

County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

Forbes 2022
AMERICA'S
BEST LARGE
EMPLOYERS

510 S. Vermont Avenue, Los Angeles, California 90020 (213) 351-5602

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November 3, 2023

To: Supervisor Janice Hahn, Chair

Supervisor Hilda L. Solis Supervisor Holly J. Mitchell Supervisor Lindsey P. Horvath Supervisor Kathryn Barger

From: Brandon T. Nichols

Director

A GREATER LOVE FOSTER FAMILY AGENCY 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 A Greater Love Foster Family Agency (the Contractor) in October 2022. The Contractor has one office located 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



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

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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 7 of 11 applicable areas of CAD's Contract Compliance Review: RFH Requirements; Engagement and Teamwork; Permanency; Education and Independent Living Program Services; Health and Medical Needs; Personal Rights and Social/Emotional Well-Being; and Personal Needs/Survival and Economic Well-Being.

For the purpose of this review, seven DCFS placed children were selected for the sample. CAD reviewed the files of the seven selected children and virtually interviewed five to assess the level of care and services they received; two children (ages 1 and 3 years) were too young to be interviewed and 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 two RFH files and four staff files for compliance with Title 22 Regulations and County contracting requirements. CAD also conducted telephonic interviews with staff and Resource Family Parents. To assess the quality of care and supervision provided to the placed children, CAD also conducted virtual site visits of the Contractor location and RFHs.

CAD noted findings in the areas of:

Priority 1

- General Contract Requirements (3 findings)
 - Three children Special Incident Reports were not properly cross reported in iTrack.

Priority 2

- Facility and Environment (2 findings)
 - Annual vehicle maintenance checks were not completed for two vehicles.
- Needs and Services Plans (NSPs) (5 findings)
 - o Five children NSPs were not comprehensive and accurate.
- Personnel Files (1 finding)
 - o Personnel were not completing all annual ongoing training requirements.

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On December 13, 2022, the Children Services Administrator teams from DCFS' CAD and the Out-of-Home Care Management Division held an exit conference with the Contractor representatives.

The Contractor 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:CMM LTI:slr

Attachments

c: Fesia Davenport, Chief Executive Officer
 Oscar Valdez, Auditor-Controller
 Guillermo Viera Rosa, Chief Probation Officer
 Public Information Office
 Audit Committee
 Elizabeth Viramontes, Chief Executive Officer, A Greater Love Foster Family Agency
 Kellee Coleman, Regional Manager, Community Care Licensing Division
 Monique Marshall-Turner, Regional Manager, Community Care Licensing Division
 Celeste M. Fitchett, MSW, Bureau Chief Fiscal and Performance Audits



LOS ANGELES COUNTY



A GREATER LOVE FOSTER FAMILY AGENCY INC (FFA)

Corrective Action Plan

2022

GENERAL CONTRACT REQUIREMENTS

1. Special Incident Reports are properly documented.

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 1041

Site 1041

Site 1041

1. Explain the Cause.

During the site visit it was noted that an SIR was submitted three days after the incident was noted. After a management meeting to evaluate this issue, this was deemed to be a training issue.

2. Corrective Action Taken.

A Greater Love FFA scheduled training for staff on properly and timely submission of SIRs.

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

It is expected that all SIRs will be submitted timely and properly cross reported in the I-Track. To correct and prevent future deficiencies in this area A Greater Love FFA will/has: a. A Greater Love FFA administrator will conduct a comprehensive training for all FFA social workers on 01/17/2023 the training includes, but not limited expectations and to ensure timely submissions of SIRs. b. Office supervisor and QA department will provide additional efforts to ensure SIR are submitted timely and cross-reported in the I-track System. This expectation will be added to the QA file reviews.

FACILITY AND ENVIRONMENT

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

13c. Maintenance Log or Proof of regular/annual service and maintenance (Title 22 80074(c) & 87074(d))(Title 22 80074(c) & 87074(d))

acility

Site 1041

Site 1041

1. Explain the Cause.

The recruitment department during the RFA pre-approval trainings ensures that applicants are informed the importance to maintain vehicles that will be used to transport foster children in a good mechanical condition ensuring that vehicles are yearly checked by a qualified service provider; however, families were not always required to provide maintenance checks for vehicles that are not used to transport children.

2. Corrective Action Taken.

A Greater Love FFA will ensure that all vehicles registered by the RFA families maintain a yearly maintenance check form.

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

It is expected that all RFA files will maintain a vehicle inspection form and it is updated in the yearly basis. To correct and prevent future deficiencies in this area A Greater Love FFA will/has: a. The recruitment department has audited all its files to ensure proper documentation of maintenance checks. b. A Greater Love FFA will conduct a comprehensive training for all approved resource families on 02/21/23 the training includes, but not limited expectations and to ensure yearly vehicle maintenance checks are kept in file. c. Office supervisor and QA department will provide additional efforts to ensure vehicle check forms are maintained for all vehicles used to transport foster children. This expectation will be added to the QA file reviews.

NEEDS AND SERVICES PLANS

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.]

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Facility	
Site 1040	
Site 1040	
Site 1041	
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Site 1040	

1. Explain the Cause.

FFA social workers are trained in prepared to submit NSP to their supervisor at least seven calendar days prior to the due date to their supervisor for revision and approval, then obtain, the signatures from RP and child. It was found as a training issue for FCSW did not include TILP request for services and goals being properly documented.

2. Corrective Action Taken.

FFA supervisor and social workers will be re-trained on NSP expectations and documentation.

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

It is expected that all NSPs are submitted including all TILS (if applies) and Goals which are comprehensive and timely, and the agency makes reasonable efforts to obtain CSW approval. To correct and prevent future deficiencies in this area A Greater Love FFA will/has: a. The FFA administrator will conduct a comprehensive training for all FFA social workers on 01/17/2023. The training included but is not limited to reviewing the NSP template, expectations, and procedures to prepare and submit reports, obtain CSW approvals on NSPs and document efforts to include approval signature. b. Office supervisor and QA department will keep track of approved signed NSP and documented efforts. This expectation will be added to the QA file reviews.

PERSONNEL FILES

78. Personnel are receiving annual on-going trainings as defined in the SOW and ILS [Training Matrix and EXHIBIT A SOW Part C, 17.8 & 17.8.5]

78b. Implicit BiasSOW, Part B, Section 9.4

Facility

Site 1041

Site 1040

78c. Cultural CompetencySOW, Part B, Section 9.4

Facility

Site 1040

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

Facility

Site 1041

78e. Reduction of Law Enforcement InvolvementSOW, Part B, Section 9.4

Facility

Site 1041

1. Explain the Cause.

It was found that program employees did not receive annual on-going training on Implicit Bias, Cultural Competency, Reproductive and Sexual Health and Law Enforcement Involvement. After the review it was concluded that the program's HR department was not keeping an accurate annual training matrix for employees.

2. Corrective Action Taken.

The FFA administrator reviewed all employees training records, it was found that 30% of its employees were missing some of the annual training required. Immediately, employees were provided with training.

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

To correct and prevent future deficiencies in this area A Greater Love FFA will/has: a. The FFA administrator will review with personnel staff to ensure that the agency's policies are followed, and all employees should have the annual on-going training. b. The HR Department has initiated a matrix of annual training for employees. c. This expectation will be added to the QA file reviews.