



# County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020  
(213) 351-5602



**BOBBY D. CAGLE**  
Director

**GINGER PRYOR**  
Chief Deputy Director

Board of Supervisors

**HILDA L. SOLIS**  
First District

**MARK RIDLEY-THOMAS**  
Second District

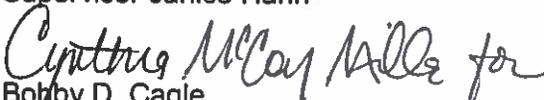
**SHEILA KUEHL**  
Third District

**JANICE HAHN**  
Fourth District

**KATHRYN BARGER**  
Fifth District

May 14, 2020

To: Supervisor Kathryn Barger, Chair  
Supervisor Hilda L. Solis  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Janice Hahn

From:   
Bobby D. Cagle  
Director

## PENNY LANE CENTERS 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 the Penny Lane Centers Foster Family Agency (the Contractor) in July 2019. The Contractor has three offices: one located in the First Supervisorial District; one in the Third Supervisorial District; and one in the Fifth Supervisorial District. The offices provide services to the County of Los Angeles DCFS placed children, Probation foster youth and Non-Minor Dependents.

### Key Outcomes

NUMBER OF PRIORITY FINDINGS
PRIORITY 1 2
PRIORITY 2 3
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 Independence Living Program Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Files.

*"To Enrich Lives Through Effective and Caring Service"*

The Contractor was in full compliance with 6 of 11 applicable areas of CAD's Contract Compliance Review: RFH Requirements; Engagement and Teamwork; Permanency; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; and Personnel Files.

For the purpose of this review, 11 DCFS placed children were selected for the sample. CAD reviewed the 11 children's files and interviewed eight children to assess the level of care and services they received, three were pre-verbal. Additionally, four discharged children's files were reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed five RFHs files and five staff files for compliance with Title 22 Regulations and County contract requirements. CAD also conducted interviews with staff and the Resource Family Parents. 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

- Facility and Environment
  - Vehicles used to transport children were not well maintained and in good repair.
- Needs and Services Plans (NSPs)
  - NSPs not being timely and comprehensive or accurate.

Priority 2

- General Contract Requirements
  - Special Incident Reports not being properly cross reported to Out-of-Home Care Management Division and Community Care Licensing Division.
- Education and Independent Living Program Services
  - Efforts to maintain children in their school of origin were not documented.
- Health and Medical Needs
  - Initial medical examinations were not conducted timely.
  - Initial dental examinations were not conducted timely.

On December 18, 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 and 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.

Each Supervisor  
May 14, 2020  
Page 3

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

BDC:KR  
LTI:lf

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  
Judith Sandino, Penny Lane Centers  
Kellee Coleman, Regional Manager, Community Care Licensing Division  
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division



We foster hopes and dreams by empowering children, youth and families to reach their highest potential.

Chief Executive Officer  
Wendy Carpenter, MA

**Member**

Association of California Human Service Agencies -  
National Council for Behavioral Health - The Joint  
Commission (TJC) - Commission on Accreditation of  
Rehabilitation Facilities (CARF) - Southern California  
Association of Non-Profit Housing (SCANPH) - All  
Children All Families Seal - Human Rights Campaign

Victor Akinmurele, CSA II  
County of Los Angeles - DCFS  
Contract Administration Division - Compliance Section  
3530 Wilshire Blvd, 4<sup>th</sup> floor  
Los Angeles, CA 90010

January 22, 2020

Regarding: Monitoring Review – FFA Corrective Action Plan

Dear Mr. Akinmurele,

Thank you for your time and attention to ensure contract compliance for Penny Lane Centers. We are thankful for your detailed work and measures to ensure that all children's personal rights are being met and exceeded. Penny Lane strives to provide the highest standards for all children and welcomes any opportunity designed to help improve outcomes and services for children and families.

The following outlines Penny Lane Centers corrective actions to the 6 out of 80 main element findings in need of improvement.

- 1) General Contract Requirements: 3 out of 11 youth reviewed did not properly cross report Special Incident Report (SIR) to Out of Home Care and CCL and one SIR was not submitted timely.
  - a) All three offices conducted reviews/trainings for Social Workers and staff on the policies and expectations of SIR submission timeline requirements and accurate cross reporting.
  - b) This training is conducted by the Regional Directors who are responsible for ensuring that all SIR standards and expectations are met.
    - i) Palmdale office trained on: Monday, January 13, 2020 – Attachment #1
    - ii) North Hollywood trained on: Wednesday, January 22, 2020 – Attachment #2
    - iii) Commerce trained on: Monday, January 13, 2020 – Attachment #3
- 2) Facility and Environment: one family had a vehicle with a cracked windshield and windshield wipers that were not in good condition.
  - a) Penny Lane's monthly home inspection tool was modified to ensure that social workers check vehicles each month rather than quarterly. See attachment #4 - the modified Home Inspection – Short Form tool.
  - b) All social workers and supervisors were trained on the new policy and expectations that require vehicle inspections on a monthly basis.

- c) This training is conducted by the Regional Directors who are responsible for ensuring that all family vehicles are safe and in compliance with standards and policies.
  - i) Palmdale office trained on: Monday, January 13, 2020– Attachment #1
  - ii) North Hollywood trained on: Wednesday, January 22, 2020– Attachment #2
  - iii) Commerce trained on: Monday, January 13, 2020– Attachment #3
- 3) Needs and Service Plans (NSP):
  - a) 2 of 11 youth did not have the County CSW's timely signature.
  - b) 2 of 11 youth had inaccurate NSP information.
  - c) 7 of 11 youth did not have a concurrent case plan goal noted in the NSP.
    - i) To improve NSP accuracy, the policy on NSP requirements was modified to include a statement that prohibits copy and pasting of information from one NSP to the next. See attachment #5 – Initial Report and Quarterly Reports/NSP Policy and Procedure.
    - ii) All social workers and supervisors were trained on NSP policies and procedures. The training included techniques and methods to ensure accuracy, timeliness and concurrent planning for NSP.
  - d) This training was conducted by the Regional Directors who are responsible for ensuring that all NSP standards are met.
    - i) Palmdale office trained on: Monday, January 13, 2020– Attachment #1
    - ii) North Hollywood trained on: Wednesday, January 22, 2020– Attachment #2
    - iii) Commerce trained on: Monday, January 13, 2020– Attachment #3
- 4) Education and Independent Living Program Services: 2 of 11 youth files reviewed did not include information related to efforts to maintain the child in their school of origin upon placement.
  - a) The Intake Policy and Procedure was modified to include school of origin requirements. See attached #6 - Intake Assessment Policy
  - b) A training of the new policy related to the school of origin was conducted with all social workers and supervisors. This new policy now outlines and requires that efforts must be made and documented to maintain the child in their school of origin.
  - c) This training was conducted by the Regional Directors who are responsible for ensuring that all efforts are made to keep children in their school of origin.
    - i) Palmdale office trained on: Monday, January 13, 2020
    - ii) North Hollywood trained on: Wednesday, January 22, 2020
    - iii) Commerce trained on: Monday, January 13, 2020
- 5) Health and Medical Needs: 1 of 11 youth reviewed did not have a timely medical exam and 2 of 11 youth reviewed did not have a timely dental exam.
  - a) A training/review of medical and dental care requirements was conducted with all social workers and supervisors.
  - b) This training is conducted by the Regional Directors who are responsible for ensuring that all medical and dental visits are completed timely.
    - i) Palmdale office trained on: Monday, January 13, 2020
    - ii) North Hollywood trained on: Wednesday, January 22, 2020
    - iii) Commerce trained on: Monday, January 13, 2020

Penny Lane Centers is thankful for the support and continued collaborative efforts with the contract compliance monitoring department. We strive to provide top quality care by ensuring safety, wellbeing and permanency for all children at all times. All approved resource families receive close supervision and extensive on-going training by highly skilled and well trained Social Workers. Penny Lane believes in providing these supportive services in an open, honest and collaborative manner.

Please contact Monica Smith, Regional Director and Quality Assurance Manager at (818) 894-3384 ext. 1291 with any questions or concerns.

Sincerely,

A handwritten signature in black ink, appearing to be 'M. Smith', with a long horizontal flourish extending to the right.

Monica Smith, M.A.  
Regional Director