



County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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



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May 27, 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

**SERENITY FOSTER CARE AND ADOPTION 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 Serenity Foster Care and Adoption Foster Family Agency (the Contractor) in July 2019. The Contractor has one office located in the First and Fifth Supervisorial District. The office provides services to the County of Los Angeles DCFS placed children, Probation foster youth, children placed by other counties, and Non-Minor Dependents.

Key Outcomes

NUMBER OF PRIORITY FINDINGS
PRIORITY 1 1
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; Permanency; Education and Independent Living Program Services;

"To Enrich Lives Through Effective and Caring Service"

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: General Contract Requirements; RFH Requirement; Engagement and Team Work; Education and Independent Living Program Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; and Personal Needs/Survival and Economic Well-Being.

For the purpose of this review, 10 DCFS placed children were selected for the sample. CAD reviewed the 10 children's files and was unable to interview any of the children to assess the level of care and services they received, as they were all 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 (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

- Personnel Files,
 - Criminal related requirements not being completed prior to working with children.

Priority 2

- Facility and Environment,
 - RFP did not have a current car registration in the vehicle at time of inspection.
- Needs and Services Plans (NSPs),
 - NSP not being signed by the RFP, Contractor staff and Children's Social Worker/Deputy Probation Officer.
- Permanency,
 - After support services not being identified.
- Personnel Files,
 - Personnel not receiving annual on-going training.

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On August 14, 2019, the DCFS CAD Children Services Administrator I and II 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.

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

BDC:KR
LTI:nw

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
Ike Kerhulas, Executive Director, Serenity Foster Care and Adoptions FFA
Kellee Coleman, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division



SERENITY FFA MONITORING REVIEW CORRECTIVE ACTION PLAN

III. Facility & Environment

13 A - Deficiency: Resource Family Parent did not have the current car registration in the vehicle at the time of inspection.

Corrective Action: Resource Family Parent has requested a copy of the current registration to be placed in the vehicle. Resource Family Parent will provide a copy to Serenity. Serenity will provide a copy to Los Angeles County.

Time Frame: By 9/13/19

V. Needs and Services Plan

23 A – Signed by Resource Parents

Deficiencies:

1. Child #1: NSP dated 9/13/18 was predated with 9/18/18 date. There was no way to prove if the NSP was signed timely. NSP dated 3/13/19: Resource Parent did not sign the NSP and only the signature page was in the file as the report was missing.
2. Child #2: NSP dated 9/13/18 was predated with 9/18/18 signing date. There is no way to prove if the NSP was signed timely. The NSP was not signed by the Resource Family Parent. Only the signature page was found in the file as the report was missing.
3. Child #6 & #7: On the NSP dated 12/29/18 the Resource Family Parent didn't sign until 1/5/19.
4. Child #8: On the NSP dated 2/22/19 the Resource Family Parent did not date their signature.
5. Child #19: On the NSP dated 5/29/19 the Resource Family Parent did not date their signature. On the NSP dated 2/28/19 the Resource Family Parent did not date their signature.

23 F – Signed by FFA Staff

1. Child #1: NSP dated 9/13/18 was predated with a date of 9/18/18. There is no way to prove if the NSP was signed timely.
2. Child #2: NSP dated 9/13/18 was predated with a date of 9/18/18. There is no way to prove if the NSP was signed timely. For the NSP dated 3/13/19 only the signature page was in the file as the report was missing.

23 G – Signed by CSW/DPO

1. Child #1: NSP dated 7/13/18 CSW signature was predated with a 7/13/18 signature. Two emails were previously sent on 7/13/18 and 7/16/18. On 7/18/18 the CSW emailed the signature page to Serenity. There is no way to prove if the NSP was signed timely.
2. Child #2: NSP dated 7/13/18 CSW signature was predated with a 7/13/18 signature. Two emails were previously on 7/13/18 and 7/16/18. On 7/18/18 the CSW sent emailed the signature page to Serenity. There is no way to prove if the NSP was signed timely. The NSP dated 3/13/19 only the signature page was observed in the file as the report was missing.
3. Child #3 & #4: The NSP dated 2/28/19 the CSW signed on 3/15/19. There were two previous email attempts for signature that occurred after the 5 day grace period. On a NSP dated 4/30/19 there were three attempts to obtain the CSW signature that occurred after the 5 day grace period.
4. Child #6 & #7: NSP dated 12/29/18 was signed on 1/8/19 by the CSW with no attempts made to obtain the CSW signature.
5. Child #8: An NSP dated 5/22/19 was signed by the CSW on 5/28/19 with no email attempts made by Serenity for the CSW signature. An NSP dated 2/22/19 was signed by the CSW on 3/4/19. There were only two signature attempts made. A NSP dated 11/22/18 the CSW did not sign after four email attempts made by Serenity.
6. Child #10: On a NSP dated 11/29/18 the CSW did not sign after two email attempts made by Serenity.

Corrective Action: Serenity Social Workers will provide a quarterly report list of reports to review with the Program Supervisor of what is due that month during weekly supervision. The Program Supervisor will review a sample of files every month using a file review form (see attached) and then monthly review the supervision checklist (see attached) to ensure that NSPs are signed. The Program Supervisor will request that Serenity Social Workers submit NSPs 7 days in advance to allow time to review and modify as needed which will allow the reports to be sent timely. Serenity treatment staff also will have quarterly audit reviews to check files and NSP signatures.

Time Frame: By 9/13/19

VI. Permanency

Deficiency: # 35 – Child #2 was receiving a modified version of the Parent Child Interaction Therapy with their paternal aunt prior to discharge. The discharge summary did not indicate if those services were linked to the paternal aunt at discharge. The discharge summary should indicate if any further services were needed at discharge and if follow up appointments were scheduled for the child.

Corrective Action: Serenity will ensure that aftercare support services are identified in discharge summaries and linkages are being made to ensure successful transition to permanent home based care. The Program Supervisor will ensure aftercare support services are being documented through review of all discharge summaries. Social Workers at Serenity will receive training in this area to ensure aftercare services are being documented in their discharge summaries.

Time Frame: By 9/13/19.

X1. Personnel Files:

Deficiency: #75 – Serenity staff member #1 was hired on 7/16/18. FBI and CACI clearances were not obtained until 7/18/18. Staff #3 was hired on 10/1/15. The CACI and FBI clearances were not obtained until 10/9/15.

Corrective Action: Serenity will ensure that no new staff member is hired before FBI and CACI clearances are obtained. This is now a policy that Serenity has implemented and will be managed by Human Resources. Serenity will only make an offer of employment when references have been checked and all clearances have been obtained.

Time Frame: By 9/13/19

Respectfully submitted,



Ike Kerhulas, PhD

Executive Director

Serenity Foster Care & Adoption

600 South Grand Avenue

Covina, CA 91724

626-859-6200 ext. 116

