



County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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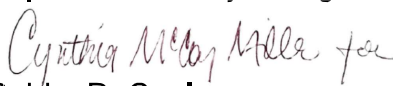
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March 12, 2021

To: Supervisor Hilda L. Solis, Chair
Supervisor Holly J. Mitchell
Supervisor Sheila Kuehl
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Supervisor Kathryn Barger

From: 
Bobby D. Cagle
Director

OLIVE CREST INTENSIVE SERVICES FOSTER CARE FOSTER FAMILY AGENCY FOR CHILDREN WITH SPECIAL HEALTHCARE NEEDS CONTRACT COMPLIANCE REVIEW

REVIEW OF REPORT

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a virtual Contract Compliance Review of the Olive Crest Intensive Services Foster Care (ISFC) Foster Family Agency (FFA) for Children with Special Healthcare Needs (SHCN) (the Contractor) in June 2020. The Contractor has four offices: one located in the Fourth Supervisorial District; one located in the Fifth Supervisorial District; one in Riverside County and one in Orange County. All offices provide 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 1
PRIORITY 3 0

"To Enrich Lives Through Effective and Caring Service"

CAD conducted a virtual Contract Compliance Assessment review of the Contractor's compliance within the following applicable areas of their ISFC-FFA SHCN contract: General Contract Requirements; Record Keeping; Specialized Resource Family Homes and Parents; Training; Respite Care; Needs and Services Plans; Child and Family Team Meetings; Safety; Child Hospitalizations; Core Service; Personal Rights and Needs; Discharge Planning; Staff Qualifications and Requirements; Facility and Environment; and Vehicles.

The Contractor was in full compliance with 13 of 15 applicable areas of CAD's Contract Compliance Review: General Contract Requirements; Record Keeping; Specialized Resource Family Homes and Parents; Training; Respite Care; Needs and Services Plans; Child and Family Team Meetings; Safety; Child Hospitalizations; Core Service; Personal Rights and Needs; Discharge Planning; and Staff Qualifications and Requirements.

For the purpose of this review, one DCFS placed child's file was selected for the sample. CAD reviewed the file of the selected child to assess the level of care and services this child received. The child is pre-verbal and was not interviewed. An additional child's file was reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed one Resource Family Home (RFH) file and four staff files for compliance with Title 22 Regulations and County contract requirements. CAD also conducted virtual interviews with staff and the Resource Family Parents via telephone and video conferencing. To assess the quality of care and supervision provided to the placed children, DCFS conducted virtual site visits at the Contractor's location and the RFH.

CAD noted findings in the areas of:

Priority 1

- Facility and Environment
 - The common quarters of the ISFC home did not meet all required health and safety standards. The fire extinguisher was not properly or fully charged.

Priority 2

- Vehicles
 - The vehicles used to transport children were missing proof of insurance at the time of inspection.

On October 8, 2020, the DCFS CAD Children Services Administrators I and II, and the 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 ISFC-FFA SHCN representatives.

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

The Contractor provided the attached approved Corrective Action Plan addressing the noted deficiencies 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:KDR
LTI:nw

Attachments

c: Fesia Davenport, Chief Executive Officer
Arlene Barrera, Auditor-Controller
Adolfo Gonzales, Chief Probation Officer
Brandon Nichols, Chief Deputy Probation Officer,
Public Information Office
Audit Committee
Donald A. Verleur II, Chief Executive Officer, Olive Crest
Kellee Coleman, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division



November 11, 2020

Nicole Whaley
Department of Children and Family Services
Contracts Administration Division
Contract Compliance Section
3530 Wilshire Blvd., 4th Floor, Cubicle #107
Los Angeles, CA 90010

Re: Corrective Action Plan for Foster Family Agency- ISFC SHCN Review (June 2020)

Dear Ms. Whaley,

Per your request, we submit the following as our Corrective Action Plan (CAP) consequent to the finding of the Foster Family Agency Review Exit Summary for our Intensive Services Foster Care (Special Health Care Needs) issued on October 8, 2020 at the Exit Review.

The following CAP is therefore submitted for the Department's review:

Item/Area not found in compliance:

Section XIV: Facility and Environment:

Question 56: The Common Quarters of the SRFH met all required health and safety standards.

Agency Response: RFH #1 at the time of the virtual walk through on 09/08/2020, the fire extinguisher was not fully charged. On 9/14/20, the RFH emailed the receipt and picture of a new fire extinguisher was purchased.

In order to ensure compliance with the contract in the future, staff will inspect the fire extinguisher to ensure safety compliance at the time of each 3-month inspection. All staff will be retrained to adhere by this new procedure by 12/1/20. Documents showing evidence of this training will be provided to DCFS by 12/2/20.

Section XV: Vehicles

Question 60: The vehicles used to transport the children met all safety requirements as outlined in Title 22, 80074(c) & 89374(a), & SOW, Part C, 1.2.5.

Agency's Response: At the time of the virtual walk-through on 09/08/2020, RFP #1 was unable to provide proof of insurance for both vehicles used by the family. On 10/14/2020, the agency provided documentation of the insurance in the RFP car.

In order to ensure compliance with the contract in the future, staff will verify that a copy of the auto insurance is present in the vehicle at the time of each 3-month inspection. All staff will be retrained to adhere by this new procedure by 12/1/20. Documents showing evidence of this training will be provided to DCFS by 12/2/20.

Respectfully,

A handwritten signature in black ink, appearing to read 'Ellie Tao', with a stylized flourish at the end.

Ellie Tao, MSW
Supervising Case Manager
LA Region
818.630.7480 ext. 6317