



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

Board of Supervisors

HILDA L. SOLIS
First District

MARK RIDLEY-THOMAS
Second District

SHEILA KUEHL
Third District

JANICE HAHN
Fourth District

KATHRYN BARGER
Fifth District

October 20, 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

KOREAN AMERICAN 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 Korean American Family Services Foster Family Agency (the Contractor) in June 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, children placed by other counties and Non-Minor Dependents.

Key Outcomes

Table with 4 rows: NUMBER OF PRIORITY FINDINGS, PRIORITY 1 (1), PRIORITY 2 (1), PRIORITY 3 (0)

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; Facility and Environment; Engagement and Teamwork; Permanency; Education & Independent Living Program Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; and Personal Needs/Survival and Economic Well-Being.

"To Enrich Lives Through Effective and Caring Service"

Each Supervisor
October 20, 2020
Page 2

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 reviewed the files of the six selected children and telephonically interviewed four of the children to assess the level of care and services they received, two were pre-verbal. Additionally, four discharged children's files were reviewed to assess the FFA'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 telephonic interviews with staff and the Resource Family Parents. 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 RFHs.

CAD noted findings in the areas of:

Priority 1

- o Needs and Services Plans (NSPs)
 - NSPs were not completed accurately and timely.

Priority 2

- o Personnel Files
 - Staff did not receive all required medical clearances.

On August 13, 2020, the DCFS CAD Children Services Administrator I and II and the 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 Aldo Marin, Board Relations Manager, at (213) 351-5530.

BDC:KDR
LTI:yw

Attachments

- c:
- Fesia Davenport, Acting Chief Executive Officer
 - Arlene Barrera, Auditor-Controller
 - Raymond Leyva, Interim Chief Probation Officer
 - Brandon Nichols, Chief Deputy Probation Officer
 - Public Information Office
 - Audit Committee
 - Connie Chung Joe, Executive Director, Korean American Family Services
 - Kellee Coleman, Regional Manager, Community Care Licensing Division
 - Monique Marshall-Turner, Regional Manager, Community Care Licensing Division



September 10, 2020

Yasmeen Williams, Children Services Administrator I
Department of Children and Family Services
Contracts Administration Division
3530 Wilshire Blvd. 4th Floor, #050
Los Angeles, CA 90010

Re: Korean American Families Services (KFAM) Contract Compliance Review FY 2019-2020
Summary of Findings – Corrective Action Plan

Dear Ms. Williams,

As per our Amended FFA Monitoring Review Exit Summary below please find the Corrective Action Plan (CAP) for the two (2) findings. The CAP shall include the nature of the deficiency, including cause, a plan to correct the deficiency, and when the deficiency will be corrected.

FINDING #1:

Nature of Deficiency:

V. Needs and Services Plans: Prescribed non-psychotropic medication not documented in the “Medical/Dental/Health” section of the NSP on page 5.

Cause of Deficiency: Human Error. (a) Documentation was completed in another section on the NSP and FFASW did not realize it wasn’t documented in the second place (b) Medication information was not from the current NSP quarter and therefore FFASW was unaware it should be documented.

- a) Medication was documented under the section on the NSP “Medical/Physical/Dental Health Clinical Visits” on page 6. However, it should have also been documented on page 5.
- b) There was a HUB medical form in the file dated 10/30/2019, which was an appointment that occurred 2 ½ months before youth joined a KFAM family. There were medications listed on this form to be taken on an as needed basis for allergies. They were not documented on page 5, under section “Medical/Dental/Health.”

Plan to Correct Deficiency: The FFA Administrator, Robyn Harrod, will review this finding with all FFA Social Workers who complete NSP’s so they have a better understanding of the



different sections on the NSP where medical information needs to be documented. Approving staff will pay special attention to these sections when signing off on NSPs.

Completion Date: NSP training to all social worker staff. Training was completed at the staff meeting held on Sept. 3, 2020.

FINDING #2:

Nature of Deficiency:

XI. Personnel Files: Medical clearance did not occur within the timeframe

Cause of Deficiency: The *New Hire Checklist* for all KFAM staff did not reflect some of the specific requirements for the staff of the Foster Family Agency. There are some FFA requirements that are needed in addition to the requirements for other KFAM employees.

Plan to Correct Deficiency: The KFAM *New Hire Checklist* has been amended to include the specific FFA requirements for Medical, TB, and Live Scan personnel clearances. Katherine Yeom, Executive Director, will start using the new checklist immediately for all new hires.

Completion Date: The FFA Administrator, Robyn Harrod reviewed the changes with Executive Director, Katherine Yeom on 8/31/2020. The *New Hire Checklist* has been uploaded onto the KFAM shared documents drive and added in to the agency's Human Resources Onboarding procedures. See attached for updated *New Hire Checklist*.

Please feel free to contact me if you need any further information.

Sincerely,

A handwritten signature in cursive script that reads "Robyn Harrod, LCSW".

Robyn Harrod, LCSW
FFA Administrator
213-590-8498
rharrod@KFAMLA.org