



County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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April 21, 2020

To: Supervisor Kathryn Barger, Chair
Supervisor Hilda L. Solis
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Supervisor Sheila Kuehl
Supervisor Janice Hahn
From: *Cynthia McCoy Miller for*
Bobby D. Cagle
Director

FIVE ACRES - THE BOYS' AND GIRLS' AID SOCIETY OF LOS ANGELES COUNTY FOSTER
FAMILY AGENCY
CONTRACT COMPLIANCE REVIEW

REVIEW OF REPORT

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of Five Acres - The Boys' and Girls' Aid Society of Los Angeles County Foster Family Agency (the Contractor) in May 2019. The Contractor has two offices: one located in the First Supervisorial District; and one in the Fifth Supervisorial District. The offices provide services to the County of Los Angeles DCFS placed children.

Key Outcomes

NUMBER OF PRIORITY FINDINGS
PRIORITY 1 5
PRIORITY 2 1
PRIORITY 3 0

CAD conducted an on-site Contract Compliance Assessment review of the Contractor's compliance within the following applicable areas: General Contract Requirements; Resource Family Home (RFH) Requirements; Facility and Environment; Engagement and Teamwork; Needs and Services Plans; Permanency; Education and Independent Living Program Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Files.

The Contractor was in full compliance with 7 of 11 applicable areas of CAD's Contract Compliance Review: Engagement and Teamwork; Permanency; Education and Independent Living Program Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Files.

For the purpose of this review, six DCFS placed children were selected for the sample. CAD reviewed the six children's files and interviewed three children to assess the level of care and services they received, three were pre-verbal. Additionally, three discharged children's files were reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed three RFHs files and four staff files for compliance with Title 22 Regulations and County contract requirements. CAD also conducted interviews with staff and the Resource Family Parents (RFPs). Site visits were conducted to the Contractor and the RFHs to assess the quality of care and supervision provided to the placed children.

CAD noted findings in the areas of:

Priority 1

- General Contract Requirements
 - Disaster drills not being conducted every six months.
 - Runaway policy not being maintained in accordance with contract requirements.
- RFH Requirements
 - RFPs automobile insurance not current.
- Facility and Environment
 - Common areas not being safe and well maintained.
- Needs and Services Plan (NSP)
 - NSPs not being timely, comprehensive or accurate and not signed by RFPs.

Priority 2

- General Contract Requirements
 - Special Incident Reports not being properly cross reported to Community Care Licensing Division.

On August 12, 2019, the DCFS CAD Children Services Administrator I and Out-of-Home Care Management Division Quality Assurance Specialist held an exit conference with the Contractor's representatives.

The Contractor's representatives agreed with the review findings and recommendations; were receptive to implementing systemic changes to improve the Contractor's compliance with regulatory standards.

The Contractor provided the attached approved Corrective Action Plan addressing the noted findings in this compliance report.

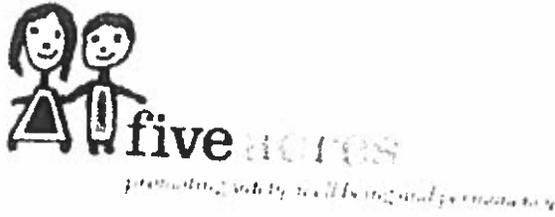
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If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager, at (213) 351-5530.

BDC:KR
LTI:slr

Attachments

c: Sachi A. Hamai, Chief Executive Officer
Arlene Barrera, Auditor-Controller
Raymond Leyva, Interim Chief Probation Officer
Sheila Mitchell, Chief Deputy Probation Officer, Juvenile Services
Public Information Office
Audit Committee
Chanel Boutakidis, Chief Executive Officer, Five Acres
Kellee Coleman, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division



October 18, 2019

Sherry L. Rolls, CSA I
Department of Children and Family Services
Contracts Administration Division - Contracts Compliance Section
3530 Wilshire Boulevard, 4th Floor
Los Angeles, California 90010

RE: Amendments to Technical Review Corrective Action Plan 2019 (FFA)

Dear Ms. Rolls,

On 10/16/19, we received your request for an update to the below listed Corrective Action Plan items that were initially formulated in response to the FFA Monitoring Review that occurred on 8/12/19. Please see our amended updates below:

GENERAL CONTRACT REQUIREMENTS

- 4) The FFA Contract requires that a Disaster Drill be completed a minimum of every 6 months, and one family had a span of 8 months between disaster drills in 2018.

Corrective Action: Foster care social workers have been reminded to check their upcoming due items on a routine basis for expiring items. The Social Worker Supervisor will also audit the FCSW upcoming due items on a routine basis, currently weekly. This was addressed with the foster care social worker team in a Foster Care staff meeting on 8/28/2019.

- 5) The FFA's Runaway Policy did not meet the contractual requirements as stated in the FFA Statement of Work as of the date of the review on 7/5/2019.

Corrective Action: The undersigned Five Acres Division Director implemented a Runaway Policy that meets the criteria set forth in the FFA Statement of Work on 9/19/2019. By 10/31/19 all foster care social workers will review the Runaway Policy with all of their assigned foster families, secure attendant signatures on Runaway Policy documents, and

submit the signed Runaway Policy documents to the foster care program administrative assistant for filing in the corresponding resource parent charts.

- 6) Five SIRs for one client did not include a cross-report to CCL for escalated behaviors, including holding the family cat too tightly, hitting himself in the head, and stating that he hated himself.

Corrective Action: Effective 9/19/19 the Foster Care program is instituting a new in-service training requirement wherein as of 9/25/19 and every six months thereafter all foster care program personnel including the social worker supervisor will participate in a training by the Program Supervisor on SIR Reporting Requirements with special reference to cross-reporting requirements to Community Care Licensing and other third party entities. The Foster Care Program Administrative Assistant will maintain and archive sign-in verification records for all attending staff at the biannual SIR Reporting Requirements trainings and the Division Director will check verification records to ensure that all foster care program staff have completed this required training. Effective 8/28/2019 the Social Worker Supervisor is individually reviewing all SIR documents before final submission to ensure that all SIR documents are designated as having CCL included as a recipient entity for SIRs pending transmission. Effective 8/28/2019 the Foster Care Program Supervisor is individually reviewing all SIR documents completed by the Social Worker Supervisor before final submission to ensure that all SIR documents are designated as having CCL included as a recipient entity for SIRs pending transmission.

RESOURCE FAMILY HOME REQUIREMENTS

- 11) RFP 2 was reported to be missing evidence of car insurance.

Corrective Action: In partial response to this technical review finding, the Agency expectation of family file compliance monitoring will be reviewed with the foster care staff on 9/25/2019, including the specific requirement pertaining to automobile insurance verification. Furthermore, effective 9/19/19, the Foster Care Program Administrative Assistant will complete a monthly RFP documentation compliance check of multiple RFP charts by the 5th of every month and will provide a summary report to the Social Worker Supervisor of any missing or late chart documentation, including automobile insurance verification. The Social Worker Supervisor will fully review the monthly summary reports generated by the Administrative Assistant by the 10th of the month and follow up on any identified missing items with the foster care social workers. Additionally, the Social Worker Supervisor will review RFP chart documentation requirements and compliance with all foster care social workers during weekly supervision meetings.

RESOURCE FAMILY HOME REQUIREMENTS

15) RFP 2 was reported to have mildew on the bottom of the shower on 5/22/2019.

Corrective Action: The Agency provided evidence on 5/29/2019 that the referenced mildew had been removed from the shower location of the RFP 2 foster home. Furthermore, Agency foster care social workers have been reminded to look inside the foster home residence showers on a routine basis to check for mildew stains. This was addressed in a Foster Care staff meeting on 8/28/2019. Additionally, effective 9/28/19 all case carrying foster care social workers will conduct abbreviated home inspections on a quarterly basis during their regularly scheduled home visits to the resource home on their respective caseloads and will submit any concerning items on the Home Inspection Checklist to the Social Worker Supervisor via the Extended Reach software database. When necessary due to identified issues of concern, an internal corrective action plan by the foster care social worker will be created with an appropriate timeframe to ensure that identified items of concern are resolved. The Social Worker Supervisor will closely monitor these internal CAPs in order to ensure the internal CAPs are being completed in a timely matter.

NEEDS AND SERVICES PLANS

23) One NSP in 2018 was not signed in a timely manner by the Resource Parent, and one NSP in 2018 was not signed in a timely manner by the CSW. Four NSPs were missing modification dates and reasons for modification. One NSP was missing the date of the Resource Parent's signature, and one goal was modified without adding the date of modification.

Corrective Action: Agency foster care social workers have undergone training by the Social Worker Supervisor on the need for handwritten signature dates. Furthermore, retraining by the Social Worker Supervisor was conducted on goal modifications in NSPs. This retraining by the Social Worker Supervisor was addressed with staff in the Foster Care staff meeting on 8/28/2019.

Thank you for your prompt and pleasant collaboration. Please feel free to contact us if you should have any additional questions or concerns.

Sincerely yours,



Cesar Gomez, LCSW

Division Director of Permanency Programs (Foster Care and ITFC)