



County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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

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April 9, 2021

To: Supervisor Hilda L. Solis, Chair
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Supervisor Kathryn Barger

From: 
Bobby D. Cagle
Director

VISTA DEL MAR CHILD AND FAMILY SERVICES COMMUNITY TREATMENT FACILITY CONTRACT COMPLIANCE REVIEW

REVIEW OF REPORT

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of Vista Del Mar Child and Family Services Community Treatment Facility (CTF) (the Contractor) in October 2020. The Contractor has an office located in the Second Supervisorial District. The site 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 2 |
| 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: General Contract Requirements; Facility and Environment; Engagement and Teamwork; Needs and Services Plans; Permanency and Transition Services; 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 7 of 10 applicable areas of CAD's Contract Compliance Review: Facility and Environment; Engagement and Teamwork; Permanency and Transition Services; 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, five DCFS placed children were selected for the sample. CAD reviewed the files of the five selected children and telephonically interviewed three of the children to assess the level of care and services they received; two children refused to be interviewed. An additional three discharged children files were reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed five staff files for compliance with Title 22 Regulations and County contract requirements. CAD also conducted telephonic interviews with staff. To assess the quality of care and supervision provided to the placed children and foster youth, DCFS also conducted virtual site visits.

CAD noted findings in the areas of:

Priority 1

- General Contract Requirements
 - Sign in/out logs did not document visits properly.
- Needs and Services Plans (NSPs)
 - NSPs were not comprehensive and accurate.

Priority 2

- Personnel Files
 - Personnel did not receive all initial trainings and orientations.

On December 9, 2020, the DCFS CAD Children Services Administrators I and II and the Out-of-Home Care Management Division Quality Assurance Specialist, held an exit conference with the Contractor's representatives.

Each Supervisor
April 9, 2021
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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 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:slr

Attachments

c: Fesia Davenport, Chief Executive Officer
Arlene Barrera, Auditor-Controller
Adolfo Gonzalez, Chief Probation Officer
Brandon Nichols, Chief Deputy Probation Officer
Public Information Office
Audit Committee
Lena Wilson, President & Chief Executive Officer, Vista Del Mar Child & 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



VISTA DEL MAR
CHILD AND FAMILY SERVICES

January 13, 2021

Sherry Rolls, CSA I
Department of Children and Family Services
Contracts Administration Division
3530 Wilshire Blvd. 4th Floor
Los Angeles, California 90010

RE: Review Date: 10/2020
Exit interview Date: 12/09/2020
CORRECTIVE ACTION PLAN, CTF (Special Care Facility)
Amended 02-24-2021

Dear Ms. Rolls:

I am providing the Contracts Administration Division with a Corrective Action Plan (CAP) as requested, regarding the findings identified during the monitoring of our Community Treatment Facility (CTF).

FINAL MONITORING REVIEW FIELD EXIT SUMMARY 01-16-2021

1. General Contract Requirements

#4-Detailed sign in/sign out logs are maintained

There were 3 visitors who did not sign out in log book although all signed in.

Plan for Correction:

CTF Unit Director reviewed the sign in and sign out process with her direct care staff on 01/05/2021. Please see attached email sent to all unit staff. Staff are to remind visitors that they must sign out when the visit is over. Staff to bring the sign in/sign out book to visitors for signature if they choose not to enter the building and remain outside for their visit.

In addition, the Direct Care Staff training manual has been revised to specifically note that direct care staff shall seek out visitors directly as needed, to sign the visitation log at the beginning and end of each visit. Staff to bring the sign in/sign out book to visitors for signature if they choose not to enter the building and remain outside for their visit. CTF Direct Care Supervisors to monitor visitation log in books on a weekly basis to ensure that protocol is being adhered to. They

will follow up as indicated with specific staff for correction as needed. This updated process became effective on 01/05/2021.

IV. Needs and Services Plan

16. NSPs were completed accurately and on time.

16.2 NSPs were comprehensive and accurate.

- One child was in placement for over a year, goals are all the same, child has had NO achievements in the past 14 months.
- Another child's goals included the same reason for medication in the initial NSP. Modifying a goals in an initial NSP is not appropriate as goals just began.

Plan for Correction:

CTF Unit Director met with unit clinicians on 01/04/2021 to review with them the importance of individualizing reasons for goal modifications when completing NSPs along with reminding them that an initial NSP would not have goal modifications since the NSP has just been developed. CTF Program Statement as been revised to better reflect the requirement of being comprehensive and accurate. Please see attached training outline and sign in sheet. For checks and balances, clinical case coordinator to review NSPs prior to filing to ensure that the goals/objectives are comprehensive and accurate and will alert CTF Unit Director and assigned clinician for correction as indicated. This change was implemented effective 01/04/2021.

16.3 The child/NMD signed the NSPs.

- One child did not sign the NSP and applicable reason for lack of signature was not identified.

Plan for Correction:

CTF Unit Director met with unit clinicians on 01/04/2021 to review with them the requirement of having youth sign the NSP, even during pandemic time when the clinician may have met with the youth telephonically to review the NSP. Please see attached training outline and sign in sheet.

X. Personnel Files

83. Personnel received initial training and orientation.

83.5 Personnel received LGBTQ training

- There was no evidence that 2 staff attended this training during the initial year of hire.

Plan of Correction:

Senior VP met with Coordinator of Direct Care Staff Training on 01/04/2021, to review training timing and protocols. Coordinator of Direct Care Staff Training to review staff's training log at least quarterly, to ensure that all required training has been met and that hire date is also correct. Please see attached training sign in sheet and outline. This updated protocol effective 01/04/2021.

83.6 Personnel received 8 hours of reproductive and sexual health training.

- There was no documentation supporting that one staff completed this required training during initial year of hire.

Plan of Correction:

Senior VP met with Coordinator of Direct Care Staff Training on 01/04/2021, to review reproductive and sexual health training timing/documentation. Coordinator of Direct Care Staff Training to review staff's training log quarterly to ensure that all required training has been met and that hire date is also correct. Please see attached training sign in sheet and outline. This updated protocol effective 01/04/2021

Thank you again for your collaborative and supportive approach.

Sincerely,



Amy Jaffe, LCSW
Senior Vice President of Intensive Intervention Programs

Cc: Manyalhal Adenow, DCFS Quality Assurance/OHCMD
Suzie Jeon, LCSW, Handler Unit Director
Maricela Morales, Quality Assurance and EHRS Manager
Joan Gregory, Coordinator of Direct Care Staff Training
Ali Bhatti, CSA II

From: Renee Capeloto <ReneeCapeloto@vistadelmar.org>
Sent: Tuesday, January 5, 2021 8:30AM
To: SCF <SCF@vistadelmar.org>
Subject: Visitor Sign in and Sign out protocols

Dear Special Care Staff:

Please remember to remind visitors that they must sign out when the visit is over. Staff shall bring the sign in/sign out book to visitors for signature if they choose not to enter the building and remain outside for their visit.

Please see me our a YDC Supervisor if you have further questions regarding this process.

Renee Capeloto, LCSW
SCF Unit Director

3200 Motor Avenue
Los Angeles, CA 90034
Email: reneecapeloto@vistadelmar.org
T: 310-836-1223 ext. 149

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Need and Service Plan Review

- NSP's to be comprehensive and accurate.
- Goals to reflect individualized reasons for goal modifications and adjustments
- Clearly identify reason for change in frequency
- Modifying goals when indicated with up to date (new) comprehensive and clear language
- Signatures required (even during pandemic)

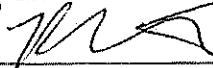
VISTA DEL MAR IN-SERVICE TRAINING ROSTER

Date: 12/20/20

Time: 1-2 pm




Title: Needs + service Plan (NSP) CAP + Review

Synopsis of Course: See attached

Instructor: Renee Caputo 

Print and Sign Name

EMPLOYEE MUST SIGN-IN AND ATTEND ENTIRE TRAINING TO RECEIVE CREDIT

| Name (please print) | Signature | Title | Unit/Department |
|---------------------|---|-----------|-----------------|
| 1. Elizabeth Kroll |  | Clinician | CTF |
| 2. Hannah Bailey |  | clinician | CTF |
| 3. Eliana Stern |  | Clinician | CTF |
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PLEASE SIGN ONLY ONE TIME PER TRAINING

*40 hours in-service training per year required

VISTA DEL MAR IN-SERVICE TRAINING ROSTER

Date: **January 4, 2021**

Time: **9:00am – 10:00am**

Title: **"Personnel Training Requirements"**

CTF

Synopsis of Course: *See attached*

Instructor(s) Names & Signatures: **Amy Jaffe, S-VP of Intensive Intervention Programs**

Amy Jaffe

| Name (please print) | Signature | Title | Unit/Department |
|------------------------|---------------------|-------------------------------------|-----------------|
| 1. Joan Gregory | <i>Joan Gregory</i> | <i>Training Coordinator - Admin</i> | |
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PLEASE SIGN ONLY ONE TIME PER TRAINING

*40 hours in-service training per year required

CTF Training Review-
01/04/2021

Personal Files

- Coordinator of Direct Care Staff Training to review staff's training log quarterly to ensure that all time frame requirements have been met. Follow up with staff and his/her supervisor as indicated.
- Prior to orientation process completion, Ms. Gregory to review Orientation Training requirements check list to ensure that each staff is current and to make corrections as needed within time frame.
- Ms. Gregory to collaborate with HR to ensure that residential hire date reflects date staff started in residential unit rather than date that they may have started working in another department at Vista Del Mar.