



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

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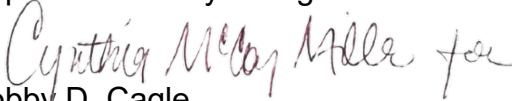
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September 6, 2021

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

From: 
Bobby D. Cagle
Director

**HANNA'S HOUSE DBA HANNAH'S CHILDREN'S HOMES
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 Hanna's House dba Hannah's Children's Homes Foster Family Agency (the Contractor) in March 2021. The Contractor has three offices: one in the First Supervisorial District; one in San Bernardino County; and one in Orange County. The 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 2
PRIORITY 2 0
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 10 of 11 applicable areas of CAD's Contract Compliance Review: General Contract Requirements; RFH 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; Personal Needs/Survival and Economic Well-Being; and Personnel Files.

For the purpose of this review, 10 DCFS placed children were selected for the sample. CAD reviewed the files of the 10 selected children and virtually interviewed seven children to assess the level of care and services they received, three children (ages 2 months, 1 year and 3 years) were too young to be interviewed and were virtually observed to be clean, well-groomed and healthy. An additional five discharged children files were also reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed two 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 RFHs.

CAD noted findings in the areas of:

Priority 1

- Facility and Environment
 - A safety release device was not installed on the master bedroom window where small children sleep.
 - A set of knives was on the top of the kitchen counter and accessible to small children.

On April 29, 2021, 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.

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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:bm

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
Connie Franks, Chief Executive Officer, Hanna's House
Kellee Coleman, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division

CORRECTION ACTION PLAN

Facility And Environment

14. Exterior and grounds of the RFH were safe and well maintained

14b. Security bars used on windows are equipped with operable, safety release devices

Facility Comment

Site 506 Security bars with no safety release device are used on the master bedroom window. Two small children sleep in that bedroom.

1. Explain the Cause.

The safety device latch was not in good working order, in the resource family master bedroom.

2. Corrective Action Taken.

On May 18, 2021, Hannah's Children's Homes (HCH), Site Administrator, Armando Juarez MSW, scheduled a virtual training for Foster Care Social Workers (FCSW's) to discuss the above findings, agency's safety protocol and the Interim Licensing Standard Regulation Chapter 8.8, Article 6, Section 88487 1(b) (1) (A); " A window with security bars shall have a safety release device that meets all state and local requirements." In addition, FCSW's were informed to report if any other foster homes are using safety release devices. As of this date, no other home were reported using windows that required safety release devices. The above stated deficiency immediately was resolved by replacing the window that had a security bar with a window that meets the Interim Licensing Standard Regulation. See attached window picture.

3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

In order to maintain compliance with stated finding, the Quality Assurance (QA) staff in coordination with our team members (Prospective Resource Parents Monthly Progress Review) that monitors and evaluates progress, The Checklist from Resource Family Home Health and Safety Assessment (LIC 03) will be reviewed and documented by QA staff and the Prospective parent progress team. Both teams will document safety issues on the Prospective Resource Parent Management and Social Workers Management system. Furthermore, no new foster homes will be certified if they do not meet safety regulations. In addition, a section from the Monthly Home Inspection form will be added to the Resource Parent Visit Record to ensure that the family is in compliance with all safety regulations.

Reviewer Comment

15. Common areas were safe and well-maintained

15i. If appropriate, knives and sharp objects are safely stored and locked

Facility Comment

Site 506 A block of knives was stored inside an unlocked kitchen cabinet.

1. Explain the Cause.

Foster Home was being renovated during the contract compliance audit. According to Resource Father the utensils in the kitchen were disorganized and he admitted that he forgot to secure the block of knives back in the cabinet that has a lock device.

2. Corrective Action Taken.

On May 18, 2021 HCH Site Administrator scheduled a virtual training for FCSWs addressing the agency safety regulations and the Interim Licensing Standard Regulations: "All household knives, medicines, disinfectants, and cleaning solutions are inaccessible to a child."

3. Explain what the Quality Assurance (QA) Plan is to maintain Compliance.

Resource Father completed a safety training on May 17, 2021. (See attached certificate) In addition, FCSWs were informed that during the next three months they will conduct an unannounced home visit to confirm compliance with the kitchen knives and to report it to the QA staff and FCSWs Supervisor. The unannounced visit will be documented on the children's contact note and on the Resource Family visit record form, RFA 809. Compliance will be monitored by QA staff via the case management system and during supervision by FCSWs Supervisor. Any future deficiencies will be corrected by providing a scheduled 2 hour in-office training to the Resource Parent. In addition, a section from the Monthly Home Inspection form will be added to the Resource Parent Visit Record to ensure that the family is in compliance with all safety regulations.

Reviewer Comment

Attach Documents

No file chosen