



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

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August 23, 2022

To: Supervisor Holly J. Mitchell, Chair
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Supervisor Kathryn Barger

From: 
Brandon T. Nichols
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 2022. The Contractor has one office located in the Fifth 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 3
PRIORITY 2 2
PRIORITY 3 5

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.

"To Enrich Lives Through Effective and Caring Service"

The Contractor was in full compliance with 9 of 11 applicable areas of CAD's Contract Compliance Review: RFH Requirements; Facility and Environment; Engagement and Teamwork; 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, ten DCFS placed children were selected for the sample. CAD reviewed the files of the ten children and virtually interviewed five to assess the level of care and services they received, four children (ages 3, 4 and two 7 years) were too young to be interviewed and one child refused to be interviewed. The five children were virtually observed to be clean and well-groomed. An additional four discharged children files were also reviewed to assess the Contractor's compliance with permanency efforts.

CAD reviewed four 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 locations and RFHs.

CAD noted findings in the areas of:

Priority 1

- General Contract Requirements
 - Special Incident Reports (SIR) for three children were not properly cross-reported in the I-Track system.

Priority 2

- Needs and Services Plans (NSP)
 - Child's NSP was not comprehensive and accurate; child's therapy date was not documented.
- General Contract Requirements
 - Child's SIR was not properly documented in the NSP.

Priority 3

- Needs and Services Plans
 - NSPs for five children were not signed by the Children's Social Worker and no documented efforts to obtain the signature.

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On June 28, 2022, the Children Services Administrator teams from DCFS' CAD and the Out-of-Home Care Management Division 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) 371-6052.

BTN:KDR
LTI:lf

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



LOS ANGELES COUNTY
HERMANITOS UNIDOS - SIBLINGS UNITED FFA (FFA)

Corrective Action Plan

2022

General Contract

1. Special Incident Reports are properly documented.

1a. In the Needs and Services Plans (NSPs) Contract, Exhibit A-5, SOW, Part B, Section 10.4(Contract, Exhibit A-5, SOW, Part B, Section 10.4)

Facility

Site 873

Site 874

Site 874

Site 874

1b. Properly cross-reported in the I-Track system Contract, Exhibit A-5, SOW, Part B, Section 10.4(Contract, Exhibit A-5, SOW, Part B, Section 10.4)

Facility

Site 873

Site 874

Site 874

1. Explain the Cause.

1.a. FFA did not have a protocol in place to log SIRs and, therefore, SIRs were not documented in the NSPs. 1.b. Social workers who have been trained on I-Track and SIR procedures did not follow protocol.

2. Corrective Action Taken.

1.a. and 1.b. On the week of August 2, 2022-August 5th, 2022, all social workers will receive a training on keeping a personal log of all incidents which shall include dates and names of the children involved in order that SIRs be included in NSPs. Training will also consist of I-Track cross reporting. Supervisor was hired on July 1st, 2022 to further review NSPs for inclusion of SIRs beginning August 25th, 2022.

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

1.a. and 1.b. A new supervisor was hired on July 1st, 2022, to do additional reviews of NSPs for inclusion of SIRs. Beginning August 25th, 2022, Administrator and Supervisor will do monthly reviews of SIR logs kept by social workers, to make sure SIRs are included in NSPs, and will also review SIRs to make sure they are cross-reported. A log shall be created for Supervisor and Administrator to document completion of monthly reviews, verifying that SIRs are documented in the NSP and SIRs are properly cross-reported.

Needs & Services

23. The NSPs were completed accurately and on time [ILS, §§88268.2(c) & 88278.1(a); Master Contract, Exhibit A, SOW, Part C, §§15.0 & 16.8.]

23b. Are comprehensive and accurate

Facility

Site 874

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

Facility

Site 924

Site 924

Site 924

Site 875

Site 875

1. Explain the Cause.

23.b Agency did not have a protocol in place to ensure therapy is included in NSPs. 23.g Agency Social workers, who were trained on DCFS protocol, did not follow NSP signature

2. Corrective Action Taken.

23.b & 23.g. Training will be done with social workers on week of August 2nd, 2022 through August 5th, 2022, regarding comprehensiveness of NSPs, with an emphasis on therapy dates, etc. On July 16th, 2022, the Administrator trained Q & A Staff to input information into the PMIS system in order to collect signatures (New DCFS process to obtain CSW signatures). (see attached)

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

23.b. & 23.g. Supervisor shall do monthly reviews effective August 25th, 2022, to make sure NSPs are comprehensive, with an emphasis on therapy dates, etc., and Administrator shall make sure Q&A staff are regularly and properly inputting NSP information into PMIS system in order to obtain DCFS/CSW signatures.