

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

December 23, 2021

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To: Supervisor Holly J. Mitchell, Chair

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From: Bobby/D. Cagle

Director

HERMANITOS UNIDOS SIBLINGS UNITED 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 Hermanitos Unidos Siblings United Foster Family Agency (the Contractor) in March 2021. The Contractor has one office located in the Fifth 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



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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 6 of 11 applicable areas of CAD's Contract Compliance Review: RFH Requirements; Facility and Environment; Education and Independent Living Program Services; 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 children, eight children were virtually interviewed to assess the level of care and services they received, and one three-year old child was too young to be interviewed and was virtually observed to be clean, well-groomed and healthy. One of the children whose file had been reviewed was discharged prior to the interviews being conducted, on March 26, 2021. An additional four discharged children files were also reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed four RFHs files and five staff files for compliance with Title 22 Regulations and County contract requirements. CAD also conducted telephonic interviews with staff and virtual interviews with the Resource Family Parents (RFP). 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 current and operable all-purpose fire extinguisher was not readily accessible.

Priority 2

- Resource Family Home Requirements
 - Megan Law search on RFP's and other adults residing in the RFH were not conducted timely.
- Needs and Services Plans (NSPs)
 - NSPs were not comprehensive and accurate.

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- Education and Independent Living Plan Services
 - Efforts to maintain the children in their school of origin were not documented.
- Health and Medical Needs
 - o Required follow-up dental examinations were not conducted timely.
- Personal Needs/Survival and Economic Well-Being
 - Children did not receive their required basic weekly allowance amounts.

On June 9, 2021, the Children Services Administrator teams from DCFS CAD and the Out-of-Home Care Management Division Quality Assurance and Investigations Section, 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:jo

Attachments

c: Fesia Davenport, Chief Executive Officer
Arlene Barrera, Auditor-Controller
Dr. Adolfo Gonzales, Chief Probation Officer
Public Information Office
Audit Committee
Joseph Steinberg, Chief Executive Officer, Hermanitos Unidos Siblings United
Kellee Coleman, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division



July 2, 2021

ATTN: Joanne Orquiloa, CSA I LA County DCFS Contracts Administrative Division, Compliance Section 425 Shatto Place, 4th Floor Los Angeles, CA 90020

FROM: Hermanitos Unidos Foster Family Agency

RE: CAP ADDENDUM (Revisions in Red)

Resource Family Home Requirements

Does FFA Conduct Megan Law Search on RFP's and other adults?

- **Finding:** Although Megan Law Search were conducted for all 4 homes, such searches were not completed prior to home approval.
- Cause of the Deficiency: Agency was not aware of the new contract requirement to do a Megan's Law Search.
- Action Necessary to Correct Deficiency: Checklist of items necessary to be completed before initial approval of homes shall add "presence of completed Megan Law Search" to the list.
- Explanation of How the Correction Will be Implemented: Prospective Resource Parent Staff (recruiters, trainers, etc.) will see that Megan's Law Search result is sought during the application process.
- Explanation of What Action Will Take Place to Ensure Corrective Action is Maintained: No future prospective resource parent shall be approved without the Megan's Law Search.
- What will be Done to Help Reduce/Prevent Subsequent Violations: Executive Assistant (who does the final checklist review) will do a final review of all applications to make sure Megan's Law Search is included, as an extra check and balance.
- **Timeframe:** Immediately [from July 1, 2021 onward].
- Person/s Responsible for Ensuring Actions are Carried out: Administrator

Facility and Environment

Is a Current and Operable All-purpose Fire Extinguisher Readily Accessible in all Homes?

- Finding: One of the homes reviewed (RFP#4) did not have a fire extinguisher at the time of the review.
- Cause of the Deficiency: This item was inadvertently overlooked during the initial home inspection performed during the home study.
- Action Necessary to Correct Deficiency: Specifically, RFP #4 bought a fire extinguisher and placed it in the kitchen (see attached photo).
- Explanation of How the Correction Will be Implemented: Generally, all social worker staff will be given a retraining on home and grounds (section 88487.1 of Version 5 of ILS)/home inspections, including emphasis on ensuring there is an operable fire extinguisher.
- Explanation of What Action Will Take Place to Ensure Corrective Action is Maintained: All ongoing home inspections shall include review of presence of fire extinguishers.
- What will be Done to Help Reduce/Prevent Subsequent Violations: All home study staff will be given similar Home and Grounds training and reminded to not pass any homes without an operable fire extinguisher.
- Timeframe: Beginning August 1, 2021
- Person/s Responsible for Ensuring Actions are Carried out: Administrator

Needs and Services

Were NSP's Completed Accurately (23b)?

- Finding: Several common errors were noted in 3 different children's NSP's;
 - a) Child #1: Inconsistencies in listed educational rights holder; wrong child's name listed in visitation section.
 - b) Child #2: The following accuracy errors were noted: wrong dates for medical/dental exams, psychotropic drug box incorrectly checked, inconsistencies regarding educational rights holder.
 - c) Child #3: 3 consecutive chronological NSPs did not evidence updates under "adjustment placement," and did not acknowledge appropriate update when child moved from middle school to high school.
- Cause of the Deficiency: Carelessness by the NSP writer(s), and the errors were inadvertently overlooked by the supervisor.
- Action Necessary to Correct Deficiency: Memo is being sent to all social workers (see attached) regarding heightened awareness concerning specific errors mentioned above when writing NSPs.
- Explanation of How the Correction Will be Implemented: Chronic pattern of inaccuracy errors on NSPs may result in lowering of the social worker's caseload.

- Explanation of What Action Will Take Place to Ensure Corrective Action is Maintained: Social workers who do not do appropriate updates, list appropriate educational rights holders, or check the right psychotropic box, shall be required to re-write the NSPs. As mentioned, if the pattern continues, lowering caseloads for the social worker may be necessary.
- What will be Done to Help Reduce/Prevent Subsequent Violations: In most instances, a second set of eyes (i.e.: another supervisor) in addition to the administrator, shall review NSPs for inconsistencies.
- Timeframe: Immediately (beginning July 1, 2021).
- Person/s Responsible for Ensuring Actions are Carried out: Supervisor and social workers.

Health and Medical Needs

Are Required Follow-up Dental Exams Conducted on Time?

- Finding: For child #4, the follow-up dental exam was not on file.
- Cause of the Deficiency: Failure on the part of the agency social worker to spot the need for follow-up and remind the resource parent, who similarly forgot to follow up.
- Action Necessary to Correct Deficiency: Specifically, the follow-up visit was conducted on 6/25/2021 (please see attached-another exam (fillings) is also scheduled for 7/7/2021).
- Explanation of How the Correction Will be Implemented: In general, a designated staff person has been assigned with reviewing all dental exams to review to see if follow-up is requested. If so, resource parent would be called to ensure a follow-up appointment was scheduled and performed in a reasonable timeframe.
- Explanation of What Action Will Take Place to Ensure Corrective Action is Maintained: As extra due diligence, the designated person will keep track of all medicals and dentals (initial, follow-up, and annual) and remind parents to schedule appointments in a timely fashion.
- What will be Done to Help Reduce/Prevent Subsequent Violations: Same as above.
- **Timeframe:** Immediately (Beginning on July 1, 2021).
- Person/s Responsible for Ensuring Actions are Carried out: Designated person, resource parents, (and social workers).

Personal Needs

Did Child Report Receiving the Minimum Weekly Allowance?

- **Finding:** One Child (Child #10) should have received \$16.20 per week (per annual prorated increase effective 7/1/2020), but only received \$16.00 (child is owed at least \$8.20).
- Cause of the Deficiency: Management, who read the LA Contract's requirement to prorate an annual increase for allowance, forgot to update the rates and send the update to parents and agency social workers.
- Action Necessary to Correct Deficiency: In general, a memo was sent to social worker staff and resource parents indicating the new allowance rates (see attached).

- Explanation of How the Correction Will be Implemented: Specifically, although Child #10 is no longer with the agency and is reunified, arrangements were made to deliver an additional \$10.00 to the minor (see attached).
- Explanation of What Action Will Take Place to Ensure Corrective Action is Maintained: Social workers are being reminded to enforce the new rate on their future visits to the homes, when collecting signed allowance logs.
- What will be Done to Help Reduce/Prevent Subsequent Violations: The weekly amount has been set to go beyond the future pro-rated increases over the next couple of years.
- **Timeframe:** Almost immediately (August 1, 2021).
- Person/s Responsible for Ensuring Actions are Carried out: Social Workers and Resource Parents.

Educational and Independent Living Plan Services

<u>Did FFA Document Efforts to Maintain Children in School of Origin, if Determined to be in the</u> Best Interest of Child and it is Feasible to do so?

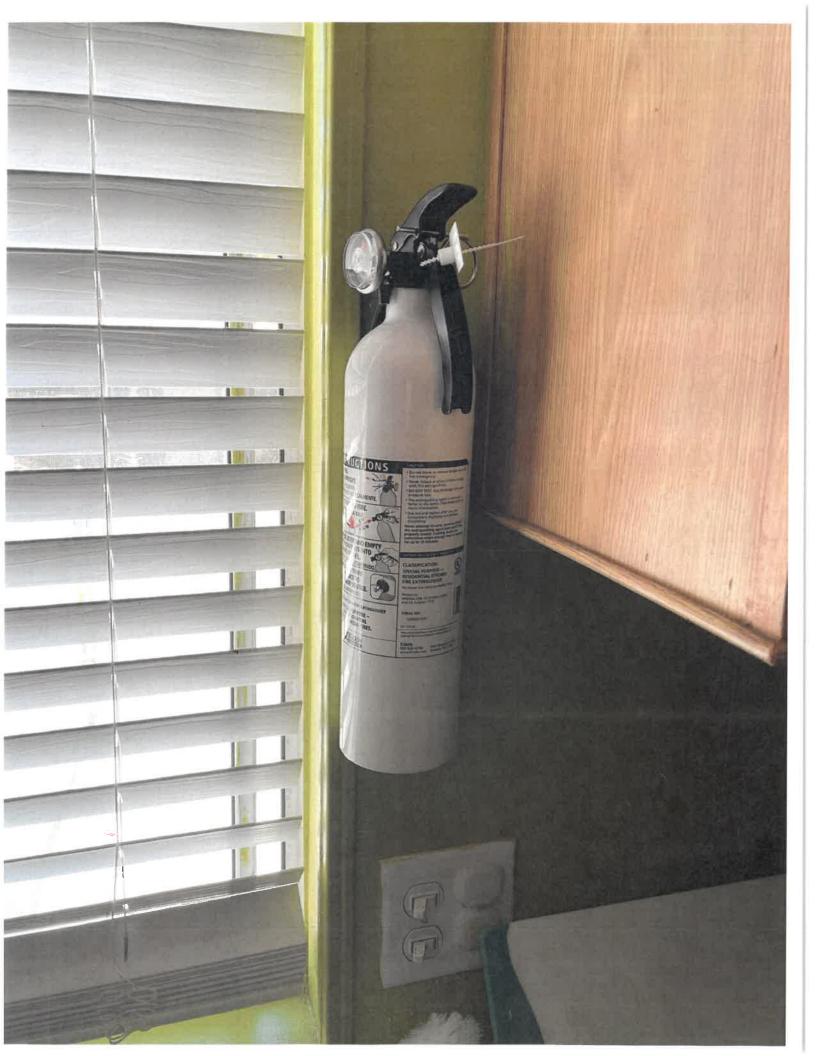
- **Finding:** For 2 Children, there was no documentation in the file to show any effort to maintain child in school of origin.
- Cause of the Deficiency: In reading the LA County Contract, Management had overlooked reading or remembering this requirement.
- Action Necessary to Correct Deficiency: A form has been devised requesting assistance from CSW (see attached). Question will be asked during intake.
- Explanation of What Action Will be Implemented: This hard copy of the form shall be emailed to the CSW, checked off by CSW, and returned to the agency.
- Explanation of What Action Will Take Place to Ensure Corrective Action is Maintained: The resultant from signed by the CSW shall be kept in the children's file in the educational section.
- What will be Done to Help Reduce/Prevent Subsequent Violations: Administrator will remind intake coordinator to start using this form, when it is determined that it is in the best interest of the child.
- **Timeframe:** Immediately (starting on July 1, 2021)
- Person/s Responsible for Ensuring Actions are Carried Out: Administrator, Intake Coordinator, CSW's.

Submitted by:

Elizabeth Valencia, Administrator

Approved by:

Joseph Steinberg, CEO





MEMO:

DATE: JUNE 28, 2021

TO: ALL SOCIAL WORKERS

FROM: ADMINISTRATOR \mathcal{E}^{\searrow}

HENCEFORTH, ALL SOCIAL WORKERS NEED TO BE MORE DILIGENT IN WRITING THEIR NSP'S IN THE FOLLOWING AREAS:

- UNDER "EDUCATIONAL RIGHTS HOLDER", BIRTH PARENT MUST BE LISTED AS THE DESIGNATED
 PERSON (NOT "LEGAL GUARDIAN" OR "RESOURCE PARENT") AS LONG AS THE REUNIFICATION
 RIGHTS HAVE NOT BEEN TERMINATED.
- 2. PSYCHOTROPIC MEDICATION "BOX" SHOULD NOT BE CHECKED "YES" UNLESS A SPECIFIC PSYCHOTROPIC MEDICATION IS KNOWN TO BEING ADMINISTERED; SIMILARLY IN THAT CASE, UNDER "CURRENT MEDICATION PRESCRIBED", IT'S NOT ENOUGH TO SAY, "PSYCHOTROPIC MEDICATION" (IF APPLICABLE): THE SPECIFIC NAME OF THE PSYCHOTROPIC MEDICATION SHOULD BE LISTED.
- 3. WHENEVER A CHILD MOVES FROM MIDDLE SCHOOL TO HIGH SCHOOL, THIS CHANGE MUST BE ACKNOWLEDGED IN THE SCHOOL SECTION.
- 4. TOO OFTEN, "ADJUSTMENT TO PLACEMENT" HAS THE SAME WORDING FROM ONE NSP TO THE NEXT. ADJUSTMENT TO PLACEMENT MUST BE UPDATED EVERY 3 MONTHS, AND THE WORDING MUST REFLECT THAT.

COUNTY OF LOS ANGELES • DEPARTMENT OF CHILDREN AND FAMILY SERVICES

DCFS 561(b)

DENTAL EXAMINATION FORM - INSTRUCTIONS

MEDICAL RECORD PROCEDURES FOR FOSTER CAREGIVERS (Caregiver is a Foster Parent, Relative, Group Home, or FFA.)

The HEALTH & EDUCATION PASSPORT (HEP) BINDER accompanies each child at the time of placement. The Children's Social Worker (CSW) will review the HEP BINDER with you at each visit.

The Health and Education Passport must be taken to all medical visits, including the initial examination visit. The health care provider must record all current medical services and tests on the DCFS 561(b). Please add the completed forms to the child's HEP BINDER.

Immediately notify the child's CSW (or Supervising CSW, if the CSW is unavailable) when there is any change in the child's mental, medical and/or dental health that required urgent medical care.

If the child is removed from your care, the child's complete HEP BINDER, including the immunization Record, shall be returned to the CSW at the time of removal, as the HEP BINDER must accompany the child upon replacement.

Dental Care Examination Periodicity Schedule: Annual dental examination required at age 3 and above. (To be completed by CSW/Caregiver. Please print legibly.) Child needs dental examination within thirty (30) days of initial placement. Child does not need dental examination because child had a dental examination within one (1) year of placement. Child needs dental examination by CHILD'S NAME: Mich elle Sanchez DOB: 10/3/2009 CASE #: _____ DATE PLACED: _____ CAREGIVER: Milagro Villa lobo (Phone) & 18)614-0425 (FFA) _____ (Phone) _____ ______ (File #) _____ (Phone) _____ (Fax) _____ CSW: Dental data entered into CWS/CMS by: (Name) ______ (Date) _____ DENTAL EXAMINATION FORM (To be completed by Dentist.) DENTAL EXAMINATION Name of Dentist: _____ Date of Dental Examination: ___ Annual Required Examination Other/Follow-Up Visit Dentist's own exam form is attached. If not attached, complete below. Dental Exam results: (Treatment given; Medications Prescribed. Please attach copies of supporting documentation; test results, etc.) (May be continued on additional pages if necessary. If so, provider to include child's name and DOB, and sign and date additional pages.) If follow-up care indicated, specify: (Date)6/25/2021 Signature of Health Care Provider: Address: 18905 Sherman Wan, Racula, CA 91375 Phone: (8/8) 345-3352 DR. ANOUSH YESSAIAN, D.D.S. INWI Reseda, CA 91335 (818) 345-3353 Stonature Stamp Required)

Distribution:

Pages 1, 2 and 3 to foster caregiver when child initially placed. Page 4 to be filed in Psychological/Medical/Dental folder (purple).

NEW RATES (NUEVAS TARIFAS)

WEEKLY ALLOWANCES (SUBSIDIOS SEMANALES)

AGES (EDADES)

5-7: \$9.00

8-10: \$12.00

11-13: \$15.00

14-15: \$17.00

16-17: \$21.00

18-21: \$28.00

CLOTHING RATES (TARIFAS DE ROPA)

0-14: \$ 80.00

15-21:\$ 90.00

Date:

This is to please confirm that we, birth mother of **Damian Diaz and Damian Diaz** have received \$10 from Hermanitos Unidos Foster family agency to make up for extra allowance that was owed to the foster child.

Damian Diaz (Foster Child)

Birth mother

REQUEST FOR MAINTAINING CHILD IN SCHOOL OF ORIGIN

ATTENTION: CSW	(NAME)
FROM: Agency Social Worker	(NAME)
NAME OF CHILD:	
Dear	_, CSW;
Is it possible for the County to arrange transportation of the of origin?	child/youth to his/her school
□YES	
□NO	
If the answer to the above is "NO", are you in arrangement the local school near the resource parent's is sufficient?	hat the child's attendance at
□YES	
□NO	
*Please check the above boxes and send back to our agence	·y.