



County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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May 14, 2020

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

From: *Cynthia McCoy Miller for*
Bobby D. Cagle
Director

THE VILLAGE FAMILY SERVICES 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 Village Family Services Foster Family Agency (the Contractor) in July 2019. The Contractor has two offices: one located in the First Supervisorial District; and one in the Third Supervisorial District. The offices provide services to the County of Los Angeles DCFS placed children, Non-Minor Dependents and Probation Youth.

Key Outcomes

NUMBER OF PRIORITY FINDINGS	
PRIORITY 1	8
PRIORITY 2	4
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 (NSPs); Permanency; Education and Independent Living Program Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; Personnel Needs/Survival and Economic Well-Being; and Personnel Files.

"To Enrich Lives Through Effective and Caring Service"

The Contractor was in full compliance with 3 of 11 applicable areas of CAD's Contract Compliance Review: Resource Family Home Requirements; Education & Independent Living Program Services; and Health and Medical Needs.

For the purpose of this review, 12 DCFS placed children were selected for the sample. CAD reviewed the 12 children's files and interviewed nine children to assess the level of care and services they received, three were pre-verbal. Additionally, five discharged children's files were reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed four RFH 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

- General Contract Requirements
 - Disaster drills not being properly documented.
- Engagement and Teamwork
 - Child Family Team (CFT) participants not identified in case files.
 - CFT meetings/collaboration not documented in case files.
 - CFT team decision making processes not included in the NSPs.
- Needs and Services Plans
 - NSPs not being comprehensive or accurate.
- Permanency
 - Placement transition services not being identified at the CFT meetings.
 - Transition plans not being completed at placement.
- Personal Rights and Social/Emotional Well-Being
 - Children not being allowed to attend/not attend religious services of their choice.

Priority 2

- General Contract Requirements
 - Special Incident Reports not being reported timely in the iTrack System.
- Facility and Environment
 - Vehicles not being properly maintained.
- Personal Needs/Survival, and Economic Well-Being
 - Children not being allowed to spend allowances appropriately.
- Personnel Files
 - Staff not receiving all required initial trainings.

On October 21, 2019, the DCFS CAD Children Services Administrator I, High Risk Services Division and the Out-of-Home Care Management Division Quality Assurance Specialist held an exit conference with the Contractor's representatives.

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

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
- Hugo Villa, Chief Executive Officer, The Village Family Services
- Kellee Coleman, Regional Manager, Community Care Licensing Division
- Monique Marshall-Turner, Regional Manager, Community Care Licensing Division



December 02, 2019 (Revised)

Sherry Rolls
Children's Services Administrator I
Department of Children and Family Services
Contracts Administration Division – Contracts Compliance Section
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Re: FFA Monitoring Review FY 2018-2019

Dear Ms. Rolls,

The Village Family Services (TVFS) is submitting the following corrective action plan (CAP) for the findings of the FFA Monitoring Review period from July 2018 to June 2019. The FFA Director of Administration will be responsible for ensuring that the CAP be fully implemented. All changes will take effect immediately or took effect after training was provided to staff and/or resource parents. For each deficiency, this CAP will include the following information:

- Relevant time frames as needed.
- The title of the person/s responsible for the corrections.
- The steps taken to prevent subsequent issues.

I. **General Contract Requirements**

Question 4: The FFA ensured disaster drills were conducted and documented in the RFPs case files, occurring at a minimum of every six (6) months.

Deficiency: RFPs 1, 2, 3, 4 - The FFA does not properly document the drills in the case files. Documentation does not confirm the drill took place and which children were present.

Correction/Response: Although the fire and earthquake drills were being performed during the quarterly home inspections, the form (Supplemental House & Property Inspection) did not contain acknowledgment of the time the disaster drills occurred. Consequently, TVFS has implemented a new form called Trimester Earthquake and Fire Disaster Drill, which has date, time, and names of adults and children/NMD who participated, along with a comment section (see form attached – attachment I).

Question 6: Special Incident Reports (SIRs) are properly documented.

Deficiency: Child 3 and 12 - SIRs are not timely reported.

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Deficiency: Child 3 and 12 - SIRs are not timely reported.

Correction/Response: On October 30, 2019, the ISFC FCSWs were provided with a training on the new Special Incident Reporting (SIR) Guide for Foster Care Placement Services Providers (see agenda – attachment II a; and staff sign in sheet - attachment II b; and SIR Reporting Guide – attachment III). Director of FFA and Administration, and Director of Clinical Services and Training provided the resource parents training on SIR reporting protocol on November 13, 2019 (see agenda attachment IV a and sign in in sheet attachment IV b). This training will be repeated in January for the RPs that were unable to attend this training. On November 20, 2019, FFA Director of Administration provided an SIR training to the Supervisors and reiterated the importance of timely reporting, to both CCLD and FFA Manager/Supervisor (see attachment V). In addition to the trainings provided to FFA staff and supervisors, TVFS QA department will continue to check the I-track site for any pending SIRs between 8:30am and 5:00pm from Monday through Friday. QA will send reminder emails to Supervisors/Directors on any pending SIRs. Foster Care Social Workers (FCSW) have been instructed to either text or call their supervisors as soon as they complete an SIR including weekends and/or after hours. Supervisors will then approve and submit SIRs in a timely manner.

III. Facility & Environment

Question 13: Vehicles used to transport children were well maintained and in good repair.

Deficiency: RFP 1 - Left rear tire was bald. Updated: On 9/3/19, DCFS revisited the home and confirmed that tire had been replaced.

Correction/Response: TVFS has a policy that all vehicles used to transport children must have a yearly vehicle inspection (see attachment VI). In addition to the yearly vehicle inspection, TVFS has added a reminder to the FCSW checklist to check tire condition during their quarterly home inspection; please see section IX of the Supplemental House & Property Inspection form (see attachment VII).

IV. Engagement & Teamwork

Question 20: CFT participants have been identified.

Deficiency: Contract requires CFTs to be done for FFA children within 45 days of placement but no later than 60 days and then every 90 days thereafter.

Corrections/Response: During staff training on October 30, 2019, TVFS staff were reminded that although it is DCFS CSW's responsibility to initiate the initial CFT meeting, it's the FCSW's responsibility to remind and/or request the initial CFT meeting and every 90 days thereafter. TVFS has added an additional box titled CFT Request

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to our TVFS 3 attempts form (see attachment VII). TVFS staff has been instructed to escalate the 3rd attempt to SCSWs if CSW does not respond by the second attempt. On November 20, 2019, Technical Assistance Specialist from OHCU provided a training on CFT and Permanency (see attachment IX A, IX B and IX C).

Question 21: The FFA documented the children's CFT meetings and collaboration.

Deficiency: Contract requires CFTs to be done for FFA children within 45 days of placement but no later than 60 days and then every 90 days thereafter.

Corrections/Response: During staff training on October 30, 2019, TVFS staff were reminded that they need to document all CFTs meetings and/or requests on either their NSPs or their contact notes (see agenda attachment II a, sign-in sheet attachment II b). TVFS Supervisors will make sure the CFT meetings are documented on the 30-day report and on the quarterly reports thereafter. The FCSW will also document CFT meeting attempts via the TVFS 3 attempts form (attachment VIII). On November 20, 2019, Technical Assistance Specialist from OHCU provided a training on CFT and Permanency (see attachment IX A, IX B and IX C).

Question 22: The NSP goals identified the children's CFT team decision-making process for each goal.

Deficiency: Contract requires CFTs to be done for FFA children within 45 days of placement but no later than 60 days and then every 90 days thereafter.

Corrections/Response: During staff training on October 30, 2019, TVFS staff were reminded that they need to request an initial CFT meeting within the 30 days of placement and every 90 days thereafter. They were also reminded that the NSP must include the CFT team decision-making process for each goal. TVFS supervisors will make sure that CFT meetings are documented on the 30-day report and every 90 days thereafter. On November 20, 2019, Technical Assistance Specialist from OHCU provided a training on CFT and Permanency (see attachment IX A, IX B and IX C).

V. Needs and Services Plan

Question 23: The NSPs were completed accurately on time (7 sub elements).

Deficiency 23b: Are comprehensive and accurate.

Child 2 - From the 10/6/18 to the 1/6/19 NSPs, the wording for goals 1 & 2 were unchanged (continued) however, they have new start dates, including reasons for modification; not comprehensive. Note: CAD noted the NSPs were not consistent with including dates for all fields requiring dates. FFA to ensure all fields are filled out accurately.

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Corrections/Response: On November 20, 2019, QA Director provided training for the staff on NSPs fluidity/continuity and SMART goals (see attachment IX A, IX B and IX C). In order to avoid this type of error in the future, TVFS supervisors will review current and previous NSPs side by side to make sure goals have fluidity and continuity. Supervisors have been provided with double computer screens to make it easier to compare previous and current NSPs. Supervisors were also reminded to ensure all fields have been completed prior to approving the NSPs.

Deficiency 23c: Included Case Plans and Concurrent Case Plan.

Child 2 – Child placed in October 2017, no concurrent plans in the following NSPs; 10/6/18, 1/6/19, 4/16/19.

Child 6, 7, 8, 9, 10, 11, 12 - No concurrent case plan goals in initial NSPs and/or updated NSPs.

Corrections/Response: TVFS has updated the TVFS 3 attempts Form (see attachment VIII) to prompt the FCSW to request the child/NMD's concurrent case plan. TVFS supervisor will make sure that the FCSWs are documenting the child/NMD's concurrent case plan goals in the NSPs. Should the CSW not provide that information, despite the attempts, FCSWs are to document all efforts in the NSPs. On November 20, 2019, QA Director provided training for the staff on NSPs (see attachment IX A, IX B and IX C).

VI. Permanency

Question 31. Placement transition services are being identified at the children's CFT meetings.

Deficiency: FFA states CFT are requested for FFA youth depending on the child's needs; CFTs needs to happen within 45 days of placement but no later than 60 days and then every 90 days thereafter. DCFS could not identify placement transition services in the children's case plan.

Corrections/Response: On November 20, 2019, Technical Assistance Specialist from OHCU provided the staff with training on Permanency (see attachment IX A, IX B, IX C). Meanwhile, TVFS staff have been instructed to identify the child/NMD's placement transition services during the CFT meetings, which will be conducted within 30-45 days of placement and every 90 days thereafter. FCSW to document the placement transition services on the child/NMD's NSPs or contact notes. TVFS supervisors will make sure placement transition services are properly documented.

Question 33. The FFA completed transition plans for each child (and families when applicable) upon initial entry for placement changes.



XI. Personnel Files

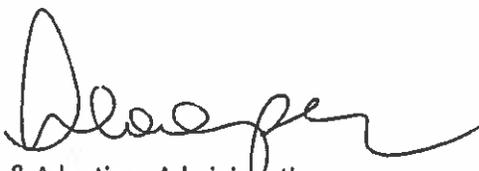
Question 79. Personnel received initial training and orientation.

79 a. Minimum of one (1) hour of Child Abuse Identification & Reporting training.

Deficiency: Staff 2 – Has not taken this training. Updated: FFA provided proof of staff taking the training on 8/13/19. However, the staff was hired on 5/22/18, training did not occur within initial year of employment.

Correction/Response: TVFS is in the process of updating and customizing an agency specific electronic training portal, which will have training plans customized to each staff member's role and contractual requirements. The portal will be fully updated and functional by November 30, 2019. The Sr. Director of Compliance & Risk Management will then oversee a monthly compliance report that will be provided to supervisors and directors to ensure required trainings are completed within their respective timelines.

Sincerely,


Madalena Cooper
Director of Foster Care & Adoptions Administration
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Deficiency: Child 6- No plan done for child upon placement in April 2019

Corrections/Response: TVFS FCSW will inquire/discuss during CFT meetings what the transition plans are whenever a child/NMD is about to have a change in placement. FCSW will document the plans on Termination Reports and/or contact note. TVFS supervisors will make sure said transitional plans are properly documented. On November 2, 2019, Technical Assistance Specialist from OHCU provided the staff with training on transitional plans (see attachment IX A, IX B, IX C).

IX. Personal Rights and Social/Emotional Well-Being

Question 54. Children are allowed to attend OR not attend religious services of their choice.

Deficiency: Child 10 and 11 - Children reported not having the option of going to church with RFP. RFP confirmed the children must go with her. DCFS informed the RFP they needed to make other arrangements if the children do not wish to attend.

Correction/Response: TVFS supervisor met with the resource parent on September 6, 2019 and discussed the issue with RP (see attachment X). FCSW will continue to monitor the home to make sure RP is respecting minors' religious preference. During the resource parent training on November 13, 2019, Director of Clinical Services and Training reminded the resource parents that religion is part of the children/NMD's Personal Rights (see agenda attachment IV a and sign-in sheet attachment IV b). This training will be repeated in January for the other resource parents that were unable to attend.

X. Personal Needs/Survival and Economic Well Being

Question 69. Children reported receiving all allowances

69b. Children are free to spend allowances on appropriate purchases.

Deficiency: Child 10 - Reported RFP gives them a snack but if they want more snacks, they have to buy it from the RFPs in-home store for 50 cents.

Correction/Response: On October 21, 2019, FCSW met with RP and addressed the issue (see attachment XI). During the resource parents training on November 13, 2019, the resource parents were reminded that the children's allowance is part of the children/NMD's Personal Rights; therefore, it cannot be used for entertainment (see agenda attachment IV a and sign-in sheet attachment IV b). This training will be repeated in January for the other resource parents that were unable to attend.