safety Certificates	
	10. Current CDL/Auto Insurance/Annual Vehicle Maintenance Documentation for CFPs and Designated Drivers	
	11. Criminal Clearances and Health Screening/CDL/CPR/ DOJ/FBI/CACI/Auto Insurance for Other Adults in the Home	
	12. FFA Assists CFPs in Providing Transportation Needs	

III	**Facility and Environment** (7 Elements) 1. Exterior/Grounds Well Maintained 2. Common Areas were Maintained 3. Children's Bedrooms/Interior Well Maintained 4. Sufficient and Appropriate Educational Resources 5. Adequate Perishable and Non-Perishable Food 6. CFP Conducted Disaster Drills and Documentation Maintained 7. Money and Clothing Allowance Logs Maintained	Full Compliance (All)
IV	**Maintenance of Required Documentation/Service Delivery** (10 Elements) 1. FFA Obtains or Documents Efforts to Obtain County Children's Social Worker's (CSW) Authorization to Implement NSPs 2. CFPs Participated in Development of the NSPs 3. Children Progressing Towards Meeting NSP Goals 4. FFA Social Workers Develop Timely, Comprehensive Initial NSPs with Child's Participation 5. FFA Social Workers Develop Timely, Comprehensive Updated NSPs with Child's Participation 6. Therapeutic Services Received 7. Recommended Assessments/Evaluations Implemented 8. County Children's Social Workers Monthly Contacts Documented in Child's Case File 9. FFA Social Workers Develop Timely, Comprehensive Quarterly Reports 10. FFA Social Workers Conduct Required Visits	1. Full Compliance 2. Full Compliance 3. Full Compliance 4. Improvement Needed 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Full Compliance 9. Full Compliance 10 Improvement Needed
V	**Education and Workforce Readiness** (5 Elements) 1. Children Enrolled in School Within Three School Days 2. Children Attend School as Required and FFA Facilitates in Meeting Children's Educational Goals 3. Current Children's Report Cards/Progress Reports Maintained 4. Children's Academic Performance and/or Attendance Increased 5. FFA Facilitates Child's Participation in YDS or Equivalent Services and Vocational Programs	Full Compliance (All)

VI	**Health and Medical Needs** (4 Elements) 1. Initial Medical Exams Conducted Timely 2. Follow-Up Medical Exams Conducted Timely 3. Initial Dental Exams Conducted Timely 4. Follow-Up Dental Exams Conducted Timely	Full Compliance (All)
VII	**Psychotropic Medications** (2 Elements) 1. Current Court Authorization for Administration of Psychotropic Medication 2. Current Psychiatric Evaluation Review	Full Compliance (All)
VIII	**Personal Rights and Social Emotional Well-Being** (10 Elements) 1. Children Informed of Agency's Policies and Procedures 2. Children Feel Safe in the CFP Home 3. CFPs' Efforts to Provide Nutritious Meals and Snacks 4. CFPs Treat Children with Respect and Dignity 5. Children Allowed Private Visits, Calls and to Receive Correspondence 6. Children Free to Attend or Not Attend Religious Services/Activities of Their Choice 7. Children's Chores Reasonable 8. Children Informed About Their Medication and Right to Refuse Medication 9. Children Aware of Right to Refuse or Receive Medical, Dental and Psychiatric Care 10. Children Given Opportunities to Participate in Extra-Curricular Activities, Enrichment and Social Activities	Full Compliance (All)
IX	**Personal Needs/Survival and Economic Well-Being** (7 Elements) 1. Clothing Allowance Provided in Accordance with FFA Program Statement 2. Ongoing Clothing Inventories of Adequate Quantity and Quality 3. Children's Involvement in Selection of Their Clothing 4. Provision of Sufficient Supply of Clean Towels and Personal Care Items Meeting Ethnic Needs 5. Minimum Weekly Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement/Assistance with Life Book or Photo Album	Full Compliance (All)

X	**Discharged Children** (3 Elements) 1. Completed Discharge Summary 2. Attempts to Stabilize Children's Placement 3. Child completed High School (if applicable)	Full Compliance (All)
XI	**Personnel Records** (9 Elements) 1. Criminal Clearances (DOJ, FBI, CACI) Signed and Submitted Timely 2. Timely, Completed, Signed Criminal Background Statement 3. FFA Social Workers Met Education/Experience Requirements 4. Timely employee Health Screening/TB Clearances 5. Valid CDL and Auto Insurance 6. FFA Employees Signed Copies of FFA Policies and Procedures 7. FFA Employees Completed All Required Training and Documentation Maintained 8. FFA Social Workers Have Appropriate Caseload Ratio 9. FFA Maintained Written Declarations for Part-Time Contracted FFA Social Workers Caseloads Not Exceed Total of 15 Children	Full Compliance (All)

ALLIANCE HUMAN SERVICES FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addressed findings noted during the August 2014 review. The purpose of this review was to assess Alliance Human Services Foster Family Agency's (the FFA's) compliance with its County contract and State regulations and included a review of the FFA's program statement, as well as internal administrative policies and procedures. The review covered the following 11 areas:

- Licensure/Contract Requirements,
- Certified Foster Homes,
- Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Educational and Workforce Readiness,
- Health and Medical Needs,
- Psychotropic Medication,
- Personal Rights and Social Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, six placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed three of the six children. Three children were not interviewed, as they were pre-verbal. During the home visits, the children were observed to be comfortable and well cared for in their Certified Foster Homes (CFHs) and the Certified Foster Parents (CFPs) were observed to be attuned to the needs of the children. CAD reviewed all six case files to assess the care and services they received. Additionally, four discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, five placed children were prescribed psychotropic medication. CAD reviewed their case files to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed five CFP files, and five staff files for compliance with Title 22 regulations and County contract requirements. Interviews were conducted with the five CFPs to assess quality of care and supervision provided to the children.

CONTRACTUAL COMPLIANCE

CAD found the following areas out of compliance.

Licensure/Contract Requirements

- Community Care Licensing (CCL) citations.

CCL cited the FFA as a result of deficiencies and findings on July 8, 2014. CCL substantiated a complaint against a CFP for not providing the requested number of diapers for the child to have at school. This child was also scratched by the family dog, and the CFPs did seek medical advice to determine if the child needed a tetanus shot, nor did they inform the FFA of this incident. CCL requested a Plan of Correction (POC) requiring the FFA to require the CFPs to send at least three diapers per day to the school; and to provide additional training to CFPs regarding incident reporting, appropriate care, and proper supervision. A DCFS Emergency Response (ER) Children's Social Worker (CSW) and DCFS Out-of-Home Care Investigations Section (OHCIS) conducted investigations and substantiated a lack of proper supervision by the CFPs.

On June 20, 2014, the FFA trained the CFPs on Special Incident Reporting (SIR), and on providing the appropriate number of diapers requested by the school. On January 12, 2015, the FFA trained the CFPs regarding ongoing, effective care and supervision of the children. The POC with documentation of the training was submitted to CCL. The POC was cleared on January 18, 2015. This was verified by CAD on January 29, 2015.

CAD conducted follow-up visits on January 29, 2015, and April 9, 2015. During on-site follow-up visits, CAD confirmed that the CCL required POC trainings for Title 22, reporting responsibilities and Personal Rights were completed.

Recommendation:

The FFA's management shall ensure that:

1. The FFA is in full compliance with Title 22 Regulations and free of CCL citations.

Maintenance of Required Documentation and Service Delivery

- FFA Social Workers did not develop timely, comprehensive, initial Needs and Services Plans (NSPs) with child's participation.

One case file revealed that the initial NSP was not developed within 30 days of placement. The initial NSP was developed 18 days after its due date.

- FFA Social Worker did not conduct required visits with placed children.

One case file revealed the FFA Social Worker did not conduct the required visits with the placed child. There was no documentation for the weekly visits for the months of February, March and May, 2014.

During the Exit Conference, the FFA representatives stated that the non-completion and documentation of weekly visits with the placed child was an isolated incident, and that the FFA program directors will review DCFS regulations with its social workers at an upcoming weekly supervision and monthly staff meeting. The FFA representatives stated the FFA Social Workers are now required to submit NSPs to the FFA social worker supervisors one week before the due date; and that all NSPs will be reviewed to ensure compliance with the NSP guidelines.

In addition, the FFA representatives will review the contact notes weekly to ensure its social workers complete and document all weekly visits. The FFA provided training to all FFA social workers regarding weekly home visits on January 5, 2015 at its Rancho Cucamonga Office, on February 23, 2015 at its Torrance office, and on April 13, 2015 and April 20, 2015 at its Bakersfield office. The FFA also reviewed the finding and the attached Corrective Action Plan (CAP) with all the staff at its Torrance and Bakersfield offices, and its new FFA program director at the Rancho Cucamonga office.

Recommendations:

The FFA's management shall ensure that:

2. FFA Social Workers develop timely, comprehensive, initial NSPs with child's participation.

3. FFA Social Workers conduct required visits.

PRIOR YEAR FOLLOW-UP FROM DCFS OUT-OF-HOME CARE MANAGEMENT DIVISION'S (OHCMD) FFA CONTRACT COMPLIANCE REVIEW

The OHCMD's last compliance report dated July 3, 2014, identified six recommendations.

Based on CAD's review, the FFA fully implemented 5 of 6 of the previous recommendations for which they were to ensure:

- Certified Foster Parents' annual trainings are related to the care and supervision of placed children and meet County contract requirements.

- The FFA obtains or document efforts to obtain the DCFS CSW's authorization to implement NSPs in a timely manner and documentation is maintained in the child's files and that all placed children's NSPs include all elements in accordance with the NSP template.

- Quarterly Reports are sent to the children's DCFS CSWs in a timely manner.

- FFA Social Workers routinely monitor the children's medical appointments and document the efforts in their case files.

- Certified Foster Parents encourage and assist all placed children in creating and updating Photo Albums/Life Books.

Based on CAD's follow-up, the FFA did not implement 1 of 6 of the previous recommendations for which they were to ensure:

- The FFA is in full compliance with Title 22 regulations and free of CCL citations.

Recommendation:

4. The outstanding recommendation from the monitoring report dated July 3, 2014, which is noted in this report as recommendation 1 is fully implemented.

At the Exit Conference, the FFA representatives expressed their desire to remain in compliance with all Title 22 regulations and contract requirements. The FFA will implement procedures to strive towards greater compliance.

OHCMD provided the FFA with technical assistance on December 11, 2014 to assist the FFA with implementing the recommendations noted in this report.

On January 29, 2015, CAD conducted a follow-up on site visit. During the visit, it was confirmed that the FFA program directors were meeting with FFA Social Workers weekly to discuss NSPs for each client on their caseload.

On April 9, 2015, CAD conducted a follow-up visit, and it was noted that the FFA Social Worker contact notes are being reviewed to verify client visits are being conducted; and to ensure that the weekly visits completed by the FFA Social Workers to the placed children in the CFHs are being completed and documented in the children's case files. The contact documentation that was added to the case files include emails, notes of phone conversations, voicemail messages, and face-to-face communications. CAD will continue to assess implementation of the recommendations during our next review. OHCMD will provide ongoing technical assistance prior to the next review.

Alliance
HEALTH AND HUMAN SERVICES

December 31, 2014

VIA Email to ozaklama@dcfs.lacounty.gov

County of Los Angeles
Department of Children and Family Services
Contract Compliance Unit – Fiscal Section
3530 Wilshire Blvd., 4th Floor
Los Angeles, CA 90010

Dear Ms. Zaklama:

In response to your email dated December 18, 2014 with regard to the 2014 audit of Alliance Human Services, Inc. (AHS), I am submitting to you additional information in addendum to our Fiscal Corrective Action Plan (FCAP) demonstrating our plan to strengthen our operational effectiveness to resolve the issue surrounding our negative net asset position as of December 31, 2014.

Although we still state that Alliance Health, Inc., the sole corporate member of AHS will support AHS by way of contribution AHS on an as needed basis, we would like to add the following action items that should improve AHS's net assets position by December 31, 2015:

- Improve Census for all programs
- Review expenses that do not have a direct impact on foster care services
- Review collections and improve our allowance of uncollectible accounts.
- Review programs that are not improving our net asset position.

If you have any questions, please do not hesitate to contact me at (617)332-3366.

Regards,

Richard P. Canty
Vice President, Administration

Enclosures.

Cc: Luigi Grimaldi

134 Rumford Avenue, Suite 306, Newton, Massachusetts 02466
Telephone: 617.332.3366 Fax 617.527.0022 www.alliancehhs.org

Alliance
HEALTH AND HUMAN SERVICES

December 12, 2014

VIA Email to ozaklama@dcfs.lacounty.gov

County of Los Angeles
Department of Children and Family Services
Contract Compliance Unit – Fiscal Section
3530 Wilshire Blvd., 4th Floor
Los Angeles, CA 90010

Dear Ms. Zaklama:

In accordance with Los Angeles' County exit interview for the 2014 audit of Alliance Human Services, Inc., I am submitting to you a written Fiscal Corrective Action Plan (FCAP) demonstrating our plan to strengthen our operational effectiveness to resolve the issue surrounding our negative net asset position as of December 31, 2014.

Alliance Human Services, Inc. (AHS) currently provides social services in six (6) states (Illinois, California, Virginia, Pennsylvania, Rhode Island, and Ohio). Alliance Health, Inc. (AHI), a not-for-profit organization, is the sole corporate member of AHS that was organized in 1999 for the purpose of providing support services to affiliated not-for-profit organizations which provide long-term care and social services. AHI has supported its other subsidiaries on an as needed basis and plans to do the same with AHS if the need presents itself.

As of December 31, 2013, AHI operates at a positive net asset position of $18,741,497 and there is no going concern for the organization as of the date of this letter.

If you have any questions, please do not hesitate to contact me at (617)332-3366.

Regards,

Richard P. Canty
Vice President, Administration

Enclosures.

Cc: Luigi Grimaldi

134 Rumford Avenue, Suite 306, Newton, Massachusetts 02466
Telephone: 617.332.3366 Fax: 617.527.0022 www.alliancehhs.org

Alliance
HUMAN SERVICES, INC.

May 14, 2015

Mr. Anthony Curry
Children Services Administrator 1
County of Los Angeles Department of Children and Family Services
Contract Compliance Section

Dear Mr. Curry:

On December 5, 2014, Alliance Human Services, Inc. (Facility No. 197806287) received the Correction Action Plan that identified 3 deficiencies from the contract and compliance DCFS Audit. The Corrective Action Plan directly addresses the deficiencies identified by DCFS Contract and Compliance Department:

(1) Did the FFA social worker develop timely, comprehensive, initial (NSPs) with the participation of the developmentally age-appropriate child? – Listed under Monitoring Review Field Exit Summary Section 4 - #30.

Program Directors meet with social workers for weekly supervision to discuss upcoming NSP's for each child on their caseload. The NSP's are noted and monitored on the supervision form.

Program Directors are to ensure that Alliance social workers are turning in NSP's a week before the due date, and for social workers to obtain CSW signatures before the 5th day deadline. Program Directors use an internal tracking system to monitor deadlines of NSP's.

(2) County workers contacted monthly and are the contacts appropriately documented in the case file? – Listed under Monitoring Review Field Exit Summary Section 4 - #34.

Program Directors review all NSP's in assuring that monthly contact notes between Alliance social workers and County Social Workers are appropriately documented with specific dates of contact before approval.

Monthly CSW contact notes are addressed and are monitored during individual supervision.

(3) Does the FFA social worker conduct required visits with placed children in accordance with the contract? – Listed under Monitoring Review Field Exit Summary Section 4 - #36.

Program Directors provide training to new hire social workers regarding weekly home visits, and review weekly contact notes for all social workers. Social workers turn in contact notes on a weekly basis to the Program Director in order to verify visits are being conducted.

The deficiency identified during the DCFS exit interview was an isolated incident, Program Directors will continue to review DCFS regulations with social workers during weekly supervision and monthly staff meetings.

Alliance Human Services, Inc. understands and agrees to follow the regulations set forth by the Department of Children and Family Services. Each Program Director will train social workers in their department on the above deficiencies and plan of correction.

Thank you for your consideration at this matter. If you have any questions, please contact me at 310.792.8920.

Sincerely,

Luigi Grimaldi
Executive Director
Alliance Human Services, Inc.
21311 Hawthorne Boulevard, Suite 330
Torrance, CA 90503
310.792.8920
310.792.8998 fax