



**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
HOLLY J. MITCHELL
Second District
SHEILA KUEHL
Third District
JANICE HAHN
Fourth District
KATHRYN BARGER
Fifth District

December 29, 2021

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

From: Bobby D. Cagle for
Director

**WALDEN ENVIRONMENT DBA WALDEN 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 virtual Contract Compliance Review of the Walden Environment dba Walden Family Services Foster Family Agency (the Contractor) in March 2021. The Contractor has three offices: one located in the Third Supervisorial District; and two located outside of the 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 1
PRIORITY 2 3
PRIORITY 3 1

“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; 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 7 of 11 applicable areas of CAD's Contract Compliance Review: General Contract Requirements; Resource Family Home (RFH) Requirements; Engagement and Teamwork; Permanency; 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, six DCFS placed children were selected for the sample. CAD reviewed the files of the six selected children, one child was virtually interviewed to assess the level of care and services received, and five children (ages 1, 3 and 5 years, and 4 months) were too young to be interviewed and were virtually observed to be clean, well-groomed and healthy. An additional four discharged children files were also reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed three 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 (RFPs). 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 current and operable all-purpose fire extinguisher was not readily accessible.

Priority 2

- Needs and Services Plans
 - NSPs were not completed accurately and timely.
- Health and Medical Needs

Each Supervisor
December 29, 2021
Page 3

- The FFA did not provide sexual and reproductive health rights information to children aged 10 and older.
- Personnel Files
 - Personnel did not receive all required annual on-going trainings.

Priority 3

- Facility and Environment
 - RFHs did not make all the required notices and postings available in the home.

On May 26, 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:nw

Attachments

c: Fesia Davenport, Chief Executive Officer
Arlene Barrera, Auditor-Controller
Dr. Adolfo Gonzales, Chief Probation Officer
Public Information Office
Audit Committee
Sue Evans, Chief Operating Officer, Walden Environment
Kellee Coleman, Regional Manager, Community Care Licensing Division
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division



LOS ANGELES COUNTY
WALDEN FAMILY SERVICES (FFA)



Corrective Action Plan

2021

Facility And Environment

15. Common areas were safe and well-maintained

15e. A current and operable all-purpose fire extinguisher is readily accessible (Title 22 80020; Title 19 596(b)(1), 557.9 & 567(b), (h), (i))

Facility

Site 505

1. Explain the Cause.

RFP did not remove the all-purpose fire extinguisher from the box upon purchasing a new one for the home.

2. Corrective Action Taken.

Correction: RFP was instructed to remove the fire extinguisher from the box, which was completed on May 26, 2021. Clarification of Standard: The standard was clarified with the RFP explaining the importance of removing the all-purpose fire extinguisher from the box making it readily accessible in the case of an emergency.

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

Walden QA department will work with Walden Program Director to ensure all retraining is completed.

16. RFH's made available in the home all required notices

16c. Sexual Health and Reproductive Rights(SB89)

Facility

Site 505

16f. Legal Rights of Teens in Out-of-Home Care (11+ years)

Facility

Site 505

16g. Foster Care Ombudsman (PUB 379)

Facility

Site 505

1. Explain the Cause.

RFP and Client were not aware of the title of the forms provided to them.

2. Corrective Action Taken.

Change in Procedure: All posted items, including Sexual Health and Reproductive Rights, Rights of teens in out of home care and the foster care ombudsman, will be reviewed annually with the RFP and Client. All individuals will sign confirmation annually that the items have been reviewed and provided.

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

The Quality Assurance (QA) Department will assist the programs in drafting the confirmation checklist to be used annually.

Needs & Services

23. The NSPs were completed accurately and on time

23a. Developed timely

Facility

Site 505

23d. Signed by children when age or developmentally appropriate

Facility

Site 505

23e. Signed by RFPs (and parents if applicable)

Facility

Site 503

Site 505

Site 503

23f. Signed by FFA staff

Facility

Site 504

Site 505

23g. Signed by CSW/DPO (or documented efforts to obtain signature))

Facility

Site 504

Site 504

Site 503

Site 505

Site 503

1. Explain the Cause.

Cause of Non-Compliance: Walden Social Worker dated the NSP for 8-19-20 as 9-19-20 Cause of Non-Compliance: Walden Social Worker did not obtain the client signature for the NSP virtually and the Walden Social Worker did not verify the client dated their signature. Cause of Non-Compliance: Walden Social Worker did not verify the RFP dated their signature. Cause of Non-Compliance: Walden Social Worker did not date their signature Cause of Non-Compliance: Walden Social Worker did not include the ongoing attempts to obtain signatures from the CSW in a timely manner with the received signature page.

2. Corrective Action Taken.

Training: Walden Social Workers were provided training on June 1, 2021 on the importance of dating of NSP's correctly with the time line of placement as well at the importance of Client signatures and dated signatures. Change in procedure: Walden Social Worker will upload all communications and attempts to get signatures even when the signature is obtained from the CSW. Walden Social Worker Supervisors will be given access to a DocuSign account to be able to request electronic signatures from the County Social workers.

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

QA department will assist program director in making sure all Supervisors have access to DocuSign to collect electronic signatures.

45. The FFA has provided sexual and reproductive health rights information, age 10 or older

Facility

Site 505

1. Explain the Cause.

Cause of Non-Compliance: Child #6 was provided his sexual and reproductive health rights information at placement on 8/19/19, upon his placement in this original Walden home. At the time the agency did not have the clients or families sign confirmation of receiving these documents. When interviewed Child #6 did not recall this conversation that took place several years previously.

2. Corrective Action Taken.

Change in Procedure: All posted items, including Sexual Health and Reproductive Rights will be reviewed annually with the RFP and Client. All individuals will sign confirmation annually that the items have been reviewed and provided.

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

The Quality Assurance (QA) Department will assist the programs in drafting the confirmation checklist to be used annually.

Personnel Files

78. Personnel are receiving annual on-going trainings as defined in the SOW and ILS

78a. Annual on-going training (hours as specified in FFA's program statement) (SOW, Part B, Section 9.0, ILS Sections 88222.1(b)(4))

Facility

Site 503

78d. Annual on-going reproductive and sexual health training (Senate Bill 89)

Facility

Site 503

1. Explain the Cause.

Cause of Non-Compliance: 78d. Walden Social Workers have trainings assigned in the online training system, the due date provided for this topic is December on 2021. Because of the time period between the previous training date and the current due date the time span is longer than 12 months. 78a. Walden staffs hours were not appropriately tracked or completed in a timely manner.

2. Corrective Action Taken.

78d. The annual due date will be adjusted in the Relias Learning System so there is no more than a 12 month period between courses. 78a. Walden Family Services has transitioned into a new online filing system that will better track staff training hours and report to Human resources when a staff is deficient in the required 20 hours.

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

The QA department will assist Human Resources in ensuring all staff training dates are in compliance with the SOW. They will also assist in ensure the on line tracking system is set up and working appropriately.