

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

July 28, 2021

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To: Supervisor Hilda L. Solis, Chair

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From: Bobby D. Cagle

Director

EXTRAORDINARY FAMILIES FOSTER FAMILY AGENCY 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 Extraordinary Families Foster Family Agency (the Contractor) in December 2020. The Contractor has one office located in the Second 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



CAD conducted a virtual 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; 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 9 of 11 applicable areas of CAD's Contract Compliance Review: General Contract Requirements; Resource Family Home Requirements; Engagement and Teamwork; Needs and Services Plans; Permanency; 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, six DCFS placed children were selected for the sample. CAD selected the children for this sample review on November 10, 2020. Due to the onset of the COVID-19 pandemic, the entrance conference was delayed once, from December 3, 2020 to December 10, 2020. CAD reviewed the files of the six selected children, one child was virtually interviewed to assess the level of care and services received, and five children (ages 5 months, two - 6 months, and two - 1 year) were too young to be interviewed and were virtually observed to be clean, well-groomed and healthy. An additional four discharged children files were also reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed three RFH files and five staff files for compliance with Title 22 Regulations and County contract requirements. CAD also conducted telephonic interviews with staff and the Resource Family Parents. To assess the quality of care and supervision provided to the placed children, DCFS also conducted virtual site visits at the Contractor's location and the RFHs.

CAD noted findings in the areas of:

Priority 1

- Facility and Environment
 - A functioning smoke detector was not installed in the hallways of all sleeping areas.

Priority 2

- Personnel Files
 - Personnel did not sign the criminal record statement prior to working with children.

Each Supervisor July 28, 2021 Page 3

> Personnel did not receive all required medical clearances within one year prior to hire date or within seven days of hire.

On January 28, 2021, the DCFS CAD Children Services Administrators I and II and the Outof-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 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
Public Information Office
Audit Committee
Barnaby Murff, Chief Executive Officer, Extraordinary Families
Kellee Coleman, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division



Board of Directors

February 26, 2021

Leonardo Bolanos Northern Trust **Board Chair**

Los Angeles County Department of Children and Family Services Contract Administration Division 3530 Wilshire Blvd. 4th Floor, Cubicle #107

Brooke Halsband Hilton & Hyland Secretary

Los Angeles, CA 90010

Dawn Bridges

Attention: Nicole Whaley, LCSW, LPCC

KTGY Treasurer

Barnaby Murff Chief Executive Officer **Regarding: Monitoring Review Corrective Action Plan**

Fenton Bailey World of Wonder Extraordinary Families is submitting the following Corrective Action Plan (CAP) to address the areas identified as needing improvements in the Foster Family Agency Monitoring Review Field Exit Summary, dated January 28, 2021.

Sarah Boone-Perez, LCSW

I. **Facility and Environment**

Kane County Hospital

a. Finding: Re: item #15, RFP #2: The smoke detector located in the hallway of the resource family home (RFH) was not working at the time of the inspection on January 7, 2021.

Jeffrey Bowyer-Chapman Actor

Corrective Action: To correct and prevent this deficiency in the future, Extraordinary Families will/has:

Angela Bromstad Executive Producer

i. During the inspection described above, the available resource parent was unable to activate the smoke detector in question. When her husband arrived home later that same day, he was able to activate the alarm without issue. The device was also tested the night prior on January 6, 2021 with the assigned FFA/Adoption Social Worker Fesseha Tessema without issue. Further, On February 11, 2021, County Monitor Nicole Whaley reassessed the smoke detector and confirmed it was operating as required. On January 7, 2021, FFA/Adoption Social Worker Tessema discussed the importance of both parents understanding how to test and operate the smoke detectors in the home, to test the detectors on a weekly basis, and to replace the detectors and/or batteries as necessary.

Jessica Kastner

ii. On Wednesday, February 24, 2021, FFA/Adoption Social Work Supervisor Amanda Silvers reviewed the CAP with all FFA/Adoption Social Workers. Please refer to the attached meeting agenda and attendance log.

Advokids

iii. FFA/Adoption Social Workers will continue to conduct quarterly home

Miguel Sanchez Lascurain TIVO

> inspections as required to assist families in maintaining compliance with all regulations and standards set forth by DCFS, CCL, and Extraordinary Families.

Francesca Orsi

iv. FFA/Adoption Social Work Supervisor Silvers will continue to meet with all FFA/Adoption Social Workers in both weekly individual supervision and bimonthly group team meetings to discuss RFH compliance.

Jocelyn Tetel Skirball Cultural Center

Steve Vai Musician, Composer

Michelle Visage Television Host, Media Personality

Tiffany White Stanton Costume Designer

II. Personnel Files

a. Finding: Re: item #73a, Staff #4: The identified staff member did not sign the criminal record statement prior to or on their date of hire.

Corrective Action: To correct and prevent this deficiency in the future, Extraordinary Families will/has:

- i. Prior to the start date of all new hires, Operations Manager Mark Zipoli will ensure all onboarding documentation is completed as required by reviewing all documentation, which includes signed criminal record statements, and completing the Pre-Onboarding Applicant Verification Checklist (attached). CEO Barnaby Murff must review, approve, and sign the completed checklist. A candidate's start date cannot be prior to the signature date of verification on the checklist.
- ii. On February 25, 2021, Quality Assurance Manager Bonnie Sharpe reviewed the CAP and Pre-Onboarding Applicant Verification Checklist requirement with Operations Manager Zipoli.
- **b. Findings:** Re: #74a, Staff #2: The identified staff member's medical clearance was dated April 4, 2017, approximately two months after the staff member's date of hire on January 25, 2017.

Corrective Action: To correct and prevent this deficiency in the future, Extraordinary Families will/has:

- i. Prior to the start date of all new hires, Operations Manager Zipoli will ensure all onboarding documentation is completed as required by reviewing all documentation, which includes signed medical clearances, and completing the Pre-Onboarding Applicant Verification Checklist (attached). CEO Murff must review, approve, and sign the completed checklist. A candidate's start date cannot be prior to the signature date of verification on the checklist.
- ii. On February 25, 2021, Quality Assurance Manager Bonnie Sharpe reviewed the CAP and Pre-Onboarding Applicant Verification Checklist requirement with Operations Manager Zipoli.

Extraordinary Families would like to thank DCFS for the feedback provided in this FFA Monitoring Review Exit Summary. We appreciate the opportunity to implement continuous improvements and are very proud of the work we do and our longstanding track record of success. We found the monitoring review process to be collaborative and supportive and would like to thank you for conducting our review in such a professional manner.

Sincerely,

Kayla Wright, Ed.D. Director of Programs

Extraordinary Families

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