



County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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Revised Report (Originally transmitted on August 11, 2021)

October 22, 2021

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

From: 
Bobby D. Cagle
Director

WAYFINDER FAMILY SERVICES SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAM 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 Wayfinder Family Services Short-Term Residential Therapeutic Program (STRTP) (the Contractor) in October 2020. The Contractor has one licensed site located in the Second Supervisorial District. The site provides services to the County of Los Angeles DCFS placed children, Probation foster youth, and Non-Minor Dependents.

Key Outcomes

NUMBER OF PRIORITY FINDINGS
PRIORITY 1 1
PRIORITY 2 3
PRIORITY 3 2

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

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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 6 of 10 applicable areas of CAD's Contract Compliance Review: General Contract Requirements; Engagement and Teamwork; Permanency and Transition Services; Education and Independent Living Program Services; 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, virtually interviewed two of the children to assess the level of care and services they received; one child declined to be interviewed, one child transitioned out on November 5, 2020, and one child had runaway status and was subsequently discharged after the file review and prior to the interviews. 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 telephone interviews with staff. To assess the quality of care and supervision provided to the placed children and foster youth, DCFS conducted virtual site visits.

CAD noted findings in the areas of:

Priority 1

- Personnel Files
 - Personnel did not have current and valid California driver's license on file.

Priority 2

- Health and Medical Needs
 - Required follow-up medical examinations were not conducted timely.
- Personnel Files
 - Personnel did not receive the required initial training, including, Commercially Sexually Exploited Children (CSEC), sexual reproductive and LGBTQ training.
 - Personnel did not receive the required on-going annual training, including, Child Abuse Identification and reporting, and CSEC training.

Priority 3

- Facility and Environment
 - Vehicle used to transport the children had damage on right rear of van and left bumper.
- Needs and Services Plans (NSPs)

Each Supervisor
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- NSPs were not completed accurately, as they were missing the Children's Social Worker/Deputy Probation Officer signatures, child's signatures and staff signatures.

On January 25, 2021, the Contractor's representative stipulated to the findings and an exit conference was not held.

The Contractor provided the attached approved Corrective Action Plan addressing the noted findings in this compliance report.

On March 9, 2021, the Contractor notified DCFS and the California Department of Social Services Community Care Licensing Division it was terminating the STRTP contract and closing the program.

The STRTP contract was a joint contract between DCFS, Probation and Wayfinder Family Services. The effective date of the termination was April 1, 2021.

If you have any questions, your staff may contact me or Aldo Marin, Board Relations Manager, at (213) 351-5530.

BDC:KDR
LTI:jo

Attachments

c: Fesia Davenport, Chief Executive Officer
Arlene Barrera, Auditor-Controller
Dr. Adolfo Gonzales, Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Miki Jordan, Chief Executive Officer, Wayfinder Family Services
Jay Allen, President and Chief Operating Officer, Wayfinder Family Services
Kellee Coleman, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division

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March 11, 2021

Joanne Orquiola
Children Services Administrator I LA
County DCFS
Contracts Administration Division
Compliance Section
3530 Wilshire Blvd., 4th Floor
Los Angeles, CA 90010

Dear Mrs. Joanne Orquiola,

This letter is written per your request for Wayfinder Family Services to provide an Addendum to the Corrective Action Plan (CAP) to address the recommendations based on the STRTP Contract Compliance Review conducted November 18, 2020 We are responding to provide the requested corrections for your review.

Concerns/Deficiencies Identified:

1. Facility and Environment
2. Needs and Service Plan
3. Health and Medical Needs
4. Personnel Files

How the CAP will be implemented:

II. FACILITY AND ENVIRONMENT

Explanation of Non-Compliance: Staff/Maintenance were not consistent in reporting any damages to the supervisor and/or maintenance department.

6. Vehicles used to transport children are maintained in good repair.

a) 6.18 Vehicles free from damage.

- Wayfinder Maintenance Department will ensure the following vehicle inspections will be conducted monthly:
 - Interior and exterior
 - If there is damage to the interior and/or exterior of the vehicle, Maintenance Department will schedule for the vehicle to get services/repaired.
- STRTP Program will:
 - Will conduct monthly walk throughs of vehicles to ensure any damage is reports to maintenance.

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IV. NEEDS AND SERVICE PLAN

Explanation of Non-Compliance: youth refused to participate in completing their NSPs, Facilitators have made attempts to CSW to obtain signatures, but Facilitators did not attach their correspondence(s) to the NSP, Mental Health Administrator did not submit signature to facilitator on time.

16. The NSPs were completed accurately and on time.

a) 16.3 The child/NMD signed the NSPs

- Facilitator will review the NSP in the monthly CFT and obtain signature from the youth/NMD.
- If the Facilitator does not obtain the youth/NMD's signature at the CFT, the facilitator will attempt to obtain signature.
- If youth/NMD refuses to sign the NSP, Facilitator will write "Youth refused" on the signature page.

b) 16.5 The CSW/PO signed the NSPs:

- Facilitator will review the NSP in the monthly CFT and obtain signature from CSW/PO.
- If the Facilitator does not obtain the CSW/PO's signature at the CFT, Facilitator email CSW/PO the NSP for review and to obtain signature.
- If Facilitator is not able to obtain signature, Facilitator will try at least two more times to email NSP to obtain signature. If the signature is not obtained by the third attempt, the Facilitator will attach the email correspondences to the NSP.

c) 16.6 The required staff signed the NSPs

- Facilitators will obtain signature from either STRTP/MH Administrator:
 - Director of STRTP
 - Director of Mental Health
 - Assistant Director of STRTP

VII. HEALTH AND MEDICAL NEEDS

Explanation of Non-Compliance: Due to COVID, it was challenging for Medical staff to schedule examination(s) for the youth. Youth also refused to attend medical appointments.

35. Required follow-up medical examinations are conducted timely

- Medical Staff will schedule annual examination within one month of due date and document in youth/NMD's medical record.
- If youth/NMD's examination is rescheduled, cancelled, or youth refuses to attend, Medical Staff will document in the youth's medical file and the youth's electronic health record.

X. PERSONNEL FILES

Explanation of Non-Compliance: HR/STRT/PMH did not conduct internal audits to ensure employee documents and training requirements were complete and up to date in the employee's file.

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82. Personnel had current and valid licenses and certificates on file NEW (4 categories).

a) 82.1: Personnel had current and valid license and certificates on file.

- During pre-hire process, for any position which requires driving, Wayfinder insurance broker will run a motor vehicle record to determine if candidate has a good driving record and is cleared by Wayfinder insurance broker to drive on behalf of Wayfinder, HR will upload candidate's information into the DMV Pull Program to track their driving record.
- If an employee is required to drive, HR will obtain a copy of employee's driver's license and place a copy in their personnel file. The employee's driver's license and expiration date are entered into Paycom.
- HR will generate a monthly report in Paycom to track driver's license number and expiration dates.
- HR will audit the report each month and request copies of updated driver's licenses from staff authorized to drive and place them in the personnel file.

b) 82.2 Personnel had a California driver's license on file with the provider

- If an employee is required to drive, HR will obtain a copy of employee's driver's license and place a copy in their personnel file. The employee's driver's license and expiration date are entered into Paycom.
- HR will generate a monthly report in Paycom to track driver's license number and expiration dates.
- HR will audit the report each month and request copies of updated driver's licenses from staff authorized to drive and place them in the personnel file.

c) 82.3: Personnel had current CPR certification on file.

- Every month Mental Health Admin will review and ensure all staff CPR Certifications are current.
- If staff's CPR expires within two weeks two weeks of expiration date, STRTP/Mental Health Admin will sign the staff up for recertification.
- STRTP/MH Admin will send a copy of certificate to Human Resources Department for the employee's personnel file.

d) 82.4: Personnel had current First Aid certification on file.

- Every month STRTP/Mental Health Admin will review and ensure all staff First Aid Certifications are current.
- If staff's First Aid will expire within two weeks, STRTP/Mental Health Admin will sign the staff up for recertification.
- STRTP/MH Admin will send a copy of certificate to Human Resources Department for the employee's personnel file.

83. Personnel received initial training & orientation NEW (7 categories).

Explanation of Non-Compliance: STRTP/MH did not conduct a quarterly audit on new employee file to ensure employee documents and training requirements were complete and up to date within the required timeframe/due date.

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a) 83.4: Personnel receiving CSEC training

- Within the 90 days of employment, new staff will complete the CSEC Training
- STRTP/MH Admin will review Training Tracker every quarter to ensure staff are compliant with required training.
- STRTP/MH Admin will document employee completing the training into Relias upon completion.

b) 83.5: Personnel receiving LGBTQ Training

- Within the 90 days of employment, new staff will complete the LGBTQ Training
- STRTP/MH Admin will review Training Tracker every quarter to ensure staff are compliant with required training.
- STRTP/MH Admin will document employee completing the training into Relias upon completion.

c) 83.6: Personnel received 8 hours of reproductive and sexual health training

- Within the 120 days of employment, new staff will complete the reproductive and sexual health training
- STRTP/MH Admin will review Training Tracker every quarter to ensure staff are compliant with required training.
- STRTP/MH Admin will document employee completing the training into Relias upon completion.

84. Personnel received annual on-going trainings

Explanation of Non-Compliance: STRTP/MH did not conduct a on-going employee's file to ensure documents and training requirements were complete and up to date within the required timeframe/due date.

a) 84.4 Personnel received on-going Child Abuse Identification & Reporting Training

- Staff with outstanding training on Child Abuse Identification & Reporting Training will be trained within 90 days prior to annual due date.
- STRTP/MH Admin will review Training Tracker every quarter to ensure staff are compliant with required training.
- STRTP/MH Admin will document employee completing the training into Relias upon completion.

b) 84.5 Personnel receiving on-going CSEC training

- Staff with outstanding training on CSEC will be trained within 90 days prior to annual due date.
- STRTP/MH Admin will review Training Tracker every quarter to ensure staff are compliant with required training.

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- STRTP/MH Admin will document employee completing the training into Relias upon completion.

c) 84.6 Personnel receiving on-going LGBTQ training

- Staff with outstanding training on LGBTQ Training will be trained within 90 days prior to annual due date.
- STRTP/MH Admin will review Training Tracker every quarter to ensure staff are compliant with required training.
- STRTP/MH Admin will document employee completing the training into Relias upon completion.

d) 84.7 Personnel receiving on-going reproductive and sexual health training

- Staff with outstanding training on Child Abuse Identification & Reporting Training will be trained within 90 days prior to annual due date.
- STRTP/MH Admin will review Training Tracker every quarter to ensure staff are compliant with required training.
- STRTP/MH Admin will document employee completing the training into Relias upon completion.

It is our policy and practice to make sure that we are in compliance with our contract obligations with DCFS and Title 22 requirements. We will continue to monitor ourselves to ensure that we are in full compliance. Thank you for your time and consideration. Please contact me if you have any questions.

Sincerely,

A handwritten signature in black ink, appearing to read "Kristal Audoma".

Kristal Audoma, LMFT
Director of Short Term Residential Therapeutic Program (STRTP)