



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

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October 20, 2021

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

From:  for  
Bobby D. Cagle  
Director

**FAMILIES UNITING FAMILIES  
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 Families Uniting Families Foster Family Agency (the Contractor) in June 2021. The Contractor has one office in the Fourth Supervisorial District. The office provides services to the County of Los Angeles DCFS placed children, children placed by other counties, and Non-Minor Dependents.

**Key Outcomes**

NUMBER OF PRIORITY FINDINGS
PRIORITY 1 5
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; 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 Requirements; Permanency; 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 selected children and virtually interviewed six children to assess the level of care and services they received, four children (ages 2 and 3 years) 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 five RFHs files and four staff files for compliance with Title 22 Regulations and County contract requirements. CAD also conducted telephonic interviews with staff and 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 the RFHs.

CAD noted findings in the areas of:

Priority 1

- Engagement and Teamwork
  - Child and Family Team (CFT) participant information was not documented.
  - Efforts to participate/collaborate in the CFT meetings were not documented.
  - CFT goals were not reflected in the Needs and Services Plans goals.
- Needs and Services Plans (NSPs)
  - NSPs were not comprehensive, accurate, nor signed by age appropriate children, RFPs, and County social workers.

- Health and Medical Needs
  - Sexual and reproductive health rights information was not provided to age appropriate children.

Priority 2

- Facility and Environment
  - An annual vehicle maintenance check was not timely for a vehicle utilized to transport children.

On July 27, 2021, the DCFS CAD Children Services Administrator I and II and the Out-of-Home Care Management Division Quality Assurance Specialist 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:slr

Attachments

c: Fesia Davenport, Chief Executive Officer  
Arlene Barrera, Auditor-Controller  
Adolfo Gonzales, Chief Probation Officer  
Public Information Office  
Audit Committee  
James Schrage, Executive Director and Administrator, Families Uniting Families  
Kellee Coleman, Regional Manager, Community Care Licensing Division  
Monique Marshall-Turner, Regional Manager, Community Care Licensing Division

# CORRECTION ACTION PLAN

## Engagement and Teamwork

### 20. CFT participants have been identified or the FFA has documented efforts to obtain the information

Facility	Comment
Site 612	Child 3 - NO: Notes CFT on 4/27/21 however no documentation of FFA requesting CFT meeting notes.
Site 609	Child 6 - NO: No notes for initial CFT due within 60 days of placement and no documentation of FFA requesting CFT meeting and/or notes.
Site 609	Child 7 - NO: Notes state initial CFT requested 3/1/21 however no documentation of FFA requesting CFT meeting notes.
Site 608	Child 4 - NO: No notes for initial CFT due within 60 days of placement and no documentation of FFA requesting CFT meeting and/or notes.
Site 608	Child 5 - NO: Notes state CFT on 3/12/21 however no documentation of FFA requesting CFT meeting notes.

#### 1. Explain the Cause.

Despite verbal requests directed to CSWs during CFTs, CSWs continue to fail to provide CFT notes (including participant list) to FFA staff.

#### 2. Corrective Action Taken.

Beginning 9/1/2021, immediately following a successfully completed CFT, FCSWs will request the CFT notes (including participant list) from the CSW via email or phone contact. This request will be documented and placed into each foster youth's case file.

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

A QA review will occur monthly via a review of FCSW's treatment and contact notes by supervising social worker. If documentation is not present, FCSW will make an initial or additional request of CFT notes (including participant list) that will be placed in the foster youth's case file.

#### Reviewer Comment

### 21. The FFA documented efforts to participate in the children's CFT meetings and collaboration

Facility	Comment
Site 609	Child 6 - NO: No notes for initial CFT due within 60 days of placement.
Site 608	Child 4 - NO: No notes for initial CFT due within 60 days of placement

#### 1. Explain the Cause.

Despite requests to CSWs for initial CFTs, CFTs did not occur thus no CFT notes were completed.

#### 2. Corrective Action Taken.

Beginning 9/1/2021, immediately following a successfully completed CFT, FCSWs will request the CFT notes from the CSW via email or phone contact. Additionally the requests are documented in Families Uniting Families Orientation Checklist for initial CFTs. These requests will also be documented in telephone/email contact notes between FCSW and CSW. These requests will be placed into each foster youth's case file.

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

A QA review will occur monthly via a review of FCSW's treatment and contact notes by supervising social worker. If documentation is not present, FCSW will make an initial or additional request of CFT notes that will be placed in the foster youth's case file.

#### Reviewer Comment

### 22. The NSP goals reflected the children's CFT recommendations if shared with the FFA

Facility	Comment
Site 612	Child 3 - NO: Notes CFT on 4/27/21 however no documentation of FFA requesting CFT meeting notes.
Site 609	Child 6 - NO: No notes/documentation for initial CFT due within 60 days of placement and no documentation of FFA requesting CFT meeting and/or notes.
Site 609	Child 7 - NO: Notes state initial CFT requested 3/1/21 however no documentation of FFA requesting CFT meeting notes.
Site 608	Child 4 - NO: No notes/documentation for initial CFT due within 60 days of placement and no documentation of FFA requesting CFT meeting and/or notes.
Site 608	Child 5 - NO: Notes state CFT on 3/12/21 however no documentation of FFA requesting CFT meeting notes.

#### 1. Explain the Cause.

Despite verbal requests directed to CSWs during CFTs, CSWs continue to fail to provide CFT notes to FFA staff when CFTs occur. Often despite FCSWs ongoing requests to CSWs for CFTs, CFTs do not occur, therefore therefore resulting in no CFT notes.

#### 2. Corrective Action Taken.

Beginning 9/1/2021, all received CFTs notes will be used to inform the creation of treatment goals. Initial CFTs will be requested in the first 60 days of placement, ongoing CFTs, and CFTs as needed to support stability in placement will be documented in foster youth's case file. All CFT notes will be placed in each foster youth's case file.

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

A QA review will occur monthly via a review of FCSW's treatment and contact notes by Supervising Social Worker. If documentation is not present, FCSW will make an initial or additional requests of CFT notes that will be placed in the foster youth's case file. CFT notes informing the creation and support of treatment notes will be discussed and supported in an ongoing fashion with FCSWs and Supervising Social Worker during ongoing supervision meetings.

#### Reviewer Comment

## Facility And Environment

13. Vehicles used to transport children were well maintained and in good repair

## 13c. Maintenance Log

Facility	Comment
Site 611	RFP 5 - NO: Annual maintenance check for their 2013 vehicle was not timely:: acquired approximately 4 months after it was due.

## 1. Explain the Cause.

It should be noted that these vehicles were all found to be in good repair. Due to the ongoing pandemic and Shelter-At-Home Order from the Governor, the Resource Family was late in completing yearly vehicle inspection.

## 2. Corrective Action Taken.

Beginning 9/1/2021, FFA staff will ensure that Resource Families receive ongoing support and reminders to complete these vehicle inspections by each yearly deadline. FCSWs will continue to follow up with assigned Resource Families to ensure timely completion of inspections.

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

A monthly QA review by Supervising Social Worker and Program Manager will occur to track upcoming vehicle inspection deadlines for each Resource Family to provide appropriate and timely support and reminders to Resource Families as supported by assigned FCSWs.

## Reviewer Comment

## Needs &amp; Services

## 23. The NSPs were completed accurately and on time

## 23b. Are comprehensive and accurate

Facility	Comment
Site 612	Child 3 - NO: May NSP, no dates of contact with CSW included; NSP has "N/A". MAY and AUGUST NSPs goal 4 has dates for modification and completion that are not comprehensive as the modified date of the goal is later than the projected completion date. The goal is also not listed as achieved on either NSP. NOVEMBER NSP goals 2 and 4 have the same issue with the dates as noted in the May and August NSPs.

## 23d. Signed by children when age or developmentally appropriate

Facility	Comment
Site 612	Child 3 - NO: Did not sign February 2021 NSP.
Site 610	Child 1 - NO: Did not sign February 2021 NSP.
Site 610	Child 2 - NO: Did not sign February 2021 NSP.

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

Facility	Comment
Site 612	Child 3 - NO: Did not sign February 2021 NSP.
Site 609	Child 6 - NO: Did not sign February 2021 NSP.
Site 609	Child 7 - NO: Did not sign March 2021 NSP.
Site 611	Child 10 - NO: Did not sign July, October 2020 January, or April 2021 NSPs.
Site 611	Child 8 - NO: Did not sign July, October 2020 January, or April 2021 NSPs.
Site 611	Child 9 - NO: Did not sign July, October 2020 January, or April 2021 NSPs.
Site 608	Child 4 - NO: Did not sign January 2021 NSP.
Site 610	Child 1 - NO: Did not sign February 2021 NSPs.
Site 610	Child 2 - NO: Did not sign February 2021 NSP.

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

Facility	Comment
Site 612	Child 3 - NO: Did not sign August 2020 NSP and no attempts to obtain CSW signature was attached to NSP.

#### 1. Explain the Cause.

Our Foster Care Social Workers (FCSWs) for much of this reporting period were not consistently able to see the Resource Families in-person to obtain signatures due to Covid-19 epidemic and much of our Resource Families did not have the technical skills to sign digitally. Much of the visits were completed virtually as the pandemic progressed.

#### 2. Corrective Action Taken.

Beginning 9/1/2021, if Resource Families and children are unable to be seen in-person, paperwork will be sent via postal mail to the families for signatures. If able to be seen in-person, FCSWs will obtain wet signatures from children (as age-appropriate) and resource parents during normal home visits.

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

A QA review will be completed at least 5 business days before each NSP is due by Supervising Social Worker to ensure that all necessary signatures are received prior to being sent to the assigned CSW for each foster youth. If the appropriate signatures are not present, then FCSWs will be sent out to immediately obtain signatures from Resource Parents and foster youth.

#### Reviewer Comment

## Health & Medical Needs

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

Facility	Comment
Site 610	Child 1- NO: No documentation of advisement of sexual and reproductive health rights in case file.
Site 610	Child 2 - NO: No documentation of advisement of sexual and reproductive health rights in case file.

#### 1. Explain the Cause.

Due to the ongoing Covid-19 pandemic, the majority of the conversations and discussions occurring during in-person and virtual home visits were focused on safety and protection of Resource Families and foster youth from COVID-19.

#### 2. Corrective Action Taken.

Beginning 9/1/2021, all appropriate-aged foster youth (10+ years old) will receive said advisement on a quarterly basis by assigned FCSWs during ongoing in-person/virtual visitation. This advisement will be documented in each foster youth's case file.

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

A QA review will occur monthly via a review of FCSW's treatment, contact notes, and NSPS by Supervising Social Worker. If documentation is not present, FCSW will facilitate the conversation at the next scheduled home visit.

#### Reviewer Comment

### Attach Documents

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