



**County of Los Angeles
DEPARTMENT OF CHILDREN AND FAMILY SERVICES**

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May 28, 2020

To: Supervisor Kathryn Barger, Chair
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Supervisor Janice Hahn

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

**VISTA DEL MAR CHILD AND FAMILY SERVICES
INTENSIVE SERVICES FOSTER CARE FOSTER FAMILY AGENCY
FOR CHILDREN WITH SERIOUS EMOTIONAL AND BEHAVIORAL NEEDS
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 Intensive Services Foster Care (ISFC) Foster Family Agency (FFA) for Children with Serious Emotional and Behavioral Needs (SEBN) (the Contractor) in July 2019. The Contractor has one office located in the Second Supervisorial District. The office provides services to the County of Los Angeles DCFS placed children and Probation foster youth, in ISFC-FFA placements.

Key Outcomes

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

"To Enrich Lives Through Effective and Caring Service"

CAD conducted an on-site Contract Compliance review of the Contractor's compliance within the following applicable areas of their ISFC-FFA SEBN contract: General Requirements; ISFC Home and Resource Parents; Needs and Services Plans; Child and Family and ISFC Team Meetings; Safety; Core Services; Personal Rights and Needs/Well-Being; Discharge Planning; Staff Qualifications and Requirements; Facility and Environment; and Vehicles.

The Contractor was in full compliance with 6 of 10 applicable areas of CAD's Contract Compliance Review: ISFC Homes and Resource Parents; Child and Family and ISFC Team Meeting; Safety; Personal Rights and Needs/Well-Being; Staff Qualifications and Requirements; and Vehicles. There were no children discharged from the ISFC program; therefore, the section "Discharge Planning" was not applicable.

For the purpose of this review, two ISFC DCFS placed youth files were selected for the sample. CAD reviewed the files and interviewed the youth to assess the level of care and services they received.

CAD reviewed one Resource Family Home (RFH) file and two staff files for compliance with Title 22 Regulations and County contract requirements. CAD interviewed staff and the Resource Family Parents (RFPs). Site visits were conducted to the Contractor and the RFH to assess the quality of care and supervision provided to the placed children.

CAD noted findings in the areas of:

Priority 1

- General Requirements
 - The In-Home Support Counselor was not identified and the duties were not documented. The ISFC-FFA Social Worker's notes were incomplete and lacking detail, there was no mention of the Behavioral Support Team member's duties or of this team member's assessment of the assigned children's needs, and the training records were sparse or not completed.
- Facility and Environment
 - RFPs had the disinfectant and cleaning solutions accessible to the placed children.

Priority 2

- General Requirements
 - The ISFC-FFA did not have the required dedicated ISFC-Resource Parent Recruiter.

- Needs and Services Plans (NSPs)
 - Did not include the required Respite Plan, The NSPs were not accurate/required services were not mentioned or documented, psycho social assessment status was not documented and pending for months, no reference of the children's identified service level, there was no reference to educational achievement, grades or attendance.
- Core Services
 - The educational goal did not address school disruptions and the efforts to maintain children in their schools of origin were not documented.

On August 15, 2019, the DCFS CAD Children Services Administrator I and II, Out-of-Home Care Management Division Quality Assurance Specialist and Quality Assurance Manager with the Bureau of Clinical Resources and Services, 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 ISFC'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 Aldo Marin, Board Relations Manager, at (213) 351-5530.

BDC:KR
LTI:amt

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
Lena Wilson, J.D., President and CEO, Vista del Mar Child and Family Services
Kellee Coleman, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division

Laurie Konheim
Chair, Board of Directors

Lena Wilson, J.D.
President/Chief Executive Officer

Jennifer Bliss, LCSW, LPCC, PsyD
Director of Adoptions and Foster Care



VISTA DEL MAR
ADOPTIONS AND FOSTER CARE

November 05, 2019

Department of Children and Family Services Contracts & Administration Division
3530 Wilshire Blvd, 4th Floor
Los Angeles, CA 90010
Attn: Ana Maria Tribble (tribba@dcfs.lacounty.gov)

**Re: 2nd Addendum DCFS/CAD 2018-2019 FFA-Intensive Services Foster Care
(Serious Emotional and Behavioral Needs) Contract Compliance Review**

On August 15, 2019, Vista Del Mar Child and Family Agency (VDM) received the Foster Family Agency Monitoring Review Field Exit Summary which was conducted on July 08, 2019. The following Corrective Action Plan addresses the following deficiencies, as identified:

I. GENERAL CONTRACT REQUIREMENTS:

1. The agency does not have a dedicated Intensive Services Foster Care (ISFC) Recruiter (s); therefore, the ISFC information in the effort to recruit new Resource Families (RFs) has been provided in presentations for RFA and other agency services:
 - a) Previous to this contract review, the designated FFA recruiter was utilized to recruit for ISFC Resource Families as well. However, this appointed person had not attained the required formal educational background that the most recent Statement of Work (SOW) requires. This appointed person had been hired prior to the ISFC program initiation. While he did not possess the formal educational credentials, he has been educated on the topics essential topics to understand the breath and intricacies in caring for traumatized children.
 - b) The agency has revised the job description and requirements to meet the SOW standard. The new title is "ISFC Recruiter/Trainer." (See **Attached Exhibit 1 (3 pages)**)
 - c) The agency has selected a new staff member who possess an MSW and who has been trained in Trauma Informed Care to fulfill the role of our ISFC Recruiter/Trainer.
 - i. The new appointed staff will focus her recruitment on identifying families within the surrounding communities who possess the capacity to be trained to be an ISFC RF.

- d) If there is ever a lapse in that role being filled, the agency will utilize all staff with the educational background and experience in order to continue to recruit ISFC families.
 - i. The agency has implemented an ISFC Resource Family Training Checklist in order to begin providing ISFC training to all incoming Resource Families (RFs). This will allow the agency to easily convert the ISFC trained RF to be an approved ISFC RF. **(See Attached Exhibit 2 (2 pages))**
- 2. There was no documentation on who is the In-Home Support Counselor (IHSC) and no notes on file regarding what was being done. Social Worker's notes need to be more detailed. No mention in notes of what the behavioral support person is doing. The training records were sparse, need a complete listing of classes as required:
 - a) The agency's FFA-Supervisor conducted a Social Work Training for all FFA-SW staff and interns on September 11, 2019, where all FFA-SW and interns were trained on how to complete a Progress Note for a child who receives ISFC services: **(See Attached Exhibit 3 (2 pages), and Exhibit 4 (4 pages))**
 - i. The FFA-SWs signed the sign-in-sheet to show that they were present for the training. **(See Attached Exhibit 5 (1 page))**
 - b) The agency's FFA-Supervisor will ensure that each Progress Note is submitted within one week from the date of the home visit.
 - i. Each Progress Note will be reviewed to ensure that the services provided by both the ICC and IHSC have been appropriately documented.
 - c) The agency has implemented an ISFC In-Home Support Counselor (IHSC) Training Checklist in order to begin providing the 40 hours of ISFC training to all staff and interns who qualify to be an IHSC. **(See Attached Exhibit 6 (2 pages))**
 - i. Each qualified staff and intern will complete all 40 hours within 90 days. The checklist will be provided to the Contract Compliance Reviewer during the 90-day Review.

II. NEEDS AND SERVICES PLANS:

- 1. Required Respite Plan was not identified in the NSP or case files. Respite Plan will need to be updated quarterly:
 - a) Prior to this Contract Compliance Review, the agency's FFA-SWs and interns believed they were completing NSPs that met the standards and expectations of the SOW.
 - b) The agency FFA-Supervisor developed an RFA Respite Family Plan form and Procedure as to how to meet the standards and expectations of the SOW. **(See Attached Exhibit 7 (1 page) and Exhibit 8 (2 pages))**

- c) The agency's FFA-Supervisor conducted a Social Work Training for all FFA-SW staff and interns on September 11, 2019, where all FFA-SWs and interns were trained on the the Respite Family Plan Procedure with the focus of how to include the current respite plan on a quarterly basis and the requirement for respite care for ISFC families. **(See Attached Exhibit 7 (2 pages); Exhibit 8 (1 page) and Exhibit 9 (2 pages))**
 - i. The FFA-SWs and Interns are responsible for ensuring that the Respite Family Plan is reviewed, updated on a quarterly basis (if not needed to be updated sooner) and included in the initial NSP on a quarterly basis. **(See Attached Exhibit 10 (22 pages) (pg #6))**
 - ii. The FFA-SWs and Interns signed the sign-in-sheet to show that they were present for the training. **(See Attached Exhibit 5 (1 page))**
- d) The agency's FFA-Supervisor conducted a training with the Administrative Case Manager on September 13, 2019. The training focused on the Respite Family Plan, Respite Family Plan Procedure and Required Respite Plan policy of Vista Del Mar. **(See Attached Exhibit 7 (1 page); Exhibit 8 (2 pages) and Exhibit 9 (2 pages))**
 - i. The Administrative Case Manager is responsible for updating the Respite Plan on a quarterly basis (if changed) to include in the Respite Plan section of the RF file. **(See Attached Exhibit 11 (1 page))**
 - ii. The Administrative Case Manager signed the Acknowledgement form to show that she was trained and acknowledge her responsibility. **(See Attached Exhibit 12 (1 page))**
- e) The agency's FFA-Supervisor will require that all FFA-Social Workers and interns submit the completed NSP to the FFA-Supervisor one week prior to the date it is due to the Children's Social Worker (CSW) in order to review and ensure that the content meets the standards of the SOW.
- f) In addition to the direct review from the FFA-Supervisor, the agency has implemented a new Quarterly Audit procedure which will require each FFA staff to audit three RFA/ISFC RF & Children/NMD case files for compliance. During the audit review the FFA staff will utilized the RFA & Child/NMD Quarterly Audit Checklist. If there are any compliance issues that are found during the audit such as: missing Respite Plan information and updates, the FFA staff will document it on the note section of the RFA & Child/NMD Quarterly Checklist form. **(See Attached Exhibit 11 (1 page) and Exhibit 13 (3 pages))**
- g) The RFA & Child/NMD Quarterly Checklist forms will be reviewed with the assigned FFA-SW/Intern of the case and RF to ensure that any deficiencies are corrected within one week.
- h) Once a RF is decertified and/or a child/NMD is discharged from the agency, the FFA-Supervisor will audit the file during the next weekly

supervision to ensure all documentation is in compliance. Should there be any deficiencies, the FFA-SW/Intern will have one week to bring the file into compliance.

2. Child #1's NSP provided information pertaining to brother, Child #2. Child #1's IEP request was documented but not the efforts on getting the request approved or if still pending in the last 9 months. Psychosocial assessment status is not provided and has been pending for months also. Children's records do not provide any reference to the ISFC rate/Service level or the need for continuing or modifying level and services. Children's records do not make reference to education achievements or status was minimal at best. No mention of grades in NSP or attendance:

- a) Prior to this Contract Compliance Review, the agency's FFA-SWs and interns believed they were completing NSPs that met the standards and expectations of the SOW.
- b) The agency's FFA-Supervisor conducted a Social Work Training for all FFA-SW staff and interns on September 11, 2019, where all FFA-SW and interns were retrained on how to develop a comprehensive NSP to include the importance of individualizing each NSP to reflect the details of the particular case and services being provided, including but not limited to: rate/service level, educational needs, psychosocial assessment status, and progress in the identified goals section. *(See Attached Exhibit 10 (22 pages) (pg #7)*
 - i. The FFA-SWs signed the sign-in-sheet to show that they were present for the training. *(See Attached Exhibit 5 (1 page))*
 - ii. The FFA-SW assigned to the focused ISFC child #1 has removed all information pertaining to his brother (child #2) in the 04/09/19 NSP. *(See Attached Exhibit 14 (1 page); Exhibit 15 (1 page) and Exhibit 16 (1 page))*
 - iii. The FFA-SW assigned to the focused ISFC child #1 has removed all information pertaining to his brother (child #2) in the 07/09/19 NSP. *(See Attached Exhibit 17 (1 page); Exhibit 18 1 page) and Exhibit 19 (1 page))*
 - iv. The FFA-SW assigned to the focused ISFC child #1 has added an educational goal to the 07/09/19 NSP as an addendum to indicate the efforts made on getting the IEP request approved. *(See Attached Exhibit 19 (1 page) and Exhibit 20 (1 page))*
 - v. The FFA-SW assigned to the focused ISFC child #2 has added a Psychological goal to the 06/15/19 NSP as an addendum to indicate the request for a psychological evaluation made during the 05/28/19 CFTM. *(See Attached Exhibit 21 (1 page); Exhibit 22 (1 page) and Exhibit 23 (1 page))*
 - vi. The FFA-SW assigned to the focused ISFC child #2 has added an addendum to the Achieved Outcome goal page of the 09/15/19 NSP to indicate that the Psychological goal for the Psychological Evaluation has been met on 09/11/19. *(See*

Attached Exhibit 24 (1 page); Exhibit 25 1 page) and Exhibit 26 (1 page))

- vii. The FFA-SW assigned to the focused ISFC child #1 has added an addendum to the Adjustment of Placement portion of the most current NSP (child #1-07/09/19) to indicate a statement that the child continues to be eligible for the ISFC rate and services based on his current behaviors and needs which are addressed during each home visit and CFTM. **(See Attached Exhibit 17 (1 page) and Exhibit 19 (1 page))**
- viii. The FFA-SW assigned to the focused ISFC child #2 has added an addendum to the Adjustment of Placement portion of the most current NSP (child #2-09/15/19) to indicate a statement that the child continues to be eligible for the ISFC rate and services based on his current behaviors and needs which are addressed during each home visit and CFTM. **(See Attached Exhibit 24 (1 page) and Exhibit 26 (1 page))**
- ix. The FFA-SW assigned to the focused ISFC child #1 has added an addendum to the Educational portion of the most current NSP (child #1-07/09/19) to indicate the grades and attendance during that reporting period. **(See Attached Exhibit 17 (1 page); Exhibit 27 (1 page) and Exhibit 19 (1 page))**
- x. The FFA-SW assigned to the focused ISFC child #2 has added an addendum to the Educational portion of the most current NSP (child #2-09/15/19) to indicate the grades and attendance during that reporting period. **(See Attached Exhibit 24 (1 page); Exhibit 28 (1 page) and Exhibit 26 (1 page))**
- c) The FFA-SWs and interns are responsible for ensuring that they must include the updated status for all pending services in the NSP including but not limited to: the rate/service level, the educational needs (grades, IEPs and attendance), and the psychosocial assessment.
- d) The FFA-SWs and interns are responsible for ensuring that the NSP address the educational achievements such as the grades of the child/NMD.
- e) Along with the Child and Family Team, the FFA-SWs and interns are responsible for developing comprehensive goals and the interventions that are utilized throughout the NSP's reporting period. If any goal, including the rate/service level, the educational needs (grades and attendance), and the psychosocial assessment requires additional time passed the three-month NSP period, the FFA-SWs and interns shall document their new interventions that would address how they are working towards accomplishing this goal in the modification portion of the NSP goals. The modification can include but is not limited to who will be responsible for seeing how the new intervention will be implemented and when (projection) the goal will be met.
- f) The agency's FFA-Supervisor will require that all FFA-SWs and interns submit the completed NSP to the FFA-Supervisor one week prior to

the date it is due to the Children's Social Worker (CSW) in order to review and ensure that the following content is addressed: the importance of individualizing each NSP to reflect the details of the particular case and services being provided, including but not limited to: rate/service level, educational needs, psychosocial assessment status, and progress in the identified goals section.

- g) In addition to the direct review from the FFA-Supervisor, the agency has implemented a new Quarterly Audit procedure which will require each FFA staff to audit three Children/NMD case files for compliance. During the audit review the FFA staff will utilize the Child/NMD Quarterly Audit Checklist. If there are any compliance issues that are found during the audit such as: missing rate/service level information, educational needs, psychosocial assessment status, and progress in the identified goals section, the FFA staff will document it on the note section of the Child/NMD Quarterly Checklist form. **(See Attached Exhibit 13 (3 pages))**
- h) The Child/NMD Quarterly Checklist forms will be reviewed with the assigned FFA-SW/Intern of the case and RF to ensure that any deficiencies are corrected within one week.
- i) Once a child/NMD is discharged from the agency, the FFA-Supervisor will audit the file during the next weekly supervision to ensure all documentation is in compliance. Should there be any deficiencies, the FFA-SW/Intern will have one week to bring the file into compliance.

III. CORE SERVICES:

1. Children's NSPs reported school disruptions affected their academic progress; however, there were no Educational goals to address this situation, efforts to obtain tutoring, nor was the progress documented:
 - a) Prior to this Contract Compliance Review, the agency's FFA-SWs and interns believed they were completing NSPs that met the standards and expectations of the SOW. While these issues were addressed as a part of the CFTMs, it had not been included in the NSP.
 - b) The agency's FFA-Supervisor conducted a Social Work Training for all FFA-SW staff and interns on September 11, 2019, where all FFA-SW and interns were retrained on how to develop a comprehensive SMART Goal in reference to the educational needs, tutoring services & other support services, attendance and progress. **(See Attached Exhibit 10 (22 pages) (pg. #12))**
 - i. The FFA-SWs signed the sign-in-sheet to show that they were present for the training. **(See Attached Exhibit 5 (1 page))**
 - ii. The FFA-SW assigned to the focused ISFC child #2 has added an addendum to the Educational portion of the most current NSP (child #2-09/15/19) to indicate an educational goal of obtaining tutoring services. **(See Attached Exhibit 24 (1 page)); Exhibit 29 (2 pages) and Exhibit 26 (1 page))**

- c) The agency's FFA-Supervisor will require that all FFA-SWs and interns submit the completed NSP to the FFA-Supervisor one week prior to the date it is due to the Children's Social Worker (CSW) in order to review and ensure that the following content is addressed: the educational needs, tutoring services & other support services, attendance and progress.
 - d) In addition to the direct review from the FFA-Supervisor, the agency has implemented a new Quarterly Audit procedure which will require each FFA staff to audit three Children/NMD case files for compliance. During the audit review the FFA staff will utilize the Child/NMD Quarterly Audit Checklist. If there are any compliance issues that are found during the audit such as: missing information pertaining to the child's/NMD's educational needs, tutoring services & other support services, attendance and progress, the FFA staff will document it on the note section of the Child/NMD Quarterly Checklist form. **(See Attached Exhibit 13 (3 pages))**
 - e) The Child/NMD Quarterly Checklist forms will be reviewed with the assigned FFA-SW/Intern of the case and RF to ensure that any deficiencies are corrected within one week.
 - f) Once a child/NMD is discharged from the agency, the FFA-Supervisor will audit the file during the next weekly supervision to ensure all documentation is in compliance. Should there be any deficiencies, the FFA-SW/Intern will have one week to bring the file into compliance.
2. The efforts to maintain children in their school of origin or reasons why they were changed to a new school district were not documented:
- a) When the FFA-Supervisor came to the agency the children of care were not of school age. Therefore, the training was not focused on the children remaining in their school of origin. Accordingly, many months later when children came into care who were school age, this requirement was missed when it came to develop a comprehensive NSP.
 - b) The agency's FFA-Supervisor conducted a Social Work Training for all FFA-SW staff and interns on September 11, 2019, where all FFA-SW and interns were retrained on how to develop a comprehensive NSP to include the importance of addressing school of origin considerations such as documenting efforts to maintain a child in their school of origin or reasons why they were changed to a new school district. **(See Attached Exhibit 10 (22 pages) (pg. #12 & 13)**
 - i. The FFA-SWs and interns signed the sign-in-sheet to show that they were present for the training. **(See Attached Exhibit 5 (1 page))**
 - ii. All FFA-SWs and interns understand that placed children are required by law to remain in their school of origin. However, if they are not able to, that reason and all best efforts made for them to

- remain in their school of origin is to be documented in the Educational portion of the NSP.
- iii. The FFA-SW assigned to the focused ISFC child #1 has added an addendum to the Educational portion of the most current NSP (child #1-07/09/19) to indicate the reason the child did not remain in the school of origin. *(See Attached Exhibit 17 (1 page)); Exhibit 29 (1 page) and Exhibit 19 (1 page)*
 - iv. The FFA-SW assigned to the focused ISFC child #2 has added an addendum to the Educational portion of the most current NSP (child #2-09/15/19) to indicate the reason the child did not remain in the school of origin. *(See Attached Exhibit 21 (1 page)); Exhibit 28 (1 page) and Exhibit 23 (1 page)*
- c) The agency's FFA-Supervisor will require that all FFA-SWs and interns submit the completed NSP to the FFA-Supervisor one week prior to the date it is due to the Children's Social Worker (CSW) in order to review and ensure that the NSP includes all pertinent information pertaining to school enrollment.
 - d) In addition to the direct review from the FFA-Supervisor, the agency has implemented a new Quarterly Audit procedure which will require each FFA staff to audit three Children/NMD case files for compliance. During the audit review the FFA staff will utilize the Child/NMD Quarterly Audit Checklist. If there are any compliance issues that are found during the audit such as: lack of reason for a child/NMD not remaining in their school of origin, the FFA staff will document it on the note section of the Child/NMD Quarterly Checklist form. *(See Attached Exhibit 13 (3 pages))*
 - e) The Child/NMD Quarterly Checklist forms will be reviewed with the assigned FFA-SW/Intern of the case and RF to ensure that any deficiencies are corrected within one week.
 - f) Once a child/NMD is discharged from the agency, the FFA-Supervisor will audit the file during the next weekly supervision to ensure all documentation is in compliance. Should there be any deficiencies, the FFA-SW/Intern will have one week to bring the file into compliance.

IV. FACILITY & ENVIRONMENT:

1. Disinfectant and cleaning solutions were accessible to children and not properly stored:
 - a) While the Home Safety Inspection report addressed these requirements prior to being approved and on a quarterly basis, it is evident that this deficiency was a human error/oversight.
 - b) Due to limited time of all SWs and intern's being available all at once, the FFA-Supervisor retrained each FFA-SW and intern during their individual supervision during the week of October 7, 2019 on how to conduct a thorough home inspection with the focus on ensuring that

dangerous items including but not limited to disinfectant and cleaning solutions are not accessible to children and are properly stored.

- i. Each FFA-SW and intern signed an acknowledgement form to acknowledge that they received and understand how to conduct a through home inspection on a quarterly basis. *(See Attached Exhibit 30 (10 pages))*
- c) All active RFs were retrained on the requirement of ensuring that they appropriately utilize their reasonable and prudent parent standard with making disinfectant and cleaning solution accessible to NMD and properly storing them to protect children. *(See Attached Exhibit 31 (1 page) and Exhibit 32 (1 page))*
 - i. The RFs signed an acknowledgement form to acknowledge that they received and understand the SIR training. *(See Attached Exhibit 33 (12 pages))*
 - b) Vista Del Mar will retrain all RFs who currently do not have a placement during our quarterly home visit in November 2019 on the requirements of ensuring that they appropriately utilize their reasonable and prudent parent standard with making disinfectant and cleaning solution accessible to NMD and properly storing them to protect children. If the RF receives placement(s) prior to the November 2019 training date, the RF will be trained on the disinfectant and cleaning solutions policy at time of placement. The acknowledgement form will be provided to the Contract Compliance Reviewer during the 90-day Review.

Thank you for your consideration in this matter. If you have any questions, please contact me directly at (310) 836-1223 ext. 512.

Sincerely,



Carsha Brooks, MSW, ACSW
Foster Family Agency Social Work Supervisor