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DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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July 8, 2013

To: Supervisor Mark Ridley-Thomas, Chairman
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Supervisor Michael D. Antonovich

From: Philip L. Browning
Director

PENNY LANE FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Out-of-Home Care Management Division (OHCMD) conducted a review of Penny Lane Foster Family Agency (The FFA) in November 2012. The FFA has a total of three licensed offices, with one each, in the First, Third and Fifth Supervisorial Districts, and provides services to Los Angeles County DCFS foster children and youth. According to the FFA's program statement, its mission is to "provide children with a continuity of care, nurturance and services to meet their individual needs and those of their families."

At the time of the review, the FFA supervised 290 DCFS placed children in 160 Certified Foster Homes. The placed children's average length of placement was 11 months and their average age was seven.

SUMMARY

During our 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 eight of 11 sections of our program compliance review: Facility and Environment; Education 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.

We noted deficiencies in the area of Licensure/Contract Requirements related to three substantiated Community Care Licensing (CCL) citations findings from 2012 and we noted that for one certified foster home there was no documentation that a Special Incident Report (SIR) was generated and cross reported for an incident involving a placed child.

We also noted deficiencies in the area of Certified Foster Homes, with regard to one foster home certified with the FFA on July 7, 2011. We did not find documentation that the FFA staff submitted an inquiry to the OHCMD monitor for historical information prior to certification.

With regard to this same home, during our face-to-face interview at the foster home, we found a lack of supervision in the home, whereby a nine-month old placed child was left without adult supervision for a period of time. An FFA staff that was waiting outside the foster home to meet the OHCMD monitor for the home visit as a translator for the foster parents witnessed the foster father drive away and return in a five minute period. We were informed that the foster father went to look for the foster mother in the neighborhood and did not realize the foster mother had left the baby in his care. As a result, during the review, the Child Protection Hotline was contacted by the OHCMD monitor. Additionally, the OHCMD monitor immediately contacted the FFA administration to develop a safety plan and the FFA was also instructed to obtain the DCFS CSW's approval of the safety plan. The safety plan included an agreement by all parties not to place additional children in the home pending the outcome of the investigation.

The DCFS Emergency Response Children's Social Worker's, findings were unfounded for general neglect and at risk. The Out-of-Home Care Investigations Section (OHCIS) found the allegation of general neglect to be unfounded. However, the OHCIS recommended that a Corrective Action Plan (CAP) be requested of the agency to increase the minimum age for the placement to be five years. Community Care Licensing (CCL) substantiated a lack of care and supervision by the foster parent and issued a $150 civil penalty to the agency. At present, the agency changed the certificate of approval for the home to reflect the new age range and there are four children currently placed in the home all over age five.

We noted that for two certified foster homes, the health screenings were untimely.

We noted that for the six certified foster homes reviewed, there was no documentation that the annual vehicle inspections were conducted as required.

We noted deficiencies in the area of Maintenance of Required Documentation and Service Delivery. Specifically, a Needs and Services Plan (NSP) for one child placed in June 2012, did not include documentation that the FFA obtained or documented efforts to obtain the DCFS CSW's authorization to implement the NSP until four months later.

We noted that of 13 children's files reviewed, six children's files were missing a monthly FFA contact with the case-carrying CSWs for a one year period. More specifically, four children were missing one FFA staff contact with the children's CSWs for one month and two children were missing FFA staff contacts with the children's CSWs for two months.

Attached are the details of our review.

REVIEW OF REPORT

On December 12, 2012, the DCFS OHCMD Monitor, Cori Shaffer, conducted an Exit Conference with the FFA representatives, Judith Sandino, Director, Trisha Stewart, Regional Administrator, Monica Smith, Regional Administrator and Charito Carrillo, Supervising Social Worker. The representatives: agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve their compliance with regulatory standards; and agreed to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this compliance report has been sent to the A-C and Community Care Licensing.

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

We will confirm that these recommendations have been implemented during our next monitoring review.

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

PLB:EM:KR
RDS:NF:cs

Attachments

c: William T Fujioka, Chief Executive Officer
Wendy Watanabe, Auditor-Controller
Public Information Office
Audit Committee
Ivalise Marcovits, Executive Director, Penny Lane FFA
Rosalie Gutierrez, Regional Manager, Community Care Licensing

PENNY LANE FOSTER FAMILY AGENCY
CONTRACT COMPLIANCE MONITORING REVIEW
FISCAL YEAR 2012-2013

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the November 2012 review. The purpose of this review was to assess Penny Lane FFA's compliance with the County contract and State regulations and included a review of the Penny Lane FFA's program statement, as well as administrative internal policies and procedures. The monitoring 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 purposes of this review, 13 children were selected for the sample. The Out-of-Home Care Management Division (OHCMD) monitor interviewed each child and reviewed their case files to assess the care and services they received. Additionally, five discharged children's files were also reviewed to assess Penny Lane FFA's compliance with permanency efforts. At the time of the review, 13 placed children were prescribed psychotropic medication. We reviewed their case files to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

We reviewed seven certified foster parent files and four staff files were reviewed for compliance with Title 22 Regulations and County contract requirements. Interviews were conducted with seven certified foster parents to assess the quality of care and supervision provided to children.

CONTRACTUAL COMPLIANCE

We found the following three areas to be out of compliance.

Licensure/Contract Requirements

- We noted that Penny Lane FFA received three substantiated Community Care Licensing (CCL) citations for 2012. Two were substantiated for Personal Rights violations and in both instances, the FFA provided training on Personal Rights to the foster parents. One violation pertained to care and supervision of a newly placed 19-year-old youth and the agency staff provided training on care and supervision to the foster parents.

- We noted that for one certified foster home, there was no documentation that a Special Incident Report (SIR) was generated and cross reported for an incident involving a placed child in the home who was not given her daily prescribed psychotropic medication for two days during October 2012. As per the contact note in the child's file, the child missed two days of medication due to the foster mother running out of medication. The documentation indicated that the child had seen the psychiatrist twice in October and that the psychiatrist prescribed a change in the dosage of medication and the foster mother ran out at the end of the month. However, at the time of the missed medication, the FFA staff was not notified or contacted for assistance. The child resumed taking the medication after the two missed days as the foster parent obtained another prescription from the prescribing psychiatrist at the end of the month. During the review this was brought to the FFA Regional Administrator's attention who indicated at the time that she was not notified of this incident by her staff. An SIR was completed and submitted subsequent to this review. Per the Penny Lane FFA Regional Administrator, training with the foster family was conducted on reporting requirements and medication management and a review of serious incident reporting was conducted with the Penny Lane social workers.

Recommendations

Penny Lane FFA's management shall ensure that:

1. All certified foster parent homes remain in compliance with Title 22 Regulations and documentation is maintained in the certified foster parent files.

2. SIRs are appropriately reported and documented in a timely manner.

<u>Certified Foster Homes</u>

- For one foster home certified in July 2011, we did not find documentation that the agency submitted an inquiry to OHCMD for historical information prior to certification. The FFA supervisor indicated that the agency recruiter reported to her that the inquiry was completed though the documentation of such was not located. The FFA indicated that they would ensure that prior to certification of all applicants, the FFA staff would request historical information from OHCMD and that ongoing documentation would be maintained. Per the FFA Regional Administrator, a review was completed with the Penny Lane office managers and recruiting staff on certification requirements and updated documentation to ensure that all pre-certification families are reviewed by OHCMD prior to certification. During the review period, OHCMD completed a historical and reference review with our Department's internal system and there was no prior referral or case history and no previous history as foster parents.

- During a face-to-face interview at one of the certified foster homes selected for review, we found a lack of supervision in the home. A nine-month old placed infant was left without adult supervision for a period of time while the foster father went to look for the foster mother in the neighborhood.

  The OHCMD monitor and an FFA agency staff, who was present to translate, both arrived at the certified foster home about ten minutes prior to the scheduled visit and

waited in their respective cars. When it was time for the visit, foster father arrived alone in his car and proceeded to let them into the home. About a minute later the foster mother arrived at the home in her car with three of the school-aged placed children. OHCMD inquired as to the whereabouts of the fourth placed child, a nine-month old infant. It was determined that the infant was left home alone sleeping in his crib for approximately five minutes. Foster father indicated that he thought foster mother had the infant with her and foster mother indicated she had left infant home sleeping in foster father's care. Both foster parents were notably upset. Subsequently, the FFA translator indicated while waiting in her car she witnessed foster father leave the home in his car and return to the home within five minutes.

As a result of the finding, OHCMD staff called the Child Protection Hotline and made a child abuse report with regard to the lack of supervision. The FFA supervisor was immediately notified as well. The OHCMD monitor completed the review of the home and noted there was ample food and clothing for each child and the home was appropriately furnished. The children appeared to be well provided for in a nurturing home environment. The FFA certified foster home and children's files indicated that the FFA social worker visited the home as per contract requirements and no concerns were noted as to the supervision of the home by the FFA. The FFA Supervisor immediately completed a SIR, the FFA staff completed a training with the foster parents and the FFA Regional Administrator provided verification of completed training with the certified foster parents, dated November 29, 2012, with regard to safety and supervision of children at all times and infant care and supervision. We verified with all parties that at the time of this writing; the investigations conducted by Out of Home Investigations and the Emergency Response Command Post was complete and the allegations were unfounded.

- We noted that for two certified foster homes, the health screenings were untimely. Per Title 22 regulations requirements good health is verified by a health screening and TB test not more than one year prior to or seven days after presence in the home, performed by or under the supervision of a physician. For one certified foster parent who was certified in August 2005, the health screening was conducted in March 2004. With regard to a second certified home, certified in February 2010, the certified foster parents' health screenings were conducted in August 2008 and December 2009. As per the FFA staff, the agency completed its certification paperwork of the home in August 2009, however certification was delayed as the family was in the process of building a new home which was not completed until December 2009. The family was ultimately certified effective February 2010. Therefore, by the time the home was finally certified, the health screenings were over the allotted one year time frame stipulated by Title 22 regulations. Per the FFA Regional Administrator, their pre-certification documentation was updated to ensure that all pre-certified families receive their health-screenings to include TB tests within one-year prior to certification.

- During a review of the certified foster parent files, we did not find documentation of annual vehicle inspections for six of the certified foster parents. We did find that the FFA completed initial vehicle inspections for the homes at the time of initial certification. The FFA staff indicated that they were not aware that annual vehicle inspections were required for certified foster parents. The FFA Regional Administrators indicated that they would ensure that all certified foster parents and/or their designated drivers would

have an annual vehicle inspection at the time of re-certification. The Penny Lane FFA Regional Administrator indicated that Penny Lane has updated its policies and procedures for re-certification for all families to include an annual vehicle inspection.

Recommendations

Penny Lane FFA's management shall ensure that:

3. Prior to certification of a foster home, the FFA will submit an inquiry to OHCMD for historical information.

4. Placed foster children are supervised by the certified foster parents or substitute caregivers at all times and the FFA staff will ensure that the foster parents are routinely reminded of the supervision policy and will monitor the homes for ongoing compliance.

5. All certified foster parents have the required health screenings, to include verification of TB tests, in accordance with Title 22 regulations and that documentation is maintained in the certified foster parent files.

6. Vehicle maintenance for all certified foster parents or their designated drivers will be completed annually and documentation will be maintained in the certified foster parent files.

Maintenance of Required Documentation and Service Delivery

- One placed child's initial Needs and Services Plan (NSP) was in July 2012. OHCMD did not find documentation of the FFA's efforts to obtain the CSW's authorization to implement the initial NSP until November 2012 (four months late). Per the Penny Lane FFA Regional Administrator, a review of NSP requirements was conducted with the Penny Lane FFA social workers who will be responsible for ensuring that all NSPs are reviewed and approved by the CSWs and that signatures are obtained in a timely manner.

- For six placed children, we did not find documentation in the children's files that CSWs were contacted monthly and documentation was maintained. There was at least one month in 2012 that each of the six children was missing a CSW contact by the FFA social worker. Per the Penny Lane FFA Regional Administrator, all of the Penny Lane FFA social workers received a review of the FFA policy regarding monthly contact with the CSWs and documentation requirements.

Recommendations

7. The FFA staff documents efforts to obtain the CSW's authorization to implement the Needs and Services Plans.

8. Children's CSW are contacted monthly by the FFA social workers and contacts are appropriately documented in the children's case files.

PRIOR YEAR FOLLOW-UP FROM DCFS OHCMD's FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The OHCMD's last compliance report completed in August 2011 identified nine recommendations.

Results

Based on our follow-up, Penny Lane FFA fully implemented the nine previous recommendations for which they were to ensure that:

- Beds are in good repair and the FFA social worker routinely monitors the home for ongoing compliance and documentation of such is maintained in the children's files.
- Age-appropriate children participate in the development of the Needs and Services Plans and documentation is maintained in the children's files.
- The FFA staff reviews the Needs and Services Plans with the certified foster parents and verification is maintained in the children's files.
- Children's Needs and Services Plans are comprehensive and include all required elements.
- Children's initial medical examinations are timely and documentation is maintained.
- Children's initial dental examinations are timely and documentation is maintained.
- Children's follow-up dental examinations are timely and documentation is maintained.
- All placed children receive at least the required minimum monthly allowance and documentation is maintained in the files.
- Children's allowance requirements are routinely discussed with the certified foster parents, by the FFA staff, to ensure ongoing compliance.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A fiscal review of Penny Lane FFA has not been posted by the A-C.

PENNY LANE FOSTER FAMILY AGENCY
CONTRACT PROGRAM COMPLIANCE MONITORING REVIEW-SUMMARY
15305 Rayen Street, North Hills, CA 91343, License 197804493
43520 Division Street, Lancaster CA 93535, License 197805739
2450 Atlantic Blvd., Suite 102, Commerce CA 90040, License 197805207

	Contract Compliance Monitoring Review	**Findings: November 2012**
I	**Licensure/Contract Requirements** (7 Elements)	
	1. Timely Notification for Child's Relocation	1. Full Compliance
	2. Serious Incident Report Documentation and Cross Reporting	2. Improvement Needed
	3. Runaway Procedures	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 Whole Foster Family Home Payments	6. Full Compliance
	7. Assessment of Certified Foster Parent (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 Prior to Certification	1. Full Compliance
	2. Contact with References/Including Check with OHCMD	2. Improvement Needed
	3. Timely DOJ, FBI, CACI	3. Full Compliance
	4. Timely, Completed, Signed Criminal Background Statement	4. Full Compliance
	5. Health Screening & TB Test Prior to Certification	5. Improvement Needed
	6. Required Training Prior to Certification	6. Full Compliance
	7. Certificate of Approval on File/Including Capacity	7. Full Compliance
	8. Safety Inspection Every Six Months or Per Approved Program Statement	8. Full Compliance
	9. Completed Training Hours for Re-certification and Current CPR/First-Aid/Water Safety Certificates	9. Full Compliance
	10. Current CDL/Auto Insurance/Annual Vehicle Maintenance Documentation for CFPs and Designated Drivers	10. Improvement Needed
	11. Other Adults In The Home: Health Screening/CDL/CPR DOJ/FBI/CACI/Auto Insurance	11. Full Compliance
	12. FFA Assists CFPs with Transportation Needs	12. Full Compliance
III	**Facility and Environment** (7 Elements)	
	1. Exterior/Grounds Well Maintained	Full Compliance (ALL)
	2. Common Areas Maintained	
	3. Children's Bedrooms/Interior Maintained	

	4. Sufficient Educational Resources 5. Adequate Perishable and Non-Perishable Food 6. Disaster Drills Conducted and Documentation Maintained 7. Allowance Logs Maintained	
IV	**Maintenance of Required Documentation/Service Delivery** (10 Elements) 1. County Worker's Authorization to Implement NSPs 2. NSPs Implemented and Discussed with Foster Parents 3. Children Progressing Towards Meeting NSP Goals 4. Develop Timely, Comprehensive Initial NSP With Child's Participation 5. Develop Timely, Comprehensive Updated NSPs With Child's Participation 6. Therapeutic Services Received 7. Recommended Assessments/Evaluations Implemented 8. County Workers Monthly Contacts Documented in Child's Case File 9. Develop Timely, Comprehensive Quarterly Reports 10. FFA Social Workers Conduct Required Visits	1. Improvement Needed 2. Full Compliance 3. Full Compliance 4. Full Compliance 5. Full Compliance 6. Full Compliance 7. Full Compliance 8. Improvement Needed 9. Full Compliance 10. Full Compliance
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 Children's Educational Goals Met 3. Children's Academic Performance and/or Attendance Increased 4. Current Report Cards Maintained 5. FFA Facilitates Child's Participation in YDS/Equivalent/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 3. CFPs' Efforts to Provide 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 7. Reasonable Chores 8. Children Informed About Their Medication and Right to Refuse Medication 9. Children Aware of Right to Refuse 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 in Accordance with FFA Program Statement ($50 Minimum If After November 1, 2012) 2. Ongoing Clothing Inventories of Adequate Quantity and Quality 3. Children's Involvement in Selection of Clothing 4. Provision of Sufficient Supply of Clean Towels and Personal Care Items Meeting Ethnic Needs 5. Minimum Monetary Allowances 6. Management of Allowance/Earnings 7. Encouragement/Assistance with Life Book	Full Compliance (ALL)
X	**Discharged Children** (2 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. DOJ, FBI, Child Abuse Criminal Index (CACI) Submitted Timely 2. Timely, Completed, Signed Criminal Background Statement 3. Education/Experience Requirements 4. Employee Health Screening/TB Timely 5. Valid CDL and Auto Insurance 6. Signed Copies of FFA Policies and Procedures 7. Staff Completed All Required Training and Documentation Maintained 8. FFA Social Workers Have Appropriate Caseload Ratio 9. Written Declarations For Contract FFA Social Workers That Caseloads Not Exceed Total of 15 Children	Full Compliance (ALL)

Penny Lane

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Ivelise Markovits, MFCC

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Foster / Adoption Families

January 15, 2013

DCFS Out of Home Care Management Division (OHCMD)
9320 Telstar Ave, Suite 216
El Monte, CA 91731
Attn: Cori Shaffer

RE: Corrective Action Plan for November 2012 Audit

Dear Ms. Shaffer,

As a result of the recent audit conducted of Penny Lane Centers Foster Family Agency (FFA) in November 2012 (Antelope Valley Office, Commerce Office, and North Hills Office), Penny Lane Centers has implemented the following corrective action plan in order to help address future related issues. Documentation of the training will be included in the social worker's/staff employee file:

1. Regarding the substantiated CCL non-financial citations, each individual citation included a corrective action plan which was submitted to CCL in a timely manner. Penny Lane Centers strives to provide the best possible services to children and families by ensuring their safety and wellbeing at all times.
2. A child missed her prescribed psychotropic medication for two days which was not reported timely to the FFA staff and there was no SIR on file. Training with the foster family was conducted to educate them about the importance of reporting any concerns with medication in a timely manner. In addition, a review of serious incident reporting was conducted with the Penny Lane Social Workers.
3. One certified foster home did not have an inquiry to OHCMD prior to certification. Office Managers and Recruiting Staff completed a review of certification requirements. Documentation was updated to ensure that all pre-certification families are checked by OHCMD prior to certification.
4. Two certified foster parents had untimely health screenings. Office Managers and Recruiting Staff completed a review of certification requirements. Documentation was updated to ensure that all pre-certification families receive their health screenings within 1 year prior to certification.
5. Annual vehicle inspections were not conducted for certified families. Penny Lane Centers has updated its policies and procedures for re-certification of all foster families to include an annual vehicle inspection. This document has been added to the annual re-certification packet and will be conducted by a Supervisor or Quality Assurance Specialist on a yearly basis.
6. An initial NSP did not have CSW signature until 4 months after implementation. A review of NSP requirements was conducted with Social Workers. All Penny Lane Centers Social Workers are

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Phone (818) 894-3384 Fax (818) 895-5186 www.pennylane.org
Founded in 1969, Penny Lane is a 501 (c) (3) non-profit organization serving abused, abandoned and neglected children with Foster Care, Adoption Services, Residential Treatment, Mental Health, Transitional Housing, and Educational Services
Penny Lane's mission is to foster hopes and dreams by empowering children, youth and families to reach their highest potential

responsible to ensure that Needs and Service Plans are reviewed and approved by the CSWs and that all signatures are obtained in a timely manner.

7. Missing documentation regarding monthly contact with CSW. All Penny Lane Centers Social Workers received a review of Penny Lane Centers Policy regarding monthly contact with CSWs and documentation requirements.
8. Regarding the lack of supervision by the certified foster parents, a Corrective Action Plan was completed with the foster family on 11/29/2012. The family's capacity has been reduced to two, pending the reunification of two of the four children.

Though the following issues arose during the audit, they have been addressed with the foster families, social workers, and social worker supervisors.

If you need additional information, please feel free to contact us at (818) 894-3384.

Cordially,

Monica Smith
Regional Director and Quality Assurance Manager